

Institute for Christian Teaching
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**SEXUALITY EDUCATION IN ADVENTIST SCHOOLS:
A KENYAN PERSPECTIVE**

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I. INTRODUCTION

This paper deals with "sexuality education" in Adventist schools in Kenya. It deals with broad guidelines on the subject and does not serve as a classroom text book. The paper can be a springboard for developing a school curriculum on sexuality education.

1. Definition of the Title

The title of the paper is "sexuality education" and not "sex education". To many people, the word "sex" conveys the idea of sexual intercourse or coitus coupled with fun. The sexual act is a small part of a bigger picture of human sexuality. As stated above, the concept of human sexuality involves more than the physical act. Sexuality encompasses the totality of being a person. It touches on one's nature and not solely on one's genitals. Human beings are sexual by nature at all stages of their lives, from the womb to the tomb.¹ Consequently, sexuality education must form a basic principle in the development of human personality.

2. The Need

There is a great need to offer a balanced sexuality education in our schools. The public and private schools in Kenya follow strictly the curriculum formulated by the Ministry of Education. This curriculum does not provide any coordinated sexuality education. In biological sciences, human physical sexuality is touched upon when dealing with human physiology and anatomy. This physical aspect of sexuality forms only a small section of the total picture of human sexuality.

The Kenyan Adventist schools follow the same government curriculum which is used by public schools. Consequently, teachers in Adventist schools teach only the national examinable subjects which do not provide any meaningful sexuality education. Adventist churches sometimes make an occasional presentation of the subject on human sexuality especially during youth retreats and seminars.

The African culture has been eroded through formal education, modernity, urbanization and the mass media propaganda. In the cultural setting, sexuality education was handled by the parents and the extended family which encompassed the grandparents, the uncles, the aunts, the older siblings and the clan. The young people received their sexuality education from childhood to adulthood through songs, stories, riddles, concerts, dances and rigorous initiation ceremonies.

Children knew from childhood their different sexual roles in the home and in the society. During the initiation ceremonies, normally conducted at the beginning of their puberty stage, the young people received special training and education in areas of sexuality. At initiation, the initiates would go through a rigorous family life education. They would be inducted into all aspects of human sexuality.

With the introduction of modern formal education, the parents and the extended family seem to have abdicated their roles as educators in human sexuality. The main role played by many parents today is only to provide the physical and material needs to their children with little attention to sexuality education. To a greater extent, the young people are left on their own to explore their sexual potentialities. They acquire distorted views on sexuality from their peers, mass media and sometimes through their own experimentation.

Currently there is a standing controversy between the religious leaders in Kenya and the Ministry of Education with regards to the inclusion of sexuality education in the schools' curriculum. Many Kenyans are concerned with the widespread of Acquired Immune Deficiency Syndrome (AIDS), and other Sexually Transmitted Diseases (STDs), especially among the young people. The other area of concern is the increased adolescent pregnancies and illegal abortions among school girls.

The education authorities assert that offering "family life education" in schools would reduce drastically the sexual problems already cited. The emphasis is placed on the use of condoms. The government has also placed many billboards all over the country promoting the use of condoms as a preventive measure against AIDS.

The religious leaders on the other hand claim that introducing family life education in schools would promote promiscuity among students, resulting in more adverse consequences. These leaders, though advocating self control and sexual abstinence before marriage, they have not developed a viable curriculum on sexuality education. Consequently, the youth have no proper guidance on how to handle their sexuality. There is a dire need of developing and providing a responsible curriculum on sexuality education in our school system.

3. Problems

Irresponsible sex behavior has caused a number of problem in the society. The AIDS cases in Kenya are on the increase.

The World Bank estimates that about 7% of the country's population is infected with HIV.. HIV/AIDS has spread throughout Kenya because most people do not practice safer sex, the majority of infected people do not know that they are infected, a fear of people to obtain condoms, the practice of wife inheritance, and a combination of conservatism, ignorance, and denial about prevailing sexual behavior and the true threat of the epidemic²

AIDS has deprived many children of their parental care and support. "About 1 million children in Kenya, Rwanda, Zambia, and Uganda are orphaned due to parents' deaths from AIDS."³

The economy of the country is also affected when the much needed work force is reduced due to deaths caused by AIDS epidemic. The age group which is likely to be infected with HIV is the most sexually active group of 15-49 years. A great part of the public resources is being used in the treatment of AIDS cases.

4. Premises

With the erosion of our cultural values and the resultant decline in the moral values, the Adventist education in Kenya should provide a viable practical sexuality education to its young people. The Adventist schools must take the lead in providing that kind of education. Such education will eventually permeate the total fabric of the Kenyan society. With time, the Ministry of Education and other religious entities can borrow a leaf from the Kenyan Adventist curriculum on sexuality education in order to develop a national curriculum on the subject. Such kind of education will go a long way in reversing the current downward trend of moral disintegration.

It should be noted that all Bible quotations are from the NIV translation unless indicated otherwise.

II. SEXUALITY EDUCATION: A CHRISTIAN PERSPECTIVE

Any meaningful sexuality education must begin with what God says in his word on the subject. God the Creator, knows what is best for human beings. The Bible is very positive about human sexuality. If handled responsibly, it produces happiness, joy and the well being of the human race. If it is mishandled, it will produce adverse results to individuals and society as a whole.

1. Sexuality Created by God

God created man and woman in His own image. (Genesis 1:27). The two were created for companionship. They were commanded to reproduce. In their intimate relationship, the two were to be one flesh. (see Genesis 1:28; 2:18-24).

Human beings are essentially sexual as well as physical and social. Sexual activity is not only the means by which humans procreate, it is also the means by which they express the most intimate human emotions. It is very clear that the sex act was intended only for husband and wife.

2. What Sexuality Is

Human sexuality is a gift from God. It must be handled within the parameters of the Bible teachings. The first married couple was established by God. Future generations were to establish similar couples following the first God-given pattern. The Bible recognizes the right of a married couple to enjoy their conjugal rights.

The Apostle Paul states that "the husband should fulfill his marital duty to his wife, and likewise the wife to her husband.... Do not deprive each other except by mutual consent and for a time."(1Corinthians 7:2-5). Solomon states the same truth when he admonishes, "May her breasts satisfy you always " (Proverbs 5:19). Sex is holy and beautiful. It is a creative act. It is an act of unity. The Bible does not condemn human sexuality but its misuse.

3. *What Sexuality Is Not*

Human sexuality is not something unbecoming or dirty. It is not sin. Its dictates are not to be let loose as a person wishes without regard to the consequences. Sexuality is not there just for fun or for only making babies. It is not the unspeakable or the untouchable.

III. HUMAN SEXUALITY: GENDER IDENTITY

To understand fully the human sexuality, one needs to know the basics of the human anatomy and physiology. David asserts that "I am fearfully and wonderfully made" (Psalms 139:14 NIV.) Biological sex influences our gender identity. The five basic separate biological categories or levels of sex determination are:

- (i) Genetic sex
- (ii) Gonadal sex
- (iii) Hormonal sex
- (iv) The internal accessory sex structures
- (v) The external genitalia.

1. *Genetic Sex*

Biological sex differences are determined by the chromosomes present in the reproductive cells (sperms and ova) when conception takes place. The human body cells contain a total of 46 chromosomes which are arranged into 23 pairs. The chromosomes are structures that carry genes, minute biochemical blueprints. The genes determine the innate characteristics of a person.

The 22 chromosome pairs are the same in both male and female and do not determine sex differentiation. The 22 matched sets are called "autosomes". The mature reproductive cells contain only half of the usual complement of 46 chromosomes. A normal male sperm cell contains 22 autosomes plus an X or Y chromosome. A normal female ovum (or egg) contains 22 autosomes plus an X chromosome. The ovum bears only an X chromosome, but the sperm may carry either an X or a Y chromosome. If the ovum is fertilized by a Y bearing sperm the produced XY combination results in a male child. If the ovum is fertilized by an X bearing sperm, the XX combination will result in a female child.

2. *Gonadal Sex*

Other sexual differentiation begin to occur after the genetic sex has been fixed at conception. The sex glands (gonads) look alike in the first few weeks of prenatal development of a human embryo. Six weeks after conception, the gonads develop into testes in males with the presence of a Y chromosome, In the absence of a Y chromosome, the gonads develop into ovaries.

3. *Hormonal Sex*

The control of biological sex determination is passed to the sex hormones as soon as the testes and ovaries are formed. The testes begin to secrete male hormones known as "androgens". The most important androgen is testosterone. The ovaries produce the estrogen and progesterone.

4. *The Internal Accessory Sex Structures*

The androgens in male fetus begin to stimulate the development of male structures. In the absence of androgens, female sex organs develop. Internal sex structures begin to differentiate after six weeks of prenatal development. In male fetus, androgens cause the development of male internal structures; the testes, epididymis, vas deferens, seminal vesicles, and prostate gland. In the absence of these testicular secretions, the female internal organs are formed; the fallopian tube, uterus, and ovaries.

5. *The External Genitalia*

All human fetuses possess undifferentiated external genital tissue prior to the completion of the sixth week of prenatal development. Male external sex structures begin to form when androgen begins to circulate in the bloodstream. In the absence of androgens, female external genitals begin to develop. The external sex differentiation process is complete by the twelfth week. By that time, the penis, scrotum are recognizable in males, and the clitoris, labia majora and other genital tissues can be identified in females.

IV. HUMAN SEXUALITY: STAGES OF DEVELOPMENT

It has already been stated that sexuality is entwined with what we are as human beings and not what we do. It refers to the totality of being a person, beginning at birth and ending at death.

1. *Sexuality in Childhood*

Sexual functioning is natural to human beings. "Newborn male babies often get partial or complete erections right after birth...Female babies experience vaginal lubrication early, too. Obviously, penis erections and vaginal lubrications are natural functions that occur prior to any learning about sexuality".⁴

2. Sexuality and Adolescence

Adolescence is the transition period between childhood and adulthood and spans the period from 12 to 20 years of age. Major dramatic physiological changes take place during the first few years of that period. In many societies, the child is initiated into adulthood once puberty is reached. Puberty refers to the period of rapid physical changes in early adolescence. There are cases of children reaching puberty stage even before 12 years of age.

During this stage, the pituitary releases greater amount of gonadotropins hormones into the blood stream. These hormones are chemically identical in men and women. They stimulate activity in the gonads. "In males they cause the testes to increase testosterone production; in females, they act on the ovaries to produce elevated estrogen levels."⁵

Under the influence of hormone stimulation, secondary sex characteristics develop. In females, breasts develop, hair grows at pubic areas and under the arms, hips broaden and menstruation begins. The first menstrual period is called menarche. Every month an ovum or egg is released by the ovary. This egg moves through the fallopian tube and if it meets a sperm (a male cell) it is fertilized. If there is no fertilization, then it comes out with the shedding of the lining of the womb.

In males, hair grows in the pubic area, under the arms, and on the face. At this time the voice breaks and sperm production begins. Nocturnal emissions are natural and normal. In both male and female, the hormone stimulation causes development and enlargement of the external and internal genitals. The adolescents are capable of making babies but they may not be psychologically and economically ready for such and eventuality.

3. Sexuality and the Adult years

Sexuality is an integral part of the adults during their midlife and beyond. Sexuality like every other system of the body is affected by aging. These changes are gradual until they reach the menopause. Menopause, the cessation of ovulation and menstruation in female, signals the end of a woman's reproductive function. These changes take place between 40 and 55 years. This cessation of menstruation and fertility does not physiologically lower sexual desire and response in females.

With age, there is decreased production of testosterone in males, but it does not impair their ability to function sexually. In spite of these changes, "men in their 90s are still capable of impregnating a woman and women remain capable of multiple orgasms until death."⁶

V. TRANSMISSION OF SEXUALITY EDUCATION

Ignorance in human sexuality, sexual misinformation and myths encourage irresponsible sexual behavior. Proper knowledge concerning human sexuality is vital to a person's symmetrical development. The young and the old are not harmed by knowing the true facts of life. Accurate information on sexuality should be provided to all.

1. Sexuality Educators

The primary sexuality educators are parents. The home is the first classroom for communicating ideas, information and values to the children on sexuality. Non verbal sexuality education precedes the verbal sexuality education. If the parents fail to give proper factual information on sexuality to their children, these youngsters will receive false and distorted information from their peers and the mass media. Therefore sexuality education should be honest and realistic. Many parents are unable to provide necessary sexuality education to their children.

The school, the church and community should supplement the efforts of the parents in providing sexuality education to the youth. As stated earlier, the Adventist schools in Kenya have not developed facilities and resources to provide a balanced sexuality education to the students. The teachers are more interested in preparing their students to pass the government national examinations.

The church seems to have failed in the area of providing adequate sexuality education to their members. The occasional seminars held by the church on family life do not adequately deal with all the issues on sexuality. The community seems to be impervious to the needs of its people in the area of sexuality education. Community leaders may lament the irresponsible sexual behavior of the people, but they have not developed a viable strategy of dealing with the sexuality issues at stake.

A. Educator's own sexuality

A sexuality educator should be comfortable with his/her own sexuality. One needs to accept ones sexuality before trying to help others to accept theirs. We teach more by what we are than by what we say. Sexuality educators should possess pure thoughts and desires on sexual matters. The Bible states clearly that: "for as he thinks in his heart, so is he"(Proverbs 23:7 NKJV). Human outward behavior is the product of human thoughts and desires..

Sex educators need to understand their own masculinity and femininity. Each of us has both feminine and masculine qualities. A sexuality educator needs to accept one's body image. Accept your body the way it is. Remember that you cannot run away from yourself. The only thing one can do is to work to change the parts of the body which can be corrected.

B. Qualifications for the Sexuality Educator

Sexuality educators need to be qualified for the task. They should demonstrate responsibility in their sexual behavior. The Education Department of the Seventh-day Adventist Church in Kenya and the University of Eastern Africa, Baraton should begin to train sexuality educators by offering inservice courses on the subject to the Adventist teachers. On top of this, books should be developed to meet this urgent need.

The instructors need to have correct factual knowledge about sexuality. They should possess positive and healthy attitudes towards it. They should be comfortable with the subject matter on

sexuality. The sexuality educators should not reveal their own biases when handling the subject matter. They should be able to use the language of sexuality easily and naturally.

2. *Communicating Sexuality Education to Learners*

When communicating sexuality education, the educators should take into consideration the various age groups. Both young and old need correct information on their sexuality.

A. *Preschool Learners*

The preschool children would be of ages 3 to 5. The preschool learners have short attention span. Therefore, the parents and educators should keep their information short and simple. The young ones do not need long explanations. The areas that may be covered during this stage would include:

- (i) Correct names for the sex parts.
- (ii) Roles of family members.
- (iii) Development of a positive self-image and self-esteem.
- (iv) Making friends of both sexes.
- (v) Knowledge that living things grow, reproduce and die.

B. *Lower Primary School Learners*

Students in the lower primary classes are 5 to 8 years old. It is at this stage when they are curious to know how their bodies function and the differences between males and females. Their sexuality education programme would include:

- (i) The similarities and differences in males and females
- (ii) The basics of plant, animal and human reproduction
- (iii) Growth and development
- (iv) Family roles and responsibilities.

C. *Upper Primary School Learners*

Students in the upper primary classes would be 9 to 12 years old. Some may reach their puberty stage at the latter part of this stage. Students at this stage show curiosity about their bodies. Many of them start to show interest in the opposite sex. Both males and females begin to show affection for their peers. They have increased curiosity about reproduction. In their sexuality education, emphasis should be placed on the following areas:

- (i) Biological information in areas such as: the endocrine system, menstruation, pregnancy, birth, nocturnal emissions, and other secondary sex characteristics.
- (ii) Interpersonal relations.
- (iii) Responsible sex.
- (iv) Different male and female feelings.

D. Lower Secondary School Learners

Students in the lower secondary classes are 12 to 14 years old. This is the period of rapid growth associated with puberty. The young people develop the secondary sex characteristics. This is the time they seek their own independence. Due to the many physical and emotional changes taking place in their bodies, they need special care and attention. The following topics may be included in their sexuality curriculum.

- (i) Overview of biological material covered in the previous stage.
- (ii) Sexual distortions.
- (iii) Self-respect.

E. Upper Secondary School Learners

Students in the upper secondary grades are 15 to 17 years old. Some may be growing at a rapid rate while others are growing slowly and steadily. They experience various changes associated with puberty. They develop great interest in sexual topics and activities. Topics to be covered are:

- (i) Premarital behavior.
- (ii) Dating.
- (iii) Courtship.
- (iv) Parenthood

F. College - Age Learners

These are students from age 18 onwards. Many enter college in their adolescent stage. As mature students, sexuality education should be approached with honesty and thoroughness. There is no need to avoid certain topics. This is the time they make serious relationships which may end up in permanent relationships through marriage. The following areas may be included in their curriculum:

- (i) Premarital counselling.
- (ii) Choosing a life partner.
- (iii) Courtship and dating.
- (iv) Marriage.
- (v) Size of the family.
- (vi) Various family issues.

G. Adult Learners

This group includes many of the working class group and the married couples who are already rearing children. The following areas could be included in their sexuality education:

- (i) Husband- wife relationship.
- (ii) Family finances.
- (iii) Rearing children.
- (iv) Establishing a home.
- (v) Neighbors and inlaws

H. Ageing Adult Learners

In many communities, the sexual needs of the older adults are neglected. The older persons need to be assisted in their sexual adjustment. The programme of sexuality education for the ageing would include the following:

- (i) Postmenopausal changes in females.
- (ii) Postageing changes in males.
- (iii) Sex in old age.
- (iv) Retirement.
- (v) Grandchildren.

I. Sexual Education for Special Groups

Sometimes sexuality education for the physically and mentally disabled has been neglected. People with disabilities are also sexual beings. They should be taught to accept themselves as human beings. They should be helped to develop a secure and comfortable self-image. These disabled people will live self- fulfilled lives proportionate to the degree of their disability if they receive proper sexuality education.

VI ISSUES AND CHALLENGES IN SEXUALITY EDUCATION

There are certain issues and challenges which cannot be ignored when presenting sexuality education. The sexuality educators will use their discretion in presenting these issues to the relevant groups. Issues involving minors need to be brought to the attention of their parents and teachers.

1. Circumcision and Sexuality

In Kenya, circumcision is not universally practiced among all tribes. Some circumcise both males and females, others circumcise only males while the rest do not circumcise both sexes.

A. Male Circumcision

Neither does male uncircumcision nor circumcision seem to affect the human sexuality. Many tribes wait until their boys have reached the puberty stage before they circumcise them. Some communities refuse to take their boys to the hospital for circumcision. They want the boys to be circumcised according to the tribal norms. It is preferable to circumcise boys in the hospital instead of using the unsterilized blade with the possibility of spreading sexually transmitted diseases; HIV/AIDS included. Furthermore, the males should be circumcised when they are of a

tender age to avoid much bleeding at puberty stage.

B. Female Circumcision (Female Genital Mutilation)

Female circumcision (female genital mutilation) is still being practiced in some parts of Kenya. There are several types of female genital mutilation.

(i) Circumcision

The simplest procedure of cutting off the clitoral hood may be called circumcision.

(ii) Clitoridectomy

Clitoridectomy is the removal of the clitoris itself. This is a common practice. A traditional woman circumciser cuts off the girl's clitoris with a curved knife. This ritual is performed when the girl has reached puberty stage.

(iii) Genital Infibulation

Genital infibulation is the extreme practice of female genital mutilation. Explaining this practice, Crooks states that, "the clitoris is entirely removed and the labia are cut off, with both sides scraped raw and stitched up (sometimes with thorns) so they grow together, leaving only a small opening for urine and menstrual flow to pass through".⁷

Female genital mutilation is a rite of passage from childhood to adulthood. It is generally believed that the circumcised women are protected from sexual over-stimulation. This is expected to ensure virginity before marriage and fidelity after marriage.

There are numerous medical problems which arise from these procedures. Genital infibulation causes serious gynecological and obstetrical complications. Because of extensive vaginal scarring, fetal death sometimes occurs due to difficult delivery.

This cultural excision is very painful and causes a lot of bleeding which may result into death. Other medical complications may include massive tear towards the bladder or towards the anus. The traditional knife used for all girls is likely to spread diseases.

The female genital mutilation may cause tension in marriage. Sexual intercourse may become a torment due to the loss of the woman's libido. The husband may take an additional wife from the tribe which does not circumcise their women.

The circumcised girl may suffer psychologically. The trauma caused by the severe pain during the circumcision may cause sexphobia to the female for the rest of her life.

Before the sexuality educators can successfully stop the female genital mutilation, they should understand the harmful effects of the practice. Secondly, they should be well versed with

the cultural norms of the communities practicing it. These educators must find an alternative means of providing appropriate and useful sexuality education to the girls at their puberty stage.

2. *Polygamy and Sexuality*

Polygamy has been practiced in Kenya by many communities for a long period. A man was considered to be rich and well esteemed when he had many wives and children. A monogamous marriage was generally for the poor man.

The practice of polygamy is not according to God's order. God said that husband and wife were to be one flesh. In Kenya polygamy is the practice of one man marrying more than one wife. We do not have the practice of one wife marrying more than one husband.

Polygamy subjects women to a state of sexual inferiority. The polygamous husband cannot adequately sexually relate to all his wives. He cannot satisfy the sexual needs of his many wives. The sexually starved wives may be tempted to look elsewhere to have their sexual needs met. Some wives may develop sexual complexes for living unfulfilled sexual lives.

By comparing the sexual performance of his wives, the man will emotionally be more attached to some of his wives than to others. The wives may be harboring certain inhibitions regarding their status in their polygamous state. Jealousies and envies among such wives are the order of the day. The negative feelings among the wives are also shared by their children.

Sexuality educators should enlighten the community on the evils of polygamy. They should restore the dignity of the marriage institution.

3. *Sexual Distortions*

Any sexual patterns not in harmony with the Bible teachings are included among the sexual distortions.

A. *Homosexuality*

The female mutilation homosexuality is forbidden by God. The Bible has the following to say concerning the practice.

"Do not lie with a man as one lies with a woman; that is detestable".(Leviticus 18:22).

"If a man lies with a man as one lies with a woman, both of them have done what is detestable. They must be put to death; their blood will be on their own heads".(Leviticus 20:13).

"Neither the sexually immoral nor idolaters nor adulterers nor male prostitutes nor homosexual offenders will inherit the kingdom of God" (1Corinthians 6:9,10).

Sexuality as created by God finds its highest expression in the heterosexual not homosexual union of man and woman. It is the work of sexuality educators to reclaim the homosexual men

and women (gays and lesbians).

B. Premarital Sex

Sex before marriage and outside marriage is forbidden by God.

"Flee from sexual immorality. All other sins a man commits are outside his body, but he who sins sexually sins against his own body" (1 Corinthians 6:18). See also Exodus 20:14.

Premarital sex hurts both partners. Those who engage in it take great risks. There is the possibility of contracting sexually transmitted diseases including, HIV/AIDS. Other physical risks include unwanted pregnancy, increased possibility of getting cancer of the cervix, and other health risks involved in using contraceptives or having an abortion. The practice may cause infection, sterility or death.

Psychological risks are also serious among those who practice premarital sex. They develop feelings of guilt, doubt, fear, disappointment, self-hatred and the pain of being exploited.

Premarital sex also affects the partners emotionally. Such people get their judgment clouded by the emotional bonding of sex. To save face, such people end up marrying the wrong person. Since sexuality is woven into every area of our personhood, its misuse will produce negative effects on all areas of our personality.

Proper sexuality education will reduce the rate of premarital sex.

C. Sex with Animals

The Bible condemns sexual relations with animals. The Bible has the following to say on this issue:

"Do not have sexual relations with an animal and defile yourself with it. A woman must not present herself to an animal to have sexual relations with it, that is a perversion" (Leviticus 18:23).

The Bible further states:

"If a man has sexual relations with an animal, he must be put to death, and you must kill the animal. If a woman approaches an animal to have sexual relations with it, kill both the woman and the animal. They must be put to death. Their blood will be on their own heads". (Leviticus 20:15,16).

D. Sexual Abuse

There are many forms of sexual abuse. Sexual abuse is any form of sexual activity that is carried out against another human being without ones consent. Some forms of abuse are more

violent and forceful such as rape. Rape is physically forcing a man or a woman to have sex against his or her will. According to the mass media reports, rape cases are becoming too common in Kenya.

The Bible also condemns sexual relations between close relatives such as father, mother, brother, sister, daughter, son etc. (see Leviticus 18:6-17). Sexual intercourse with a close relative is called incest.

There are other forms of sexual abuse which normally may take a long time with no other person knowing. Such abuses involve touching private parts of the body, such as the breasts, hips or pubic area. Demeaning sexual remarks made to men or women are also sexual abuses.

The sexuality educator must deal with all forms of sexual abuse. The educator should assist the victims of sexual abuse.

4. Unwanted Pregnancies and Illegal Abortions

Many youth in Kenya are sexually active. Pregnancy among teenage girls is on the increase. Unwanted pregnancy frequently leads to illegal abortion which is extremely dangerous for the mother.

The consequences of unwanted pregnancy also include: dropping out of school, difficult and dangerous delivery of the baby, and becoming a single parent. The irresponsible boy who makes the girl pregnant suffers silently from guilty conscience. The sexuality educator will need great tact to deal with cases of unwanted pregnancies and illegal abortion.

5. Sexually Transmitted Diseases

Sexually transmitted diseases (STDs) are spread from one person to another mainly by sexual contact. Some of the common curable STDs are gonorrhoea, trichomoniasis, chlamydia infection and syphilis

AIDS, the Aquired Immune Deficiency Syndrome, is a new disease and is spreading rapidly in Kenya. It is caused by the Human Immune Deficiency Virus (HIV). There is no vaccine to protect people against HIV infection. At present there is no cure for AIDS. HIV infection is preventable.

People become infected with HIV in the following ways:

- A Sexual intercourse with an infected person.
- B. Contact with infected blood through blood transfusions, or unsterile instruments or syringes.
- C. From an infected mother to her unborn child.
- D. On rare occasions through breast milk.

Proper sexuality education will help people avoid STDs, including AIDS by changing their sexual behaviour. The safest prevention is sexual abstinence if single and being mutually faithful to ones' spouse.

VII. CONCLUSION

Responsible sexuality education will create positive relationships between the sexes and enhance morality by understanding oneself and the opposite sex. Sexuality education should be conducted on a highly moral and responsible plane. When proper sexuality education is not provided, the young people are left to explore on their own the mysteries of their sexuality. Unfortunately they learn in a distorted and misinformed manner about their sexuality either from their peers, mass media or through personal experimentation.

When provided with accurate facts on sexuality, individuals will be able to respond positively and affirmatively to their sexuality throughout life. Sexuality education will help in reducing STDs, unwanted pregnancies and illegal abortions, by helping people live responsibly and with informed understanding.

ENDNOTES

1. Bruess p.9
2. Richardson, *AIDS ILLUSTRATED*. 1996 Oct. 2(1):8
3. Mitchell, pp 84-5
4. Bruess p.9
5. Crooks p. 417
6. Goldsmith p. 228
7. Crooks p. 660

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