
Gender and sexuality in the Kenyan education system: Is history repeating itself? An exploratory study of information on sexuality within Nakuru town

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A dissertation submitted in partial fulfillment for the Masters in Women's Law, Southern and Eastern African Regional Centre for Women's Law, University of Zimbabwe, 2006

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Declaration

I declare that this is my original work and has not been presented for any study programme in any university or college or for any thesis. The ideas and views except where expressly indicated are strictly my own and I take full responsibility for them.

Acknowledgements

I would first and foremost like to acknowledge NORAD for giving me the opportunity to pursue this course. It was only through their generosity in sponsoring the women's law programme that this has been possible.

I am entirely grateful to my supervisor Professor Julie Stewart who took her time and guided me patiently through the hurdles of the research process and writing.

These acknowledgements would not be complete without mention of my respondents especially the women who took their time and opened up their lives willingly, for me.

To my mother Felgona Othieno and my father Gabriel Otieno and all my siblings, whose constant encouragement have made even what looked insurmountable possible.

Without the support and encouragement of my friends both in Nairobi and Nakuru all this would not have been possible.

I would also extend my appreciation to my colleagues in the Masters in Woman's Law class who gave encouragement and support both within the class and socially and lightened my workload.

Last but not least my son, Ian Odhiambo Adera, who deserves a special mention for not only his support, but for personal sacrifices which he had to undergo in order for me to complete this course.

Dedication

TO IAN ODHIAMBO ADERA

The wind beneath my wing.

Abbreviations

AIDS	Acquired Immune Deficiency Syndrome
AU	African Union
CEDAW	Convention on Elimination of All Forms of Discrimination Against Women
EFA	education for all
HIV	human immune virus
ICESCR	International Covenant on Economic, Social and Cultural Rights
ICRC	International Charter on the Rights of the Child
IEC	information, education and communication
KIE	Kenya Institute of Education
KGGA	Kenya Girl Guide Association
MDG	Millennium Development Goals
MOEST	Ministry of Education, Science and Technology
UNDHR	United Nation Declaration of Human Rights
SIECUS	Sexuality Information and Education Council of United States
VCT	voluntary counselling and testing

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CHAPTER ONE

Introduction

'I was told that a good girl does not have a boyfriend, a good girl does not say yes to a man even if she is attracted to him. But nobody told me when it would be okay to be involved in a relationship. I agreed to get married to the first boyfriend I ever had. I am now a widow. I was never told about sex or even menstruation. If I had better information I would have lived my life differently' (comments from a 38 year old widow).

In Kenya, traditionally, sex education was undertaken as a continuous process. The education processes began quite early within the extended family when an aunt or a grandmother was designated such a duty. Sex instructions even then were never expected to come from the parents. However, different communities had different initiation processes which, being rites of passage, of essence included education on sexuality (Mensch, 1999).

The legacy of information on sexuality is still the same. Instructions on sexuality still seldom come from parents. In the presence of their children the parents do not say certain sexualized words or act or make a gesture that in any way could denote sexual issues. These silences are extended to behaviour and send subtle messages to children about the need to keep silent on issues of sexuality.

With modernization, the traditional ways of passing on education on sexuality has been eroded, especially within the urban areas. The gap that has been created by this has not been filled (Ojwang 1991). The responsibility of education on sexuality has been left largely to teachers as parents have not been able to educate their children on such issues. These silences have led to girls being brought up more or less the same way most of us were brought up – without any particular guidance on sexuality matters. The only difference seems to be that they have heard about menstruation, unlike most of their parents although likewise with little detail.

With the advent of HIV/AIDS there appears to be a more urgent need to talk about sexuality and this has opened up the possibility of talking about sexuality in homes, schools and even in churches. The question is whether society has taken advantage of this opportunity. The need to curb HIV/AIDS has, however, brought with it additional problems: it has reinforced the silences. Sexuality is now seen from a moralistic point of view and apart from messages of its danger, nothing is said about it (Phillips, 2004). Sexuality is now, more than ever before, not talked about for its own sake but in the context of the control of HIV/AIDS. This has tended to overshadow the broader aspects of sexuality which, if properly targeted, would ultimately lead to better control of HIV/AIDS as it would lead to more informed choices.

This study is meant to be a mirror to reflect how we are dealing with the need for information on sexuality and how the lack of such information affects the lives of women. It intends to show the importance of education on sexuality in the lives of women and the gaps that exist within the law, in schools and in homes, and how they encourage these silences. With an insight into the effects of these silences on the women, we are able to forecast the effect that the lack of information on sexuality might have on the girl. This will therefore demonstrate the importance of education on sexuality in the lives of young girls.

This research looks at the Kenyan educational frameworks currently in place and whether they are sufficient to tackle the dilemma of education on sexuality. Further it will look at the international instruments that deal with information as a right and, more specifically, sexuality as a human right. I will explore the gaps in the national laws and compare them with the international instruments in order to make a case for the right to information and education on sexuality as a human right in Kenya.

The lived realities of women are important for this study as they give us an insight into the situation of women, how they relate to the laws in place and how they have been affected by the lack of information on sexuality.

How do we express sex, sexuality and gender?

There is a need to define several terms which shall be used in this study. These are terms such as sex, sexuality and gender. It is also crucial to be clear on the meaning of education on sexuality. According to the Sexual Term Glossary (internet available) sexuality is defined as:

‘... giving and receiving sexual pleasure, as well as enabling reproduction. Sexuality is a total sensory experience, involving the whole mind and body – not just the genitals. Sexuality is shaped by a person’s values, attitudes, behaviours, physical appearance, beliefs, emotions, personality, likes and dislikes, and spiritual selves, as well as all the ways in which one has been socialized. Sexuality is about sexual pleasure, being female or male, this is identity. It also encompasses gender, gender roles and social norms as they affect physical, emotional and spiritual life’ (*Glossary of sexual terms*).

Machera describes it as:

‘Sexuality is a complex term with multifaceted meaning referring to deep emotional feelings as well as issues of power and vulnerability in gendered relationships’ (Machera, 2002).

These feelings, she says, are linked to our biological existence as individual males and females. She acknowledges the fact that sexuality is a social construction.

McFadden in *Sex, sexuality and the problem of AIDS in Africa*, describes it as:

‘The socio-cultural construction of sex shaped and defined by the physical, language and social character of each society.’ (McFadden 1992)

Drawing on these definitions I shall take my working definition of sexuality to include but not be limited to the following: sexual identity, behaviour, dress, movement, excitement, relationships, emotions, motherhood, marriage, sexual rights, indecency, potency for sex, state control, sexual satisfaction, HIV/AIDS, taboos and use of one’s body to negotiate power within relationships and gender.

Gender refers to the male and female roles that are shaped by society (WHO official website). These are learned by individuals and renegotiated by each new generation. These are determined by the socialization processes. They vary from one society to another and even within the same society, depending on social class, family, ethnic and religious backgrounds. These roles are changeable rather than static.

Sex is determined at conception. It determines our biological reproductive role and biological and physiological attributes that define us as a woman or man (Stewart, 2004). The terms *female* and *male*, *girl* and *boy*, refer to sex while *feminine* and *masculine* refer to gender (WHO official website).

Sexuality education according to SIECUS is defined as follows:

‘Sexuality education is a lifelong process of acquiring information and forming attitudes, beliefs and values about identity, relationships and intimacy. It encompasses sexual development, reproductive health, interpersonal relationships, affection, intimacy, body image and gender roles. Sexuality education addresses the biological, socio-cultural, psychological, and spiritual dimensions of sexuality from the cognitive domain; the affective domain; and the behavioural domain’ (SIECUS, 1996-2005).

Education on sexuality therefore means addressing the biological, socio-cultural, psychological and spiritual dimensions of attitudes, beliefs and values about identity, relationships and intimacy in the lives of the children. Since it involves the shaping of our values and beliefs, it is at our very existence so education on sexuality is therefore about giving information on life. This means that education on sexuality is a socialization process or ‘gendering’ and therefore holds great significance for our lives.

Why I chose the topic on silences about information on sexuality

This topic has a personal captivation for me. As I grew up I was completely kept in the dark on sexuality issues – not even menstruation was discussed. This led me to wonder whether there had been any improvement in the education system, given the silence on sexuality both within the home and at school. It also led me to explore whether the lack of information has in any way been detrimental to the women who were told nothing about sexuality. I also realized that sexuality controls our lives, especially as it is part of the socialization process which leads to gender identities. Society's resources are distributed according to the socialization processes leading to women receiving the least benefit. Control of information on sexuality is a means of oppression for women and I felt that if women could access this information, it would help break the chains of oppression.

Demarcation of the study

In designing this research I had to make a decision about which geographical area I could conduct the research from. Nakuru town was chosen for two major reasons. Firstly, having lived there for a long time, I knew the area well. Secondly there would not be a language barrier due to the cosmopolitan urban nature of the town.

This research concerns issues of sexuality for women and girls. This meant that I had to interview girls and boys as well as their teachers in schools. The girls and boys in primary schools ranged from between 10 to 15 years of age. I only interviewed one 9 year old boy. The reason for choosing the lower age limit as 10 years was due to ease of communication and also the proximity to the age of puberty or adolescence. This facilitated an easy flow of information without the researcher having to resort to long explanations for the respondents as they were old enough to understand issues of maturity.

I also had to interview women wherever I could find them. Men's opinions were very important too, in order to get a balanced view. However because I was using the women's law approach I decided to focus more on the women and so I interviewed more women than any other group of people.

Although I had roughly designated the groups of people to interview I had to take a grounded approach as to who among this group was interviewed. The people whom I interviewed were obtained by either a chance meeting or by visiting a particular institution. For example, as I went into schools, I interviewed teachers who were available to be interviewed at that point in time.

Whenever I told people that my research was about the silence surrounding women's sexuality, they actually offered themselves for interviews. Some even just proceeded to discuss the issues with me there and then. One man who I had not even scheduled to interview offered information. He told me that he believed that his sister must have really suffered as he was sure that nobody discussed with her issues of sexuality, let alone menstruation. One respondent who had heard that I was conducting such research actually called me to make an appointment for an interview.

I targeted two primary schools and one secondary school but the study was not confined to schools. All these schools were public schools. The primary schools were for pupils from all socio-economic classes, as due to the free primary education, all students were allowed entry into any school of their choice.

The secondary school was, however, for mainly a lower economic class of students. This is due to education in secondary schools in Kenya not being free and so parents choose schools according to the facilities available and whether they can afford them.

Students from other institutions were also interviewed. This included other secondary and primary schools and collage students. The Nakuru provincial hospital's youth Voluntary Counselling and Testing (VCT) centre was also visited to bring in the aspect of information in HIV/AIDS management.

Table of respondents

	Age group	Description	Number
Girls	11-18		16
Single women	19-50	Widows, divorced, unmarried.	7
Married women	19-50		15
Boys	9-18		5
Men	19-50	4 single 2 married	7

Delimitation of the geographical area

The area of Nakuru town was chosen because of my familiarity with it. Nakuru town is 157 kilometres north-west of Nairobi and is the fourth largest town in the country. It has become the centre of the farming community in the Rift Valley province with modern shopping facilities, sports clubs and high class hotels.

The research was carried out in the urban area of Nakuru town.

Assumptions

The following were my assumptions:

- 1 Kenyan women are ignorant of their sexuality and hence cannot assert themselves in sexual relationships.
- 2 The issues of women and girls' sexuality are not appropriately or meaningfully discussed due to the needs of the society to control their sexuality.
- 3 The woman's sexual organ is conveyed to be dirty and hence should not be touched nor discussed and the woman's sexuality is conveyed to be hierarchically lower than that of the man hence less important.
- 4 The reasons for the silence are:
 - Women and girls' sexuality is perceived to be for the pleasure of the men and women do not need to know much about it.
 - It is conveyed as leading to and for reproduction so its rightful place is within marriage and not for pleasure so it should not be discussed in any other context.
- 5 The lack of control of women and girls' sexuality has left them more vulnerable to HIV/AIDS.
- 6 Women and girls have been discriminated against in their right of access to information regarding their sexuality.

¹ Jackson (2002:111) states that 'the bitter truth is that marriage is probably the relationship through which the majority of women in southern Africa become infected'. See also Kelly *et al.* (2003,54).

Research questions

- 1 Are Kenyan women ignorant of their sexuality? If so, does this interfere with their ability to assert themselves in sexual relationships?
- 2 Are the issues of women and girls' sexuality appropriately or meaningfully discussed and, if not, is this as a result of the need for the society to control their sexuality?
- 3 Is the female sexual organ conveyed as dirty and hence that it should not be touched or discussed and women's sexuality conveyed to be hierarchically lower and less important than that of the men?
- 4 Are the silences as a result of:
 - The women and girls' sexuality being perceived to be for the pleasure of the men and so women need not know about it?
 - The female sexuality is conveyed as leading to and for reproduction and as such having its rightful place within marriage and not for pleasure?
- 5 Has women and the girls' lack of control of their own sexuality left them more vulnerable to HIV/AIDS?
- 6 Have women and girl children been discriminated against in their right of access to information regarding her sexuality?

Objectives of the study

The study's main objectives are:

- 1 To explore women and girls' access to information regarding their sexuality.
- 2 To show the effect of the lack of information about sexuality on women and girls' lives.
- 3 To see whether the legal frameworks put in place are adequate to ensure the right to such information.
- 4 To explore and suggest remedies for such lack of information, both socially and legally.

CHAPTER TWO

Human rights frameworks

International instruments

The right to information on sexuality has a strong basis in the international instruments. The Universal Declaration for Human Rights (UDHR) sets the pace by declaring that every person has a right to a holistic education. The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) also makes a case for the right to information on sexuality being a woman's human right. It covenants all parties to ensure that there is no discrimination against women and that all harmful cultural practices are legislated against. It calls attention to the elimination of stereotyping concepts of the roles of women and men in education by calling for the revision of textbooks and teaching methods.

It sets the foundation for the right to information on contraceptives and condom use by stating that education should be inclusive of education on family planning methods. CEDAW and UDHR also set out the case for equality and non-discrimination in schools on information on sexuality. CEDAW specifically addresses issues of gender stereotyping in education. It specifies that education should be such that it ensures the health and wellbeing of families.

The United Nations Covenant on Economic, Social and Cultural Rights (ICESCR) comes out very strongly with provisions which can be used to argue not only for the right to information on sexuality but for recognition of this right as a human right. Article 13 binds states parties to ensure that every person enjoys the highest attainable standard of physical and mental health. Sexual fulfilment is essential for the attainment of such a stature. It also recognizes the need for a holistic approach to education. Education should be such that it allows the person to effectively function in society. Sexuality reaches out to the very core of human existence and without sexuality education a person cannot be said to be fully functional in society.

The Covenant on Economic, Social and Cultural Rights gives rights to parents to be involved in their children's education but puts a limit to such rights by ensuring that the state sets minimum standards for such education. Unlike CEDAW and UDHR which seek parental decisions in the type of education that their children should have, this covenant puts the responsibility of the provision of a certain quality of education upon the state. This binds the state to provide an education which allows a person to function effectively in society. This makes a very strong case for the provision of sexuality education by the state at all levels as the responsibility of such an education is their sole responsibility.

The Cairo Declaration on Population and Development (ICPPD) commits state parties to removing all barriers that inhibit access to family planning services, information and education. It urges governments to ensure that their policies and programmes conform to human rights. Article 7 recognizes the need to enhance women's gender awareness through education that is aimed at eliminating negative gender stereotyping.

On the African front the Africa Union Charter on Human and Peoples Rights (African charter) reinforces the right to information at Article 9. Article 18 talks about the need to eliminate all kinds of discrimination and ensure the human rights of women and children.

The Protocol to the African charter adds weight to the argument for the right to information on sexuality as a human right. Through it states parties bind themselves to enact laws and put into place other measures to eliminate discrimination and harmful practices which endanger the health and general wellbeing of women. It also recognizes the following rights: the rights to sexual health, reproductive health, education and training of women at all levels. Article 2 is very comprehensive in setting out what states parties need to do in order to

eliminate discrimination against women. It addresses the need to include the equality principle in states' constitutions and integrate gender perspectives into policy decisions, legislation and development. This creates a strong basis for the legal framework that could govern education on sexuality within the Kenyan context.

The Convention on the Rights of the Child identifies the right of children to receive information at Articles 13 and 17. It also gives the children the right to an opinion.

Paragraph 96 of the Beijing Declaration extends the definition of reproductive rights to include sexuality:

'The human rights of women include their right to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence.'

The need to decide freely and responsibly on issues related to sexuality requires an informed choice to be made. This informed choice can only be achieved if the women and the girls have adequate information on sexuality. There is a need for Kenyan laws to be in compliance with the international instruments by being integrated into the domestic laws.

Millennium Development Goals

The Millennium Development Goal 2 deals with achieving universal primary education by 2015 while the third goal is to achieve gender parity in primary and secondary schools by the year 2005. This goal of achieving gender parity for primary and secondary schools has not been met in Kenya. The second goal aims at raising the standard of living of women through education. It recognizes that education gives people a choice of how they live their lives. According to the *Millennium Development Goals report* (2005), education of girls has social and economic benefits. In order for a person to reap the maximum benefits from an education, the education has to target the need for a change in attitudes which is what the aim of information on sexuality is. The report recognizes that enrolment in schools is only half the battle; the real problem is the retention of girl children in school (*Millennium Development Goals report*, 2005). With information on sexuality the girl child drop-out rate from school could be drastically reduced as it would mitigate some of the factors which lead to school drop outs.

The gender parity in schools should be broadly interpreted to include parity in the quality of education given in schools. This should take into consideration other factors that cause gender disparity in performance at school, such as teachers' attitudes and socialization processes both at home and in schools. It should take into consideration that teachers tend to treat issues of sexuality as girls and women's problems and so leave most of the responsibility to them.

On the third goal, the report affirms that equality is a human right:

'This means equality at all levels of education and in all areas of work, equal control over resources and equal representation in public and political life' (*Millennium Development Goals report*, 2005).

In order for this equality to be achieved, there is need for the education to be meaningful. Education or information on sexuality gives a person the requisite confidence to pursue equal control of resources and equal representation in public and private life. The need for information on sexuality as a human right cannot be overemphasized.

Educational frameworks

Constitution

Section 82(1) of the Kenyan constitution prohibits any law which is discriminatory of itself or in its effect. It also prohibits discrimination of persons in any manner. It then defines discrimination at sub-section (3):

‘In this section the expression “discriminatory” means affording different treatment to different persons attributed wholly or mainly to their respective descriptions by race, political opinions, colour or creed’

This description does not include discrimination on the basis of gender and so leaves an opening for discrimination on this basis. Sub-section (4) has a proviso which states that the non-discrimination clause does not apply on issues of personal laws. This does not auger well for information on sexuality as it might be said to fall under the ambit of personal laws since it is mostly controlled within the family and schools. The Kenyan constitution does not acknowledge the right to affirmative action.

The Kenyan constitution does not recognize that all persons are born equal and therefore have equal rights. This contravenes human rights, especially article 2 (a) of CEDAW which states that states parties should ensure the principles of equality of women and men are enshrined in their national constitutions. The Kenyan constitution does not guarantee a right to education. This falls short of the requirements of the international human rights instruments especially article 13 of the Covenant on Economic, Social and Cultural Rights which not only gives a right to education but provides for the quality of education as well.

Education Act Chapter 211

This lays down a framework for the management of the education sector. It does not deal with the quality of education but gives authority to the ministry to make policies on education in Kenya. This framework leaves leeway for the formation of adequate policies for education.

Section 23 of the Act establishes the Kenya Institute of Education (KIE) whose purpose is to conduct research and carry out the preparation of educational materials, including curriculum development.

Kenya Institute of Education

The Kenya Institute of Education conducts research and evaluation on education and training. It is charged with designing and developing curriculum for all levels of education and training below university level. This includes the curriculum of teacher training colleges. It also produces learning materials, such as school textbooks, manuals, videos, audio cassettes, CDs, diskettes and charts. It is responsible for conducting in-service training for teachers and trainers on new curriculum and trends in education. They also evaluate books to assess their suitability for use in the learning institutions.

The Kenya Institute of Education is a semi-autonomous government institution run through funding from the government, development partners and income generating projects such as sale of books (Kenya Institute Education official website, 2005).

The Kenya Institute of Education is therefore responsible for all information that gets into Kenyan government learning institutions, including municipal schools, as it forms and controls the curriculum of all these institutions other than the universities.

Education sector policy on HIV/AIDS

This policy has been used by Kenya Institute of Education to incorporate education on sexuality into schools in Kenya. The document aims to mitigate the effects of HIV/AIDS within the Kenyan education sector. It seeks to deal with the way HIV/AIDS has affected women and men differently and recognizes the need for gender responsiveness in mitigating its impact. It recognizes the biological, socio-cultural and economic circumstances of the women.

On education it states that all learning institutions should have the responsibility to address the issue of HIV/AIDS:

‘7.1.1. All learning institutions have a responsibility to address HIV and AIDS through education by developing skills and values, and changing attitudes to promote positive behaviours that combat HIV and AIDS.

7.1.3. Life Skills and HIV education shall be mainstreamed into the existing curriculum and co-curricular activities at all levels.’

On learning materials it says that all institutions should have relevant and suitable information education communication (IEC) materials.

On access to information on HIV and AIDS it states:

‘7.2.1. Information provided on HIV and AIDS must be current, accurate, factual and comprehensive and presented in a manner, language and terms that are understandable, acceptable and contribute to positive behaviour change.’

It underscores the need for the learning institutions to create an enabling and gender responsive environment to ensure that girls are encouraged to complete their education. This distinguishes the need for the messages to be meaningful and appropriate. The teacher education curriculum should also reflect this need to tackle HIV/AIDS.

HIV/AIDS in Kenya is mainly transmitted through unprotected heterosexual sex (Booth, 2004). In Kenyan, young people are quite vulnerable to HIV/AIDS (*Pathfinder*). This means that to effectively control the spread HIV we need to acknowledge and recognize the sexuality of this age group and find effective ways to address their sexual activity with the intention of ensuring that they make the right choices.

This policy document’s concern with mitigation of the effects of and control of HIV/AIDS can be translated into a powerful tool to tackle the lack of meaningful education on sexuality in our schools. The ultimate result of education on sexuality is to enable the child to make informed choices on issues of sexuality. In countries where such information is available the rate of premarital sex, unprotected sex, pregnancy and HIV/AIDS among teenagers is significantly lower than that of countries that do not give such information. The control of HIV/AIDS necessitates that we not only preach ABC (abstinence, being careful and condoms) but accompany it with current, accurate, factual information.

This policy enlists the assistance of local communities, religious groups and leaders, parents, care-givers and guardians in order to ensure that HIV/AIDS prevention and control is mainstreamed within learning institutions and at home. To this extent it conforms to the international human rights instruments requirement for parental involvement in education. It also conforms in that it not only requires the teaching of gender but the provision of a conducive environment to promote gender parity as well.

The need for information materials in institutions does not limit such provisions to only schools but to other

institutions such as voluntary counselling and testing (VCT) centres. The materials at the youth voluntary counselling and testing centres were found wanting.

Ministry of Education, Science and Technology sessional paper

This sessional paper is the policy framework that governs the education sector in Kenya. It stipulates that the focus of education in Kenya is on acquisition of life skills and life-long learning and instilling values. These values are, among others, equality, honesty, love, respect, tolerance, cooperation and democracy. The education must include respect for human rights and issues concerning drug and substance abuse, violence and social exclusion. It states:

‘For equity, it will be necessary to take affirmative action to compensate for historical and emerging inequalities and disparities in all areas of our national life, including gender’ (MOEST sessional paper, 2005).

It provides for affirmative action to curb gender disparity. It also provides for the incorporation of emerging issues into the school curriculum. These are positive aspects of this document as they can be used to introduce education on sexuality as an emerging issue in the light of the HIV/AIDS pandemic. However the issue of affirmative action being introduced by the policy document might be problematic since the Kenyan constitution does not recognize it.

This document points out the need to take the effects of HIV/AIDS into consideration while dealing with matters of education. It refers to the need to recognize the effects of HIV/AIDS on teachers and parents who may become sick and die and the effect this would have on the children who are orphaned but it does not appreciate that the children themselves could be infected by the virus, and hence need an intervention. This official denial of the children’s engagement in sexual activity is a major impediment in the provision of any meaningful education on sexuality in Kenya as without its acknowledgment there are no legal frameworks laid down to tackle information or any other intervention that would protect them.

Children’s Act

The Kenyan Children’s Act describes education as ‘giving intellectual, moral, spiritual instruction or other training to a child’. It describes the child as any person below the age of 18 years but this age can be adjusted by the courts as long as the child is still in need of parental assistance.

At section 5 it outlaws discrimination against children on the grounds of origin, sex and social or economic status, among others. This Act also guarantees a right to education to every child in accordance to the United Nations Convention on the Rights of the Child. At section 14 it states:

‘No person shall subject a child to female circumcision, early marriages or other cultural rites, customs or traditional practices that are likely to negatively affect the child’s life, health, social welfare, dignity or physical or psychological development.’

This Act stresses the importance of parental guidance on education and provision of guidance in moral, social, cultural and other values. It lays out the duties of parents as protecting the child against neglect, discrimination and abuse.

It lays the foundation for the teaching of sexuality education in schools and within the home. It highlights parental guidance and involvement in the education of the child. Parental participation is crucial for any gains to be felt in education on sexuality.

This Act is very closely in compliance with the international instruments. It guarantees a right to education and no discrimination on the basis of sex.

Literature review on silences on women's sexuality

In *Opening a can of worms: A debate on female sexuality in the lecture theatre*, Machera discusses issues which are similar to those in my findings, such as: how the female body in Africa is located within the social milieu; how girls are told that sex is good only for marriage; how the female sexual organ is held to be hierarchically lower than that of men. She also discusses the good woman bad woman dichotomy and how good women should not flaunt their sexuality. She states that sexuality is a learned relationship to the world (Muchera, 2002).

Adjetey lists the culture of silence as a form of violence against women in Ghanaian society. She says that women are not allowed to discuss issues of sex in public and this thus limits the women's ability to complain about issues such as marital rape (Adjetey, 1998).

This is revealed by empirical research carried out in Zimbabwe which shows that while cultures previously taught that penetrative sex was reserved for within marriage and for reproduction, young people in rural Zimbabwe now view it as a routine social interaction (Ruganga, 1998). This situation is very similar to that in Nakuru where research conducted in Nakuru district in 1989, on 2059 girls and boys enrolled in 29 urban and rural co-education secondary schools, revealed that the age at first coitus was on average 13 years for the boy and 16 years for the girl (Kiragu, 1995; Ojwang, 1991).

Tamale in *How old is old enough?: Defilement and age of consent in Uganda* discusses the silence on women's sexuality by stating that when issues of sexuality are discussed they are discussed in the light of reproduction, the family and child care while the issues of pleasure and desire are marginalized (Tamale, 2001). Yet the issues of desire and pleasure drive young people into sexuality. Tamale says that the negative connotations used in discussing sexuality with the youth portray sex as evil. These lead students to associate sexual maturity with marriage, reproduction, education, the law, religion and parental authority. This leads to them 'parroting what they had been tutored in conservative sex education'. This was true to my study findings. I found that since students had been taught that sex before marriage was wrong, they recited this idea back. It was my feeling that this, coupled with the fact that the burden of education on sexuality and its consequences being placed on the girl increased the silence, even with regard to issues of defilement. This research revealed similar findings to those of Tamale – that sexuality is seen as related to reproduction and marriage.

The issue of silence on sexuality is explored by Tambiah Yasmin in *Sexuality and human rights*. She says that the silence is a result of societies' need to control the sexuality of women and is discriminatory to the extent that it takes male sexuality as natural and legitimate while that of women as problematic. She further discusses the influence of socialization on a married woman's ability and right to say no to sex with her husband. She examines how through the socialization processes, a girl child is made to feel inferior to the boy child and this leads to her being unable to assert herself in life (Tambiah, 1995).

In describing how the society was ordered in Victorian time Europe, Michel Foucault in *The history of sexuality*, describes silences on sexuality:

'Nothing that was not ordered in terms of generation or transfigured by it could expect sanction or protection, nor did it merit a hearing. It would be driven out, denied and reduced to silence. Not only did it not exist, it had no right to exist, and would be made to disappear upon its least manifestation – whether in acts or words. Everyone knew, for example, that children had no sex, which was why they were forbidden to talk about it, why one closed one's eyes and stopped one's ears whenever they came to show evidence to the contrary, and why a general and studied silence was imposed' (Foucault, 1976).

This description aptly still describes the society that we live in today and is in line with my findings in this research.

An'na'im, while discussing strategies to get the states to bringing their domestic law and practice into conformity with international human rights, says that there is an internal discourse and cross-cultural dialogue. Internal discourse means involving internal actors and having external support and assistance in the form of capacity building and funding without undermining the efficacy of the whole process. Cross-cultural dialogue or comparison refers to the use of external examples, such as, in this context, the Netherlands experience, to inform reform. By dealing with reform in this way it creates sensitivity to the cultures of those for whom change is sought. This cross-cultural dialogue, he emphasizes, should be applied by internal actors so that the discourse is internalized. This ensures ownership of the processes and acceptance of the outcomes (An'naim, 1994).

In *Thinking sex*, Rubin echoes this when she writes that the idea that sex is in itself harmful to the young has led to social and legal structures which are designed to insulate them from sexual knowledge and experience. She discusses how modern society has put forward a sexual value hierarchical system which then metes out resources dependent on this system. These are the power systems which come into play on matters of sexuality (Rubin, 1984).

The WHO working definition on sexual health and rights includes a right to services related to sexuality. It includes access to sexual and reproductive health care. It includes the right to 'pursue a satisfying, safe and pleasurable sexual life'. It includes the right to education on sexuality and bodily integrity (WHO official website).

The right to education on sexuality would therefore include the right to information on life skills. These include skills such as self understanding, conduct and behavioural skills, inter-personal skills and social skills (Mutunga, 2003).

The lack of laws and policies governing information on sexuality in Kenya has been a result of the stakeholders in the education sector, such as schools, religious organizations, parents and the communities, rejecting it. The previous discussions on introduction of education on sexuality in Kenyan have been riddled with controversy (Brockman, 1997).

CHAPTER THREE

Research methods and methodology

Theoretical perspectives

The point of departure of this research is that the reform agenda set in the west is not always good for African countries but that initiatives of other countries and their cultures should inform reform in Africa (Bentzon, 1998). This research is informed by the perspective that roles and behaviours of women and men are not products of biological determinism but are culturally specific. This perspective acknowledges the need to recognize the biological differences and manage them but it should not be used as a means of subordination of women (Stewart, 2004).

Conducting this research using the women's law approach meant that I started with the focus on the women and how they relate with the law. I was able to incorporate various methodological approaches which gave me the flexibility I required in order to explore the women's lived realities. This approach is based on the premise that the law and the society are largely modelled on the interests and experiences of the men. In this instance my assumptions were that information on education on sexuality was geared towards the control of women's sexuality by the patriarchal society and was thus for the benefit of the men. In order to determine this from the woman's perspective I had to collect empirical data on women's lived realities and then relate these to laws and policies with regard to information on sexuality and practice.

I used the bottom-up approach of women's law which informed my recommendations for change. This ensured that the recommendation were well grounded and realistic as they arose directly from the problems of the women and, in some instances, from their suggestions.

I used the grounded theory as described in *Pursuing grounded theory in law* (Bentzon *et al.*, 1998):

'Grounded theory is an iterative process in which data and theory, lived reality and perceptions about norms are constantly engaged with each other to help the researcher decide what data to collect and how to interpret it.'

When I started my field research I was under the mistaken notion that boys are probably more informed on issues of sexuality than girls but upon going into the field I realized that they seemed to have even less information. This led me to wonder why because it did not add up considering that they have more influence in sexual relationships. This led me to ask specific questions aimed at finding an answer to this anomaly, being aware that socialization both within the society and the schools is crucial in distribution of power between genders.

This process of engaging theory with reality and theory with data continued throughout the whole process of data collection, analysis of the data and even at the write-up stage. I had to constantly resort to theory to explain data collected and vice visa. In one instance I was again under the mistaken belief that girls engage in sexual activity earlier and more often than the boys but upon interviewing several men and conducting internet research on data available in Kenya it turned out that the boys get involved in sexual relationships on average one year earlier than the girls. I therefore resorted to theory to explain the data which pointed out that the hype about girls' sexual activity is based on her biological ability to reproduce.

When I went to obtain a permit from the municipal offices, the officer in charge introduced me to the Director of the Girl Guides Association in Nakuru. She informed me that they would be conducting a seminar for teachers within Nakuru on teaching sexuality in schools. She informed me that the teachers from various schools would be attending. I realized that I would get a wide range of opinions from these teachers and I decided to attend the meeting.

My approach entailed that I also ask opinions of men since women do not act in a vacuum but within a social setting. This enabled me to get a more gender-balanced opinion although the bulk of my interviews were done with women.

Legal pluralism

Engaging with the society

This approach recognizes that there are other regulatory or normative orders other than the formal laws which control and affect the lives of people (Bentzon *et al.*, 1998). This approach recognizes that women react to different situations due to other external influences, such as different people and institutions like the church. This led me to examine the influence of parents, children, aunts and religious conviction on women's decisions.

The Kenyan school syllabus has been greatly influenced by religious institutions. This led to my desktop research to determine the role of the church in education on sexuality. From this I was able to include them on my recommendation for change as taking into account this influential stakeholder.

The stage

Women are players on the stage of the environment in which they live. As actors they react to other actors and the structures on this stage. The structures and actors are part of the social and cultural norms, value systems which provide women with options of how to achieve their aims and goals (Bentzon *et al.*, 1998). This approach assumes that the processes of change occur through the media of human beings. Actors such as the teachers were very important to this study as they were the main source of information on sexuality. They were also influenced by churches and other actors, such as their parents.

The teachers were also actors as their own experiences were taken into account yet their performance was affected by other actors and structures.

The teaching processes were influenced by the introduction of the Millennium Development Goals. This influenced the government's decision to start the free primary education programme which has led to the few available resources being overstretched in the attempt to accommodate the large numbers of children enrolled in primary schools. The need to fulfil the promise of education for all by the year 2015 as envisioned by the goals has led to overcrowding and this has overcommitted both teachers and teaching resources.

The Youth Voluntary Counselling and Testing (VCT)¹ Centre is another structure which I examined. This could no longer perform its outreach functions to schools as the centre was not considered a mainstream unit of the hospital since it dealt with the sexuality of young people.

The students' behaviour and whether they engaged in sexual activity or not, were influenced by their accommodation at home and the situation of the schools. Some of them became sexually active because of sharing a room with adults. While others dropped out of schools because of this. All these factors influenced the information the women and the girls got on sexuality and also their decisions on issues of sexuality.

By examining the actors and structures I was able to study the real factors which influence women's decisions.

Legal and policy analysis

I first and foremost looked at the laws and policies governing education in Kenyan generally and then specifically those governing education on sexuality. I discovered that there was no law on education on sexuality in Kenya but I found out that the education sector policy on HIV/AIDS has been used to incorporate some form of

education on sexuality into the Kenyan education curriculum. Upon perusing the policy and collecting data on the ground, I was able to understand why the emphasis in education on sexuality was placed on HIV/AIDS and not other aspects of sexuality. This gave me an idea as to what gaps there are and led to my inquiry as to how these gaps could be filled. From the legal analysis I realized that the Kenyan constitution does not in the first instance guarantee a right to an education and does not provide for the quality of education. This offers a partial explanation as to why there has not been an education policy on sexuality in Kenya.

Sex and gender analysis

The women's lives were determined by their gender roles. I looked at issues such as the responsibility placed on women and girl children on education on sexuality. Due to their biological ability to reproduce and their gender-specific roles as nurturers, the burden of education on sexuality was placed solely upon women. Women, regardless of their professional qualifications, were first and foremost seen in their gender roles as nurturers and mothers first and then, for example, as teachers. Because of this biological ability and potential to give birth the task of passing on information on sexuality and the responsibility to receive such information and act upon it was left entirely to the women and the girls. Because of the role given to them by society as nurturers they were expected to pass on such information to both girls and boys. Yet the women – because of their socialization which caused traditional silence, especially on male sexuality – were unable to discuss male sexuality with their sons while the men did not see a need to discuss it as it is seen to be normal and as such does not need to be controlled in any way. These observations helped me to identify the gaps created in imparting information on sexuality.

I used the gender and sex analysis approach to examine the types of questions that the children were being asked in exams, the school curriculum and illustrations in school textbooks. This gave me an insight into how gender was being dealt with in the syllabus.

This approach was useful as it helped me to analyze how the socialization processes cause and maintain inequality between men and women and girls and girls to the disadvantage of women and girls. It also helped me to highlight how these socialization processes have an impact on the lives of the women especially in decision-making situations.

Through this analysis I was able to see the connection between socialization, sexuality and gender, and analyze the differential treatment of conveying information on sexuality between the genders.

Human rights approach

An examination of the International human rights instruments was necessary. This was in view of the fact that Kenya is a signatory to most of these instruments. This enabled me to assess the level of conformity of the laws of the country to the international instruments and the recommended compliance.

The human rights approach also helped me to bring out the issues of the right to information on sexuality as a human right and the need to demand it. I used the human rights approach as an analysis tool to gauge issues such as discrimination against women and girls and compliance with the human rights instruments. It formed my starting point for the argument of education on sexuality as a human right.

¹ This is a centre where youth of between 15 and 24 years are counselled and tested for HIV voluntarily. They counsel younger children for guidance and counselling only and can only test them for HIV with the consent of their parents.

Methods of data collection

Semi-structured Interviews

Semi-structured interviews with open-ended questions were employed. I used an interview guide which outlined the issues to be discussed. I had a different question guide for different people and I adjusted the question guide, if the need arose, to suit the person whom I was going to interview. Due to this being only a question guide I was able to be flexible and allowed the respondents to talk about issues that they thought were important to them without much interruption. This allowed me the maximum benefit especially considering that sexuality is at the core of our existence. As long as I knew the perimeters of the interview I did not have to refer to it and we spoke as though we were having a discussion of any other topic. However this sometimes proved to be time consuming as it is a slow process but I tried to conduct most of my interviews on previously made appointments so I was able to allocate enough time for each interview. This form of interview allowed me to constantly ask questions using the next question technique. This meant that I got my lead for the next question depending on the answers received during the interview. This I found advantageous in that the information flowed continuously and any issues that arose were clarified instantly.

Key informants

Using the question guides I conducted several interviews. I conducted key informant interviews. Key informants are those people who appeared to have a deeper, more informed knowledge of the subject. I conducted interviews with them on two levels – firstly as a key informant on the subject of information on sexuality, and then on a more personal level on their own personal experiences. This enabled me to assess the influence of their socialization on their lives and opinions. My key informants were as follows; head teachers, doctors and a clinical officer.

Individual Interviews

These were very useful especially in the light of the intimate nature of the research. I conducted most of my interviews on a one on one basis. Sometimes it required me to move to a secluded place with the respondent, a place where there was no likelihood of being overheard or interrupted as the respondents tended to keep quiet when interrupted and this disturbed the flow of information.

I started the interviews by assuring the respondents of the confidentiality of the information received. I also always made it clear that I was not out to judge them and stressed that anything they did with their lives was their choice. This often helped the women and even the young girls and boys to open up.

For some of my respondents the interview process seemed therapeutic as it seemed they could at last talk about their experiences on the issues of sexuality without any judgement being passed on them. As one respondent, a widow, later told me, she had started to enjoy her life again as she no longer cared about the disapproval of society. After I had interviewed the girls I allowed them to ask questions. Their questions not only revealed their level of knowledge on issues of sexuality but also led to enlightenment on their part. This I found in keeping with the women's law approach as observed by Bentzon *et al.* (1998). It allows the researcher and the woman researched an opportunity to act as agents of change rather than as passive observers. By answering their questions I was acting as an agent for change as it is my belief that this exchange made the respondents more informed than they had been previously.

I conducted individual interviews with head teachers, teachers, women, girls and boys both in and out of school as well as with men.

Group discussions

I restricted group discussions to situations where the information was not of an intimate nature. I took this approach after I conducted three group discussions on more intimate information and realized that people were reluctant to discuss such issues in the presence of others. I later on conducted two group interviews of seven respondents each. These were teachers who were attending a seminar on sexuality education hosted by the Kenya Girl Guide Association.

Observation

I employed observation mostly in schools. When I asked to interview some of the students, unless I insisted, I was always brought only the female students. At one of the schools I observed the way it was the girls who got sent to the staffroom with the books and also to fill the kettle with water. This obviously sent gender messages to the whole school.

It was also through scrutinizing my nieces' exam papers that I realized that the children are given questions which required gender-specific answers. I however noticed positively that the textbooks in Kenya have been modified to include more gender-sensitive illustrations.

Analysis of methodology

The women's law approach was useful in my research as it allowed for flexibility in my choice of respondents and in the interview process. It allowed for more detailed information through clarifications using the next question technique. It also allowed for the triangulation of data by being able to follow up on leads from interviews with respondents and seeking clarification or confirmation with other respondents.

CHAPTER FOUR

What we need to teach about sexuality

It was an assumption of this research that information on sexuality was not being appropriately or meaningfully discussed. For information to be appropriate and meaningful it has to be of such a nature that it is suitable for the persons it is intended and also worthwhile. For the information on sexuality to be worthwhile it has to bring positive returns and reflect the effort spent on it.

The purpose of education is to pass on information which should be able to respond to life's challenges and therefore education which does not do this falls short of its intended purpose (Moyo 2004). The suitability of information becomes questionable if it does not seem to serve not only the people for whom it is intended but also the purpose that it is intended.

The government of Kenya has approached education on sexuality from the perspective of abstinence. This was confirmed by the teachers I interviewed and the curriculum which stresses sexually-transmitted infections and HIV/AIDS but does not put any weight on other aspects of sexuality. The education sector policy on HIV/AIDS as it could be used to impart more useful information on sexuality and gender but this has not been the case. The problem has been made worse largely due to the work load on the primary schools caused by the recently introduced education for all programme whereby all government primary schools are free.

The lack of adequate information on sexuality has also been occasioned by the curriculum in place which is skewed towards superficial information on sexuality with no real intention of giving any meaningful information.

The young girls in schools are not receiving meaningful information on sexuality either within the home or at school. All eleven girls aged between 10 and 15 years interviewed had some knowledge of menstruation, some of them had heard about it at school and others through their parents. Although they receive information on menstruation this information is usually very scanty. There seemed to be a deliberate silence around the finer points of menstruation.

During interviews the girls expressed their misgivings on the adequacy of the information they were getting on the issue of menstruation. One of them who had not begun to menstruate expressed her fears as she imagined that the blood would flow like water from a tap and she was wondering how she would cope with it.

Another respondent had this to say:

‘How comes our parents don't tell us about something as natural as menstruation?’

This was echoed by a head teacher at one of the schools:

‘Parents still leave the burden of sexuality education on the teachers. You find cases where a child has never been told anything on maturation by their parents, even about menstruation. They leave the burden on the teachers.’

Some parents have devised ways of dealing with the subject. Another respondent said,

‘Some of these students are very knowledgeable. You find a child as young as 9 years with a book which is quite elaborate in sexuality issues. When you ask them they say that they found it in their beds having been placed there by their parents.’

Asked what information they would like their daughters to receive the parents were of the opinion that they

needed some form of knowledge to be able to deal with issues such as unwanted pregnancies and avoiding sexual activity. Most of the parents felt that there was a gap in the education on sexuality and that neither they nor the teachers were tackling it appropriately. All the women interviewed felt that they had not received appropriate or meaningful information on sexuality education. They all learnt about sexuality from their peers at school or through experiment – sometimes with disastrous effect. All the women interviewed felt that they would have done things differently had they had more information on sexuality. One respondent stated:

‘The type of ignorance that I had on issues of sexuality I would not wish on my worst enemy. I went through school completely ignorant of issues surrounding sex. My parents did not approve of even boyfriends. Menstruation, let alone contraceptives, were never discussed either at school or at home. I knew that the bad girls were the ones who got involved in sex. My mother always issued threats that if any one of the girls got pregnant then they should know what to do with the baby.’

‘I met my first boyfriend when I was 19 years old. I did not know about contraceptives. I got pregnant and because of the threats I had received earlier I had to get married to him. I did not imagine that I could have proceeded with my life with my child alone.’

‘I had two children two years apart and an abortion before I had the guts to walk into a clinic to ask for contraceptives. I am now separated from my husband. We had problems right from the beginning because the reason for marriage was because I was pregnant.’

However, her biggest regret, which was also expressed by most women interviewed, was that she did not get to enjoy her sex life during her younger days. She did not get to date several men and explore possibilities without the burdens of motherhood. She had to make choices because she was already pregnant. She felt that her daughter should be knowledgeable in issues such as contraceptive and condom use but was scared to tackle the giving the information as she felt that this would be like giving her a licence to get involved in sexual activity.

Asked what she teaches on sexuality, a biology school teacher said:

‘I teach the boys and girls what is provided in the biology book. We are also required to teach on HIV/AIDS. I regularly incorporate ABC – Abstinence, Be faithful or C use a Condom – into my teachings although it is not in the curriculum. I do this by calling either a doctor or a nurse to teach these in more detail.’

The information given here highlights HIV/AIDS and by bringing in medical personnel it removes it from the realm of education and medicalizes it.

The biology books contain basic information on the biological sexual parts of both female and male bodies and basic facts such as that for an ovum to be fertilized there has to be sperm.

Samkange refers to this when she says that education from both mothers and schools are based on the biological knowledge only and not experience. She says this leads to the friends giving the children information about the experiential side. This therefore makes the friends and peers at school a source of advice. This could be dangerous as the information received is often not accurate as this peer sources of information is usually unreliable (Samkange, 2004).

Abstinence until marriage is emphasized and girls’ sexuality is dealt with from the perspective that it leads to reproduction. The schools and homes discouraged boyfriends and nothing was said about what happens when one gets married. This teaching assumes that all the girls have to get married and as such does not address issues of being single.

‘It is very sad that we are bringing up our daughters with the same expectations that we were brought up with. That is to expect marriage when our reality is that there are several of us whose marriages did

not work. There are those of us who are single parents and then there those of us who are in non-functional relationships (A 39 year old mother of three teenage daughters).

The unwavering expectation of marriage placed on the girl child affects her education and her performance at school as she is expected to get somebody to take care of her.

One of the teachers at the Kenya Girl Guides Association discussion group had this to say when asked why they do not introduce safe sex as an alternative to abstinence:

‘We preach abstinence until marriage. Religion says that they should abstain. These girls are young and are supposed to abstain any way.’

The need for information on sexuality is treated as a girl’s problem by both the parents and teachers. A teacher admitted that the boys seemed be less informed on such issues than the girls. Apart from the superficial biological knowledge passed on in class the boy does not receive any other information.

The information on sexuality passed on to the girls communicates the message that sexual activity is synonymous with pregnancy. This is helped along by the fact that the information does not include information on pleasure, contraceptives and condom use (Tamale, 2001).

Asked what information they gave on sexuality a female teacher responded:

‘We usually talk to the girls about behaviour, self esteem, HIV/AIDS, abstinence, drug abuse, rape, pregnancy, careers, need to abstain from relationships and need to live a morally upright life. We also talk about good grooming.’

The lack of information on contraception has implications for women, as already seen, in that when they get married it ensures several pregnancies before she either discovers contraceptives or has the courage to walk into a family planning clinic to ask for them.

The Kenya Girl Guides Association has started an initiative in some Kenyan schools which conducts extracurricular activities for the girls. This programme conducted by female teachers is aimed at teaching the girls skills as peer educators on sexuality matters. Its emphasis is on the message of abstinence. These girl peer educators are then supposed to educate both girls and boys on issues of sexuality. I could not explore the efficacy of this programme due to constraints of time and limited resources but I noted that there is no corresponding programme for boys in the three primary schools which I visited and none of the teachers interviewed at the girl guides meeting had such a programme within their schools.

The idea of abstinence being promoted by the schools has implications in the current world order which is peddled by the United States of America Christian fundamentalist government of George Bush – it is pro abstinence as a way of combating HIV/AIDS. The United States government has stopped all aid to Kenya on contraceptives and condoms and it has even withdrawn its contribution from the global fund on AIDS.

What examples do we have to work upon?

The Netherlands has the lowest teenage pregnancy rate in Europe standing at 8.4 per 1,000 girls between 15 and 19. This has been made possible through government support for education on sexuality. Research is used to inform policies to reduce unintended pregnancies, sexually-transmitted infections and HIV/AIDS. Political and religious interest groups have little influence on public policy. The government gives access to unlimited information on sexuality, including contraceptives, condoms and widespread public education on sexuality. This is done through education in schools, and through consistent long-term public education campaigns. This is done using the media such as internet, television, films, radio, billboards and through health care providers. Education on sexuality is not necessarily a separate curriculum and is integrated across school subjects and at all

grade levels. The teachers provide accurate and complete information on issues of sexuality and in response to students' questions.

The Netherlands has revised textbooks to reflect education on sexuality and to include a more comprehensive approach. Although the curriculum still focuses on biological aspects of reproduction it has been modified to include values, attitudes as well as communication and negotiation skills. Some schools supplement the textbooks with other materials such as magazines and educational videos (Valk, 2000; Lottes, 2002).

The Kenyan educators could learn a lot from this cross-cultural example. We should take what is culturally acceptable and use it to inform our approach for our own benefit.

Current trends in teaching sexuality

Kenyan schools have introduced a new curriculum which incorporates HIV/AIDS and gender into education. This was introduced through the education sector policy on HIV/AIDS. Due to the nature of the policy through which sexuality education was introduced in schools, it serves only the purpose for which it was intended. It gives the children a biological knowledge of their bodies. It emphasizes abstinence and is silent on all other aspects of sexuality that could recognize sexual activity on the part of the students.

Sexuality is supposed to be dealt with in different subjects' lessons. Even if the subject of sexuality arose in an English lesson the teacher is expected to tackle it and talk about it in class. This has proved problematic as most of the teachers have no skills to impart information on sexuality and the ad hoc manner in which it is incorporated into the curriculum leaves the contents of the lesson to the teacher. This allows for the personal conviction of the teacher to influence and interfere with the lesson. Some teachers in a group discussion held at the Kenya Girl Guides Association workshop stated that they favoured the teaching of abstinence because they are Christians. This means that even if the curriculum were different they would still teach abstinence. This lack of prescribed ways of dealing with sexuality education leaves gaps in the curriculum as no standards for teaching have been set.

Education on sexuality in Kenyan schools, according to the education sector policy on HIV/AIDS and the national goals of education as articulated in the primary schools curriculum, is supposed to foster a sense of responsibility and provide equal opportunity for all (MOEST, 2002). The curriculum provides in theory for the incorporation of drug abuse, the HIV/AIDS pandemic, gender issues, human rights, children's rights, moral values and social responsibility.

However, upon perusal of the examination papers for classes 1 and 2, I found a contrary position. The students are asked questions such as:

‘Who cooks for you? Who is the head of the family? What is a family?’

These questions require gender-specific answers. This reflects the teaching of strictly defined gender roles within the school syllabus. This kind of teaching influences the outlook of children to life and depicts the male gender as superior and instils the idea of servitude in the girl child. This was illustrated when a nine year old boy told of how he could not condone the idea that girls should have the same rights to inherit land from their parents as boys because they are taught in school that men are the heads of families.

Roles are determined by the interaction of sexuality, sex and gender and lead to our identities. A teaching such as this reinforces gender stereotypes and is against the education policies of Kenya which include gender in the curriculum. It is also a violation of human rights. Article 2(d) of CEDAW cautions against the institutionalized practice of discrimination while article 10(c) emphasizes the need to guard against stereotyping concepts of roles of women and men in education.

A perusal of the Christian religious education textbook for class 8 however revealed more gender sensitive illustrations. A Christian religious education teacher at St Xavier primary school told me that with the new syllabus which was being taught in standard 8 that year, the illustrations and teachings have been more gender sensitive but still there is a need for improvement in some cases. This needs further research to see whether the books portray the positive gender messages that reinforce the information on sexuality.

A scrutiny of the standard 8 science curriculum reveals the topic headed 'Control of HIV/AIDS'. This is the closest topic, at a glance, to education on sexuality for this class. It lays out the outcomes of the lesson as follows:

'By the end of the topic the learner should be able to

- (a) Explain the meaning of STI;
- (b) Name examples of STI;
- (c) Describe causes and prevention of STI;
- (d) Identify control measures of HIV/AIDS.'

Standard 8 is the last year of primary school in Kenya before graduating to secondary school and the average age in this class is 13 years.

The students are taught that sex is one of the ways in which HIV is contracted and as such there is a need to avoid sex until marriage. They are not given alternatives to this. An interview with a 14 year old girl elicited the following response:

'We are taught to abstain until marriage. We are taught that HIV/AIDS is got through sex. We are told that to talk to boys as a general friend is not bad but we should not get more involved.'

A teacher acknowledged that children at primary school are sexually active and that some of them have dropped out of school due to pregnancies. The teaching at the secondary school is not very different from that at primary schools. The students tend to be more involved in sexual activity. The ages range from 14 years to 18 years although there are those who might be older.

As the deputy head teacher at a mixed secondary school said:

'We experience problems of pairing. The students have relationships and even have sex. Some of them have relationships with people outside the school. Every year we have a girl or two who do their form four exams while either expectant or having given birth.'

Another teacher related an incident which spoke to the need to acknowledge the sexuality of the children, and provide appropriate ways of dealing with it. She said:

'I remember once one of our guest speakers had brought some condoms to demonstrate how they are used. When the students moved near his desk they stole the condoms. He asked them whether he could bring them more. He brought them 300 condoms. There were about 70 students. They scrambled for them. They were actually fighting for them.'

Although the curriculum does not acknowledge that these young people are sexually active the empirical evidence shows the contrary. It is manifest that these children are in need of more meaningful information, on sexuality than they are currently getting, which should include information on contraceptives and condom use as an alternative to abstinence.

Even though the girls currently in school had information on menstruation, there were still gaps in the information. The girls who had started menstruating did not know what was normal menstruation and this seemed to bother them while the ones who had not begun menstruating were not sure of what to expect. This shows that the information that they were receiving was not adequate as it did not deal with things like colour, odour and rate of flow. A 14 year old girl asked me whether it was normal to have a menstrual flow that was not clear flowing as blood from a fresh wound. Others wondered about what to expect and were worried as they thought that the flow would be like water from a tap.

The right to enjoyment of the highest attainable standards of physical and mental health and an education that shall develop the human personality as envisaged in article 12 of the International Covenant on Economic, Social and Cultural Rights can only be attainable for these girls if they get adequate information on issues such as menstruation. Article 13 emphasizes the need for the education to be such as to allow a person to effectively function in society.

While discussing information given on menstruation Samkange says that little was said about it:

‘Literature provided the reproductive functions of biological perspectives with little emphasis on the physiological sensations or on dealing with and managing the normal range of vaginal secretions and aspects like odour, colour and rate of menstrual loss. As a result, Laws (1990) notes that myths and misinformation about menstruation are also found among adult males and females’ (Samkange, 2004).

If the girls are given detailed and accurate information on issues such as menstruation, physiological sensations, and other aspects of sexuality it would lead them to make informed choices presently and even in the future. This lack of information among young people at this level builds up into misinformed adults. This obviously affects any information that the next generation gets.

All the girls and boys interviewed said that they had been given information on sexuality. But, on further probing, it turned out that the information they received was very scanty and geared towards prevention of HIV/AIDS through abstinence. The messages were like this one from a 14 year old boy at Jamhuri Primary School:

‘I have been told about issues of sex. I was told by my teacher to keep avoiding sex as I might get HIV/AIDS. They told me that I should avoid situations where I might have feelings for a girl as this might lead to sex.’

Nobody discusses the issue of condom use, contraceptives and how to deal with unequal power relations in a relationship.

When asked why they preferred to teach abstinence teachers in a group discussion responded:

‘It is the easiest to teach. You do not need to spend time on explanations. We hardly ever have the time as we have too much to do. Most of us have never tackled such issues during our training and we find it awkward.’

This has compromised the benefits that could have been obtained through the usage of the policy currently in place in delivering any meaningful information on sexuality. Some teachers, I realized, were not even aware of the laws and policies that governed education on sexuality in Kenya. The only people who had the information on the policies were those in the administrative offices.

On the home front the information was just as scanty. Most of the women interviewed had not even thought of discussing issues of power relationships although they realized that their daughters were vulnerable. Some parents resorted to scare tactics which had been employed with them. They confessed to saying things like:

‘I don’t want a grandchild, if you get pregnant you are on your own, I am too young to be a grandmother, you will get HIV/AIDS.’

These messages are meant to scare the children into not getting involved in sexuality activity but are not meant to impart knowledge to enable informed choices which is the general purpose of education. This kind of information cannot therefore be said to be meaningful or conforming to human rights standards which require that education should be such as to allow a person to function within the society.

There was only one respondent who said that she had told her 12 year old daughter about condom use. She even told her how traumatized she was when she got pregnant while she was unmarried. She said that she was influenced by her boyfriend who was of European origin to do so. She says that she can and does tell her daughter everything about sexuality.

All the women interviewed had only received threats and any sex talk was always couched in euphemisms. One of the women related how her mother told her that ‘if you allow men to urinate on you, you will get pregnant’. And if she got pregnant, her mother threatened to cut open her stomach and remove the baby. She said that she was quite young and she believed her but wondered why a madman would want to urinate on her. She wondered for a long time until her older sister found out what their mother meant by experimenting and came and told her.

Inability to cope with everyday situations

The inadequacy of the information given was obvious. In response to a question on the practicality of information they received, a young girl put it very precisely:

‘The kind of information we are given in school and by our parents is not practical. They base it too much on religious morals. I see my colleagues get involved in sex yet we are given the same information. I wish we were given more meaningful information that acknowledged this reality (19 year old collage girl).

In another interview a 13 year old girl expressed her helplessness in dealing with relationships. She said:

‘What do you do when a boy writes letters to you and keep on disturbing you for friendship?’

This begs the question as to whether the information they receive at school is practical enough to tackle real life situations.

A counsellor at the VCT centre related this experience:

‘I was brought in for an 11 year old girl who had been involved in sex. Her parents had noted that her behaviour had changed. When I spoke to her she told me that she had had sex at school. She was in a boarding school. She said that she was not the only person who was involved as other children in the school were doing it.’

This was obviously a case of peer influence due to lack of information on sexuality.

Because the children were told to abstain and that sex and sexuality are bad, this leads students to hide any form of sexuality from their parents. A student related how her older sister brought her boyfriend to the house when their parents were not there and said that their parents did not know about this and how she had never mentioned it to them. At a group discussion with seven girls, they were of the opinion that they would find it difficult to tell their parents about their boyfriends. This hiding of sexual activity is as a result of the condemnation by society of such acts as ‘wrong’. This increases the vulnerability of the children to involvement in penetrative sex because they cannot seek and get advice from their parents or any other adult.

The fact that the information that the students receive from schools talks about anything sexual in a negative light, leads to 'parroting' (Tamale, 2005). The girls are told that sex before marriage is wrong and so they do not acknowledge involvement in it. This was the case with all the girls and boys that I interviewed, especially within the school setup. This was also discussed by Mensch when she notes:

'Young people, especially girls, find difficulty in admitting to having sex outside a socially sanctioned relationship, especially marriage (Mensch *et al.*, 1999).

She attributed this to the aggressive promotion of abstinence in Kenya and the sanctions meted out for premarital pregnancies in the form of expulsion from school. The young people who I interviewed had a problem with admitting sexual activity. This is even with the change of the policy on expulsion from schools due to pregnancies. Previously girls were expelled from school on account of pregnancy but now the child is transferred to another school. This still causes fear as this is still a social sanction. The fears of acknowledging sexual activity outside marriage seemed to follow some of the women even into adulthood. In one incident this even played itself out in an interview with a 24 year old single woman at the youth voluntary counselling and testing centre who insisted that she had not had sex at any point in her life. However, later information came to me that she was sexually active and HIV positive.

By looking at how older women have been affected by the inadequate information they received on issues of sexuality we are able to see the importance of detailed information for the girls. For the women, although knowledge of sexuality was reliant upon the age and formal education of the respondent, there were other factors that influenced it. The older more educated women had learnt issues of sexuality by reading. However, regardless of the education level of the older women they had never received any kind of information about sexuality or even menstruation from their parents or from schools. Sexuality seemed predominantly to have taken them by surprise.

'I got pregnant very early. I did not even know what I was doing. Nobody had told me about sexuality. The boy was a classmate. We were both 15 Years old. We were experimenting. I did not go to school after that. Although I had been registered for standard 8 examinations I did not do them. I was embarrassed. My parents blamed me for wronging them.'

However, knowledge of her sexuality was not a guarantee that the woman would be able to assert herself in all sexual relationships. Several factors come into play such as whether the person they were having a relationship with was her husband or not, and how economically empowered a woman was, while for others it was buying a kind of freedom.

'After giving birth I did not have any peace at home. My parents were always suspicious of me. I was no longer free to go anywhere whenever I wanted. It was as if everybody thought I would get pregnant again.

'After one year an aunt of mine arranged for me to get married to this man who is now my husband. At first I found it difficult to relate to him sexually as he was a stranger to me. But with time I have now accepted it and it is okay.'

For this woman her life was determined by her biological ability to reproduce. Nobody told her about sex. When she gave birth, instead of remedying the situation by giving her information, her parents controlled her sexuality by guarding her.

Another respondent had this to say:

'I have tried to talk to my husband several times to tell him that I do not like the way he treats me. He treats me like a sex object. He does not care for foreplay. When I complain to him about it he says that women from his clan like to have sex as though they are being raped so I should not complain. I was

ready to divorce him when I met this other man whom I have been having an affair with. He understands me and I have been able to tell him exactly what I want. We also enjoy each other's company. I still have sex with my husband but out of duty. This man saved my marriage.'

This respondent could not talk to her husband about sex and insist on what she wanted in her marriage yet she could do so with her lover. This woman's inability to discuss sex with her husband shows the relationship between power and sex and the situationality of it. Her husband, by refusing to talk about it, is trying to retain the normative order of power in the society which is vested in the man. By discussing sex she is seen to be subverting the set norms which devalue the woman's pleasure and also as a rebel against patriarchal power.

Foucault discusses this in *The history of sexuality* when he says:

'If sex is repressed, that is, condemned to prohibition, non-existence and silence, then the mere fact that one is speaking about it has the appearance of a deliberate transgression. A person who holds forth in such language places himself (or herself) to a certain extent outside the reach of power; s(he) upsets established law; s(he) anticipates the coming freedom' (Foucault, 1978).

Multiple identities and power

The issue of multiple identities arose in the course of my research as one of the consequences of inappropriately dealing with information on sexuality. The woman as a wife behaved differently from the woman as a mother or the woman as a lover. For example, a woman as a wife does not assert herself sexually in her marriage but as a lover in an extramarital affair, she asserts herself on issues of sexuality. As a wife she does not stand up to her husband but as a daughter-in-law she stands up against her father-in-law and chases him out of her house. This, in the light of traditional norms which require that she respects her father-in-law, is subversive.

This illustrates the situationality of power within the home and society. Power changes with context, in marriage most of the women found themselves powerless to assert their rights to sexual pleasure and condom use, while outside the marriage they were more likely to do so. Most of the older single women interviewed were more likely to demand condom use from their partners. They even felt more able to decide as to when to have sex or even to refuse sex altogether.

The men encountered were not immune to this identity shift. Mr Twala, as related to me by his wife, changed his identity depending on who was present in his house. He would help his wife with the domestic work as long as none of his relatives were in the house. He absolutely refused to go into the kitchen or do any role that is considered to be a woman's job when his relatives were around. His explanation was that he did not want to be seen as a henpecked husband.

The same was also noted in the girl who at first denied engagement in penetrative sex but later admitted it. This girl presents a façade of 'innocence' before her parents but to me she opened up to reveal her other self. The societal expectation of the good girl played a major role in promoting the several identities. This ability to shift identities is a subversion of the norms set by society on how sexuality should be dealt with.

The presence of children influenced the women's decisions and behaviours. Some women stayed in relationships because of the presence of the children while others had even considered having an extramarital relationship because of their children pointing out their misery. This shifting of identities and situationality of power is discussed by Jennifer Okumu Wengi in her PhD thesis (Okumu, 1995).

This is a reflection of the still strictly divided gender roles within Kenyan society. Certain roles are still seen as being strictly for men and others for women. Women are nurturers of children so their first responsibility is to them. This is as a result of the socialization of sex in that because you are of a certain sex then roles are allocated to you guided by this. This influenced the teaching of sexuality right from the home, into the society and into the schools.

The lack of appropriate information on sexuality is reflected in the women and seemed to follow them throughout their lives. Those women who were lucky to have some formal education had more information on sexuality. The older, more educated women had learnt issues of sexuality by reading. However, regardless of the education level of the older women they had never received any kind of information about sexuality or even menstruation from their parents or from schools. Sexuality seemed to have predominantly taken them by surprise.

‘I got pregnant very early. I did not even know what I was doing. Nobody had told me about sexuality. The boy was a classmate. We were both 15 Years old. We were experimenting. I did not go to school after that. Although I had been registered for standard 8 examinations I did not do them. I was embarrassed. My parents blamed me for wronging them.’

All the women interviewed only received threats and any sex talk was always couched in euphemisms. One of the women related how her mother told her that ‘if she allowed men to urinate on you, you will get would get pregnant’. And if she got pregnant, her mother threatened to cut up her stomach and remove the baby. She said that she was quite young and she believed her mother but wondered why a madman would want to urinate on her. She wondered for a long time until her older sister found out what their mother meant by experimenting and came and told her.

The expectation to only engage in sexual activity within marriage builds up an enormous pressure on any woman who wants to engage in sex before marriage since what she is involved in is labelled as wrong. As 28 year old Mrs N related:

‘I had always been told that premarital sex was wrong. I was 22 years old when I met my current husband. He was pressuring me to have sex with him. I told him that I could not as it was wrong. He wanted to marry me but he had to first pay the bride price which he did not have at that time. To assuage my guilt we went and did a civil marriage without the knowledge of our families. That is when I agreed to have sex with him.’

This pressure to have sexual activity only in marriage leads to women not being able to negotiate for safe sex within the marriage as compliance is shown to be the right thing to do. It causes the women to believe that sexual pleasure is synonymous with marriage and this might lead to marriages which are based merely on the desire for sex.

Good woman, bad woman dichotomy

‘The whole concept of sexuality for women is centred on the notion of being a “good woman” – the supposedly “good women” are not supposed to have control over their sexuality, neither are they expected to discuss issues relating to sexuality’ (Zinanga, 1996).

The control of women and girls’ sexuality is at the core of the kind of information given out on sexuality. This control is used to cause women to conform to what society thinks is a good woman. However, if this information fails or in any case where subversion is apparent, then brute force is used. A 38 year old female respondent remembered:

‘My brother’s and cousins teamed up and ensured that we did not even talk to boys. Even if it was an innocent chat. If they found us they would cane us. I remember it happened to one of our cousins. She was found talking to boys and they were caned in public.’

This kind of ‘discipline’ was encouraged by the society. She told me that nobody ever questioned these boys’ sex lives. This control carries on throughout the life of the girl right into womanhood. She is not told much on sexuality yet she is not allowed to explore. The society ensures that she does not explore by using threats such as the fear of violence and the scare tactics earlier mentioned. This ensures that her sexuality is held in check.

As the same respondent explained:

‘Even after I got married for a long time I did not enjoy sex. I did not reach an orgasm until I read about the clitoris and learnt how to manoeuvre myself.’

Mothers and teachers expressed fears that if they gave their daughters more information on sexuality and issues like the use of condoms and pleasure, then they would be giving her a licence to get involved in sexual activity. Their intention was to contain and control the girl’s sexuality.

Everyday things, such as going to the shops, shaking hands and laughter are sexualized and therefore controlled for the girl. A girl has to be watched and not allowed go to places without being timed.

Yet another respondent said:

‘Most of my growing up I was confined in the house. I could not even be allowed to visit any of my relatives. Whenever I was sent to the shops my mother would say that spit on the leaf should not dry off before I was back.’²

Even when greeting a man a good girls’ hand was not supposed to linger in his hands for too long. The handshake was supposed to be brief. A good girl was and is still not supposed to laugh loudly. Loud laughter is likened to that of a prostitute.

Parents and teachers still pass on more or less the same messages to the girls. Scare tactics are still used. Girls are restricted in their movements. A 17 year old form 4 student at a secondary school in Nakuru had this to say,

‘My mother is so controlling. She never lets me go anywhere on my own. In case I get back late from school she quarrels with me. She is always suspicious of me.’

A female teacher related an incident in which a ‘good’ girl was influenced by a ‘bad’ girl.

‘There was this girl in the school last year. She used to have a lot of men friends outside the school compound. She would at times not come to school. Some girls took to following her. We used to warn them against her company. One of the innocent girls who had joined the group did her exams while pregnant while she managed to complete school.’

The female respondents, who had been involved in extramarital relationships always referred to themselves as not having been good. They however did not refer to their husband whom they either knew for certain, or had reason to believe that were having an affair, as bad.

This policing of sexuality is discussed by McFadden as having long-term effects on women’s relationship to the rest of the world. She writes:

‘This fear of sexual pleasure, and of considering the possibilities such pleasure suggests for imagining oneself differently, is directly linked to the construction of women’s sexuality as “bad”, “filthy” and “morally corrupting” (Oakley, 1996; Hollibaugh, 1996). These constructions are aggressively invoked whenever women seek to make independent choices, when they become public and visible as aspiring citizens, when they transgress cultural and social boundaries defended in the name of tradition’ (McFadden, 2003a).

The good woman/bad woman dichotomy is a tool that the society uses to control the sexuality of women. These women in controlling their sexually by choosing whom to have sex with see themselves as bad women and yet this does not apply to the men.

Factors that influence information on sexuality

When I interviewed a clerk at the Nakuru municipality education office he informed me that on average, a class in schools within the municipality holds 70 pupils and that there has been a tendency to tackle other health issues, such as TB, through primary schools. This problem has been triggered partly by the education for all by the year 2015 stipulation of the Millennium Development Goals. This led to the Kenyan government starting the free primary education programme which has led to overstretching of the few resources to accommodate the large numbers of children enrolled in primary schools. This places a huge burden on the teachers and leads them to compromise and emphasize teaching only those subjects which are provided for in the curriculum and are therefore examinable.

A teacher confirmed this while giving an opinion that the issue of information on sexuality was not being dealt with adequately in the education system:

‘Everything is being left to the teachers; free primary education is upon the teachers, AIDS on the teachers, TB on the teachers and even sexuality. Even if they had the good intentions of giving information, they surely cannot deliver.’

She also pointed to the large classes as being problematic in teaching of any kind. Another respondent told of how she had been molested by her father when she was around 12 years old influences how she gives information on sexuality. She tells the girls not to trust any man. This kind of information is not helpful considering that these girls are expected to live in the society with the men. This same society lays an emphasis on the expectation and need to marry.

These women’s decisions are influenced by their surroundings and the people within them. The school environment and the situation within the homes also had an effect on the way the girls behaved and so influenced any information on sexuality. One teacher at Flamingo secondary school discussed the influence of the home environment:

‘This school is in a low class area. It is a day school. Most of our students come from very poor housing conditions in that you find that they share one room with their parents. This exposes them to sex early as they see or hear what adults are doing.’

She said that this influences their decisions and tended to lead to involvement in sex early and interfered with their learning.

Another teacher told of how a student did not come to school and how when they followed up the matter and they found the boy, they found out that the boy had run away from home because he said that his mother brought several men into the home and he could not stand it.

A similar question of space as a determinant of the children’s engagement in sexual activity was highlighted by Ruganga *et al.* in her study *Migration, the family and the transformation of sexual culture*. In this Zimbabwe study she noted a similar situation where lack of private space within the homes exposes these children to sex very early (Ruganga, 1998).

Because of the environment of the children within the homes the teachers at Flamingo secondary school had to do a lot of social work. They had to follow up their students even going to their homes when for some reason they did not come to school. A teacher said:

‘We have to follow them up. There are several of them who drop out because of various reasons and

² This was explained to me to mean that due to wax on the leaf saliva spat on it was supposed to dry pretty fast so it meant that she had to come back as soon as possible.

we have to find out and try and bring them back to school. The reason we do this is because we know the circumstances under which they live.'

An added determinant on how people imparted information to their children was their religious conviction. Maria a mother of six children of whom the youngest was 15 years said:

'I bring up my children as Christians. I do not compromise. I tell them to keep themselves pure for their husband. I cannot give them an alternative.'

The giving and use of information on sexuality is therefore influenced by the various actors and structures. The children are affected by the spaces in which they live and are influenced by the people with whom they associate. The overloading of the school structure, the environment within the home that causes the teachers to feel the need to go the extra mile all influence whether or not information on sexuality is given.

The sex and gender interface

There is usually a conflict between information given on gender in schools and the reality within the homes. Most women respondents said that they insisted on all their children participating in housework regardless of their gender. This was however affected by other socializing factors. The fathers and older male relatives do not participate in this work. One respondent told me that her son, who does the housework diligently, told her that he is glad that he is a boy as he will soon not be doing the housework just like his father. This social construction of sexuality sends out a message of inequality of gender and thus elevates the boy's sexuality over that of the girl, especially in the domestic sphere which has been the arena of power dynamics and sexual violence (Tambiah, 1995).

The men routinely do not perform domestic duties and when they do it is not treated as normal. The labelling of gender roles as wrong roles sends out messages to the young people as to what the right roles or the wrong roles should be.

Young girls from communities which circumcised boys are told to sit with their legs together and not like uncircumcised boys. This was explained to me that an uncircumcised boy was considered a child regardless of his age and as such it was okay to see his penis. For the girls, however, it was different. Regardless of their age their sex organ has to be kept private.

In an interview with a 16 year old girl she told of how she has been told not to dress in a manner that is likely to arouse men. She said:

'My mother has taught me not to dress in very tight trousers or dresses. Not to expose too much of my body and not to walk in a suggestive manner as this might arouse men and provoke them to do something bad to me.'

This illustrates the sexuality validity and gender dynamics. This girl is being taught to devalue her power of being erotic as it affects the men sexually. Her femininity is defined as inferior and therefore needs to be subordinated at the expense of masculinity. This is in relation to issues such as rape and gender violence being a show of masculinities and control of the women. She is socialized to believe in the essentialism of the male nature. She is therefore supposed to tame her eroticism as the men are held by the society not to be in control of their sexual urges in the light of such provocation (Lorde, 1984). This removes responsibility of control of the male sexuality from the man and places it upon the women. This has implications in rape cases where a woman is usually treated as the offender rather than as a victim (Tamale, 1992).

This removal of responsibility is reflected in the responsibility of education on sexuality being placed on the women and girls. This is also reflected in the Kenyan laws which place the responsibility of a child born out of wedlock on the mother unless the father of the child acknowledges it.

Another female 18 year old secondary school leaver told me that she was told to keep off men as they will use her for their pleasure and then dump her. This sends out a message that there is no pleasure to be derived by the girls from sexual relationships as it was only for the pleasure of boys or men.

There was a tendency devalue women's pleasure in the face of that of the men as was revealed by seven of the women respondents interviewed who felt that they were unhappy in their relationships and no longer enjoyed sex with their partners but still did it out of duty. It extended to the women treating themselves as second class citizens as they stayed in the marriage because of the children. Although they never discussed this with their children, two of the respondents related how their daughters had been asking them for how long they were going to live in such a relationship. Although there was no physical violence in both of these cases, there was a lot of verbal and psychological abuse which these teenage daughters felt was not fair on their mothers. One felt that it was unfair that her father should have the freedom of doing what he liked while her mother was always miserable.

As a result of this, one of the women proceeded to have an affair, although she keeps it secret from her daughter, while the other one says that her Christian faith keeps her from doing such things but she is seriously considering leaving her husband.

This illustrates changes in patterns and forms of control over sexuality and power. The girls, because of their different education, time and modified socialization, cannot withstand the oppression that they see their mothers undergoing (Kabeberi-Macharia, 1995).

This was expressed by a teacher who voiced her concern over the way in which the boys and girls were being brought up with different realities. She said:

'We have to teach the men to accept the empowered women. The girls we are bringing up are growing into empowered women while the boys are left behind.'

Information on sexuality is greatly influenced by socialization through daily interactions which send strong messages to the young people on issues of sexuality and power relations within the families. The information passed on through socialization within the homes passes on the message of lack of equality of gender.

Vulnerability to HIV/AIDS

The married women who had a strong suspicion or outright knowledge that their spouses were caught up in an extramarital relationship still proceeded to have unprotected sex with them. One such woman said:

'My husband has for the past 13 years been working out of the country. He rarely came home then I discovered that he was living with another woman. Even then we proceeded to have sex without a condom. I do it because he is my husband.'

Because of her husbands' absence and the extra-marital relationship this respondent has been having a relationship outside her marriage. She has also not been using a condom in this relationship although when she began it she was using one.

Ruth of London estate within Nakuru town had this to say:

'I am a housewife and married to the man who was my first boyfriend. We are married under customary law. He later on married a second wife and a third wife. He keeps both his wives at our rural home. We still have unprotected sex because he is my husband. I do not have a source of income so I cannot leave him even though I fear contracting HIV/AIDS.'

This woman cannot control her sexuality because she feels that since this is her husband she should have sex with him. Another aspect is the lack of economic empowerment. When asked her background and knowledge of sexuality she says that she was not taught anything on such issues at school or even at home. She learnt of menstruation from school. Her husband was her first boyfriend:

‘I had problems going through secondary school. My father never used to pay my fees regularly so I did not do very well in school.

‘I got married to this man because I could not find a job and he was in college at that time and I thought he was a good man.’

Ruth, like several of the women, felt that she should not have rushed into marriage as this robbed her of her freedom and ability to choose. Because she has no income-generating work she has no ability to negotiate for safe sex with her husband. She has also not even opened herself up to any alternative possibilities. The type of education that she obtained cannot be said to be such that she can effectively function in society at the moment. She has to rely on her husband for maintenance despite the dangers and she sees her situation as helpless. The Universal Declaration of Human Rights, CEDAW and the International Covenant on Economic, Social and Cultural Rights provides for education that allows a person to effectively function in society.

It was difficult to establish for sure whether schoolgirls contracted HIV/AIDS but evidence indicates the possibility.

A teacher in the secondary school said:

‘We have heard of suspected cases of students who have died of AIDS. We are never sure but we know that it does happen. When they become visibly sick they are withdrawn from school. When the blood donor people came they said that there were some of them who are positive.’

Other evidence such as unplanned pregnancies points to students being involved in unprotected sex and at risk of infection by the virus.

At the group discussion held with the Kenya Girl Guides Association some teachers pointed out that not acknowledging the possibility that the students are engaged in sexual activities increased their vulnerability to HIV/AIDS as they cannot confide in anyone since they are already ‘in the wrong’. This makes seeking information on ways of protecting themselves from HIV almost impossible as they fear being judged for doing the wrong thing. The information on abstinence without alternatives to condom use also creates a marked barrier in access to them.

Pressures and responsibilities placed on the girls to keep themselves pure until marriage and the fact that sexuality is not discussed causes them to even fear discussing any infection of the sexual organs or even the urinary tract. A respondent told me how her 15 year daughter got a urinary tract infection and could not tell her about it as she thought that it was a sexually-transmitted infection and did not want to be in trouble. The infection was discovered by the dentist when she could not sit through a dental procedure. It was the dentist who informed her and she discussed it with her daughter and sent her to a doctor.

One of the reasons for emphasis on abstinence without any alternative information as an armament for even future use by the girls was said to be to protect them from HIV/AIDS. The teachers and parents felt that it was 100 per cent effective in preventing HIV/AIDS. However all the teachers interviewed confirmed that they either knew or had heard of incidences where students as young as those in primary school have been involved in sex. This makes it rather obvious that the idea of abstinence has not worked. This is especially so if you look at it from the perspective that with the risk of unprotected sex comes the risk of HIV infection.

The information on sexuality given both by the schools and the parents is related to abstinence. If a girl is sexually active before marriage then she risks contracting HIV because she is 'in the wrong' and hence cannot consult on issues of safe sex. This has an implication in marriage in that the woman has never received information on forms of contraceptives and how to negotiate condom use. This leaves her vulnerable to unplanned pregnancies and the risk of HIV infection through her partner. Even in situations where she has kept herself 'pure' she is still at risk as her partner's status is not guaranteed.

Leaving the girls vulnerable to pregnancies and HIV/AIDS is supposed to act as a form of control against them engaging in sexual activities. The fear that she might get pregnant or infected is supposed to stop her from experimenting with sex.

There is a need to take into consideration the existence of sexual hierarchy in the dissemination of information on sexuality and to ensure that the girls and boys' information needs are taken care of either separately or together.

Discrimination

Gayle Rubin in her article 'Thinking sex' discusses the issue of discrimination. She illustrates how the society has put forward a sexual value hierarchical system which then metes out rewards, punishment or restrictions according to this system. This hierarchy varies from society to society and keeps on changing depending on the sexual politics at that point in time.

This sexual value system ranks sexuality according to what is 'good', 'normal' and 'natural' as the normative and any other sex that does not conform to this is viewed as 'bad', 'abnormal', or 'unnatural'. In the group of the normal, therefore superior, sexuality, she lists among others the need for such sex to be marital sex while on sexuality that is bad she lists them as unmarried, underage and promiscuous among others. The hierarchy is influenced by gender as it is stratified according to whose sexuality is considered to be the most normative (Rubin, 1984).

In Kenya, like in most patriarchal societies, male heterosexual sex is considered most normative and therefore highest in the hierarchy. This is reflected in my findings since male extra-marital sex is seen as normal and not questioned while that of the female is labelled bad.

The sexuality of the students is not recognized and so is treated as if it does not exist. This is illustrated by the way the sessional paper deals with the issue of HIV/AIDS (Ministry of Education, Science and Technology, 2005). This policy document lists how HIV/AIDS affects the quality of education in Kenya – citing issues such as the death of parents or teachers and how this affects children as care-givers and orphans. It however does not recognize that these children could be infected through sexual activity, whether consensual or not. This is because the sexuality of the children is considered abnormal and therefore to be ignored. This discriminates against the young people as they are then not given information on how to protect themselves from HIV.

There is a general lack of adequate information on sexuality being given to Nakuru urban girls and women. This discrimination has been evidenced in homes, at school and in the community. This is reflected in the sometimes gender role stereotyped education given in class and the gender roles enhanced by insisting on the girl child doing certain tasks in schools such as fetching a kettle of water from the taps for the teachers.

This is a manifestation of the sexual hierarchy in society which considers the sexuality of the male superior to that of the female. Although the boys are given even less information by their parents and teachers, there is a lot of subtle information in these institutions which reaffirm their masculinities and their dominance in the patriarchal society over the femininity of their counterparts. The very reason that they do not receive much information is because they are men. A mother of a 14 year old boy and a 17 year old girl had this to say:

‘I find it easier to talk to my daughter about sex but with my son it is impossible. His father also does not talk to him about it. I cannot even imagine the two of them discussing it.’

Upon examining what precisely she tells her daughter it turns out to be abstinence until marriage and the warnings against early pregnancies. The reason she gave for not giving information to the boy is that she did not feel comfortable talking about sexuality with him. This arises out of her socialization processes which does not encourage the discussion of the men’s’ sexuality and holds their sexuality as normal.

This is illustrated by the case of a father of a 21 year old boy and a 15 year old girl. When asked what he tells his son said:

‘I have never told him anything about these issues. I only occasionally throw a comment on HIV/AIDS. I tell him that he is a man and should he get a girl pregnant he should know how to deal with it. I will not be involved.’

Asked about his daughter he said:

‘I leave that to her mother.³ I only warn her that girls are the ones who suffer the consequences of sex so she has to be careful.’

This girl is discriminated against with regard to information on sexuality because of her ability to reproduce. Coming from the theoretical perspective that the world is biased in favour of men, she is treated as such because she is the ‘other’ as she gives birth while the men being the norm do not.

There is need to take into consideration the existence of sexual hierarchy in the dissemination of information on sexuality so as to ensure that girls and boys’ information needs are taken care of either separately or together. If this is not done then somebody loses out with adverse effects and it is usually the girl.

The information is not geared towards enabling the girls to adequately tackle the world in which they live. Girls as old as 18 years are not well informed on issues such as relationships with boys, contraceptives and condom use. Issues of negotiation for safe sex are never discussed, even with the older girls. Most of the women interviewed either had their first sexual intercourse at the age of 18 or younger. They all admitted to having been ill prepared for it and yet they deliberately withhold information from the girls. This lack of information on sexuality points to discrimination in the choice of information given to the girls.

Article 5 of CEDAW affirms that states parties should ensure that social and cultural patterns are modified to eliminate prejudices which are based on the idea of inferiority or superiority of either sex. It states further that they should ensure family education which should be inclusive of understanding of maternity as a social function with a common responsibility between men and women. The kind of information that these young people are receiving does not enhance any of these human rights. It is a violation of the right to protection against discrimination on the basis of sex, as captured in article 2 of CEDAW.

One parent admitted that she had ill prepared her daughter for the world:

‘My 15 year old daughter is so innocent. She is trusting of everybody and everything. I am afraid that she will be hurt by the world.’

Most parents and teachers have never thought of or addressed other aspects of education on sexuality, such as sex, emotions or even relationships.

Other factors influenced the efficacy of education on sexuality, such as the drought which was being experienced in Kenya at the time the research was conducted. A Maasai teacher told of how the girls from the community have to leave school so as to deal with the water crisis. After this a girl might not come back to school as she

has to be married off so as that her father can gain some respectability when the bride price is paid. This discriminates against her on account of her gender and sex. Just because she is female biologically she has to perform the gender roles as stipulated by society, such as fetching water. Because she is biologically a woman she has to be married off in order for her father to acquire cattle. Apart from the usual problems of lack of information on sexuality these girls have to deal with early marriage.

All the six men I interviewed stated that they had not received any form of education on sexuality. All of them learnt about sex through information from their peers and by experimenting at a very early age. These men told of how they engaged in casual sex very early and also learnt from their peers about sexuality.

When asked why he felt it necessary to engage in early sexual activity a 15 year old I interviewed at the youth VCT centre said:

‘I was experimenting. Nobody has ever told me about sex or even talked about a relationship. I had sex eight months ago. I later on heard that the girl was HIV positive and so I decided to come for an test. Before now I had not been told about the condom but I knew of its existence.’

The fact that boys seemed to get involved in sexual activity slightly earlier than girls was confirmed by other evidence obtained by desktop research (Ojwang, 1991). The effects of their lack of information on sexuality are however mitigated by socialization processes which put their sexuality higher up the hierarchy than that of women.

The responsibility and need to obtain information on sexuality is placed upon girls and their mother on the home front and on their female teachers at school. This is based entirely on their biological ability to reproduce. This places an extra burden on them as the school has extra lesson out of the normal school time for them. These lessons are conducted by the female teachers. The female students are then expected to give peer information to both the female and the male students. This eats into their time for other activities and might have repercussions on their performance in school.

On the other hand the female teachers are themselves burdened by the extra responsibility of obtaining information and passing it on to the girls. This does not accord the same treatment to both female and male teachers. The seminar that I attended was conducted on a weekend. The participants arrived on Friday evening at 6 pm and left on Sunday at 4 pm. This ensured that they still attended to their duties as teachers but they did not have time to rest. This is discriminatory as it does not recognize and treat these seminars as a duty and deprives the women of resting time.

Youth agenda

Some youths said that they felt neglected by the government and felt that this affected their ability to access information on sexuality. One of them said that they were ignored as they were not provided with jobs and opportunities. They pointed out that even if they had adequate information they might not be able to implement it because of economic hardships. This was confirmed by a counsellor at the youth VCT centre, who said:

‘According to my observation girls tend to be involved in sex earlier than the boys. This is because they are usually in relationships with older men for the money and they then feel obligated to give them something in return and that something is usually sex.’

The youth VCT centre was a reflection of this neglect. The clinical officer in charge said that they were very poorly funded. They are situated within the Nakuru Provincial General Hospital. They offer both free and paid for counselling services. They are seen as not doing an important job as they deal with young people. Due to

³ This is a stepmother to the girl and she is 12 years older than her.

this they were understaffed and have to resort to using volunteers. Their funding had been drastically reduced which had effected their services. They were no longer able to offer outreach services to schools and they did not have any carry away pamphlets at the time of my visit.

They only had a wooden crudely crafted demo-penis and no equivalent for the female. This affected their ability to offer counselling as they would not be able to fully explain the functions of the male and female sex organs as vision enhances understanding. This lack of government engagement and commitment in the affairs of the youth was pointed out by a respondent, himself a youth. This is also a factor which interferes with their learning process in schools as after their education there is no hope or expectation of using the information to better their lives as there are very few jobs available.

Control

It was an assumption of this research that the ultimate aim of giving information which is in its content inappropriate and which does not serve the people or the purpose for which it is intended was to control the sexuality of women for the benefit of men. The attempt of patriarchy to control women's sexually underlies this study. The main author of this control in most instances appears to be the woman, although in some instances it is the man. These are however all tools of the patriarchal system which needs to control women's sexuality (Tambiah, 1995).

These women might be powerful, economically empowered or otherwise independent women but ultimately their movements or freedoms are curtailed by the patriarchal system which demands that a woman be subordinate to a man. Purity, a respondent who was a divorcee living in a large house with her two children, was economically independent and by any other measure seems empowered. She has four brothers, two of whom are working. She accommodates her other two brothers one of whom goes to college while the other is looking for a job. Because of the silence on sexuality with which she grew up she has been unable to tackle a problem which she has with her jobless brother.

'He keeps on molesting my house girls. One even got pregnant and had to leave. The new maid told me that she found him in her room. I cannot discuss this issue with him as he is my brother. How do I discuss sex with my elder brother? I resolved to kick him out of my house but when my father heard of this he came and said that if I sent my brother away he will curse me. My mother must have told my father about the problems that I have with my brother. We did not discuss the reason as to why I want him out of my house as I cannot discuss issues of sexuality with my father.

'Since I know what my brother is capable of doing I usually lock my 12 year old daughter in her bedroom and I sleep with the key. I am usually a light sleeper so I can always hear her when she wants to go to the bathroom.'

This woman was brought up with silence on issues of sex especially men's sexuality. Because of that silence she is unable to confront her brother who is disrupting her house and also she cannot talk it over with her father. So her brother continues to live in her house while she has to control her daughters' movements, even in going to the bathroom by locking her in the bedroom at night.

Purity believes that both her brother and father know the reason why she wants to evict her brother but they take advantage of the silence. Due to Purity's father's patriarchal intervention her brother continues to enjoy the use of her house while she has to live in discomfort. Purity was brought up in a culture where talking about sexuality is not encouraged and so confronting her brother and father is difficult.

The same respondent says of when her father came to visit:

'I had to always go home early as otherwise I would find my father sulking and he would ask me where I was at that hour.

‘This is the exact same way that he used to behave when we were growing up. There was a day when the school gave us a day out. I went with some friends to the local shopping centre. When he met me there he took me back to school and told them not to allow me to leave the school again whether they are under official permission or not.’

This case illustrates the influence of socialization processes on a woman’s ability to make decisions in situations in the face of patriarchy. This respondent cannot assert herself in this situation while she seems to be otherwise more independent.

A woman respondent told me that her husband was very controlling. She informed me of the way he had set a time for her daughter, who was already over 18 years, to be in the house before 6.30 pm and she told me of the way they no longer communicated as the man was always shouting at her. The man did not see her as a thinking person but as a woman whose mental capacity was deficient merely by being a woman. He had never physically abused her. When I asked her whether she had consulted her father in-law she said:

‘My father in-law is worse than my husband. There is a time he was sick and they came to live in my house together with my mother-in-law. Whenever I told my son to wash plates or do anything that he thought was a woman’s job he would complain. I told him to keep off the running of my house. One day I came home and found that he had beaten up my mother in-law in my house. I chased them both away.’

This woman had been intimidated by her husband but faced with a situation of physical violence within her home her reaction was unexpected.

This control and restriction of movement of women is a violation of their human rights. It is a violation of their right to liberty and security and their right to movement (UDHR) and it also discriminatory in that she is treated that way because she is a woman. This violates CEDAW which is a declaration promoting the elimination of all forms of discrimination against women.

CHAPTER FIVE

Awakening the giant

Access to education on sexuality in Kenyan schools has always been a thorny issue. Any strategy to address the issue should look into the history of education on sexuality in the Kenyan education system so as to be aware of the reasons why there has never been a policy which addresses education on sexuality in Kenyan. The proposal to introduce sexuality education into schools has in the past been met with resistance from religious institutions, especially from the Catholics and the Muslims (Brockman, 1997). Change attitudes is quite difficult and as such should be tackled with a lot of caution.

Due to this resistance, we need to re-evaluate the current policy document on the education sector and HIV/AIDS and see how we can use it to effectively deliver the messages. We should improve those aspects of education in sexuality such as gender, which is already recognized by the existing policy document.

The goal of this policy is to mitigate the effects of HIV/AIDS. We could strategize around this by using cross-cultural comparisons to show the effectiveness of provision of education on sexuality. This we can do by bringing in the example of how education on sexuality has had a positive lowering effect on the rate of sexual activity among young persons in the Netherlands.

We should approach this process from the point of view of the least harmful messages on sexuality. This would mean highlighting biological, socio-cultural, psychological, and spiritual dimensions of attitudes, beliefs and values about identity, relationships and intimacy in the lives of the children.

Terminology is crucial as words create either positive or negative impressions. Previously when there was an attempt to introduce education on sexuality in Kenya it was presented as sex education which suggested that it was meant to teach the children about penetrative sex. So there is a need to use the correct people-friendly terminology and use proper clear explanations. This should emphasize that education on sexuality does not mean exclusively penetrative sex but is about addressing the biological, socio-cultural, psychological and spiritual dimensions of attitudes, beliefs and values about identity, relationships and intimacy from the cognitive domain. This means that we should approach the need for sexuality education by presenting it as the need for a gender and sexuality education.

Taking into account the lack of information on the part of the boy is very important in any strategy for change. This can be addressed even within the current frameworks but there is a need to draw the attention of parents and teachers to the fact that there is a gap as they did not seem to realize that the boys were being ignored, nor the significance of this. There is a need to conduct further research to inform any action.

There is a need to keep the light burning by keeping the need to have a meaningful syllabus on education on sexuality in Kenya at the forefront as there seems to have been a change of attitude on issues of sexuality. The mere fact that these women and men were speaking out on their sexuality shows that there is room for a reintroduction of the issue of education on sexuality in schools. With the advent of HIV/AIDS we can argue that this would help to control it.

But all these issues have been made more difficult in the light of the Bush administration stand which encourages only abstinence messages in the control of AIDS. The messages of the campaign decide whether the programme gets funding or not.

Conclusion

From this research we see that there are gaps in the way education on sexuality is dealt with in Nakuru urban area. This is reflective of the position in the rest of Kenya. This silence and these gaps are both within the homes and the school system. However, tackling this problem has been an uphill task as it is not only a Kenyan problem at the moment but within the current world order which forms the agenda for change.

As the world and Kenyan politics go on there are lives which are affected. The lives of the girls and the women are more affected due to their increased vulnerability due to their biological make-up and the socialization processes.

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Annexures

Questions that guided the research

Questions for the girls

- What do you understand by sexuality?
- What are your sources of knowledge on sexuality?
- What information do you receive on issues of sex and sexuality? What about safe sex?
- Does this information answer your questions on this topic? Do you receive the same information as the boys? Is the information you receive realistic?
- What do are your ambitions in life.
- What happens when issues of sexuality are discussed in class?
- What have you been taught about the condom?
- What information do you get about romantic love?
- What are you told about boys? What are you taught about maturation?
- Have you ever experienced sexual harassment or violence? How did you deal with it?
- Have there been to your knowledge any reports to the administration of sexual harassment?
- Have you ever tried to discuss such issues with your teachers?

Questions for the teachers

- What is the government policy on sex education?
- How do you as a school deal with issues of maturation amongst your students...
- What is the ratio of female to male staff?
- Does your school curriculum provide for the teaching of sexuality?
- How are your levels of enrolment and retention of both boys and girls?
- Have you had any incidences of girls dropping out of school? Why?
- Do you ever discuss contraceptives including condom use?
- Why is the topic of abstention favoured?
- What are the dangers that Kenyan adolescents who are sexually active face?
- How adequate is your training background as regards the teaching of sexuality?
- How do you deal with unequal power, socialization and the low status of women in your teachings?

International instruments

Convention on the Elimination of All Forms of Discrimination Against Women

International Charter on the Rights of the Child

International Covenant on Economic, Social and Cultural Rights

Millennium Development Goals

The Protocol to the African Union Charter

United Nations Declaration of Human Rights

Table of statutes and policies

Children's Act of 2001 Laws of Kenya

Constitution of Kenya

Education Act Chapter 211

Education Sector Policy on HIV/AIDS

Ministry of Education, Science and Technology Sessional Paper