DELIVERY OF LIFE SKILLS EDUCATION TO INFLUENCE BOYS' AND GIRLS' SEXUALITY BEHAVIOUR IN SECONDARY SCHOOLS IN NAIROBI CITY COUNTY, KENYA

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ABSTRACT

Secondary school students in Kenya are taught sexuality in Life Skills Education. However, adolescents continue to face significant sexuality related challenges. Cases of early pregnancies, irresponsible sexual activities and STDs among boys and girls are common. Efforts that have been made to address this problem have not yielded comprehensive and conclusive solutions. As such, this study explored the role of teachers in delivery of Life Skills Education (LSE) to influence sexuality behaviour among boys and girls in selected secondary schools in Nairobi City County. The study adopted exploratory research design. Stratified random sampling was used to select 378 students and 26 teachers from 13 schools in Nairobi City County. The study utilized self-constructed questionnaires and interview schedules to collect data. Qualitative responses were coded to enable grouping into various thematic categories. Quantitative data was presented in form of percentages, means and standard deviations. Pearson's product moment and Chi square analyses were used to test research hypotheses. The study established that there was a strong positive correlation between life skills education delivery and boys' and girls' sexuality behaviour. It is recommended that LSE teachers should deliver adequate content for the benefit of the students while principals should ensure that life skills education on sexuality is effectively taught and supervise the lessons for effective content delivery.

Keywords: Life Skills Education, Sexuality Behaviours, Adolescents, Sexuality Education

1.0 INTRODUCTION

1.1 Background

According to Banegas and Lauze (2020), the traditional gender sensitive sexuality education that provided support and control for adolescents is now largely inexistent. Without the family and societal sexuality education buffers, adolescents are likely to suffer risks (Apter, 2018). As such, there is an urgent need to provide today's youth with a new set of skills and systems to deal with the life demands. It is essential that the youth be helped to develop skills for handling a wide variety of choices, changes and stressors which are causal factors to sexually risky behaviours (Shekar et al., 2020). Sexuality education among the youth in Kenya has tended to focus on abstinence largely avoiding information on condom and contraception use (Ahn et al., 2021). However, reviews on the successes in sexuality education indicate insufficiency in effectiveness (Sidze et al., 2017). The debate on what is effective sexuality and HIV Curriculum based intervention is on-going (Krugu et al., 2018). Some experts suggest that the success of sexuality education should be based on methodology (D'Andrea et al., 2020), reduction of behavioural and biological (health) risks (Keogh et al., 2018). It is notable that effective sexuality education emphasizes gender equality and

empowerment and improves reproductive health outcomes (Mecugni et al., 2021). Deducing from the reviews, it is clear that effective sexuality education programmes should focus on gender and power. As such, measurements of its effectiveness especially sexuality life skills education should focus on the correlation between teacher support, content in sexuality education, and sexuality behaviours among the youth.

Teachers, who are key implementers of sexuality education, many a times tend to be insensitive, discriminatory and use resource materials that are gender biased (Apter, 2018). This situation depicts only one gender performing certain types of activities, while some make disparaging remarks about the capability or characteristics of either (Ogolla & Ondia, 2019). Such practices discourage students especially girls, from participating effectively in the teaching and learning process. Classroom experiences determine how well girls and boys participate in educational activities, as well as stay and perform in school (Sidze, et al., 2017). Therefore, teachers who understand and use gender sensitive life- skills on sexuality are likely to lead to enhanced healthy sexuality behaviour among learners (D'Andrea et al., 2020). In fact, it has been proven that life skills education promotes healthy individual and society behaviour largely because it equips individuals with capacities to translate knowledge, skills, attitudes and values into action (Obach et al., 2017). Evidently, gender sensitive life skills sexuality education among adolescents is very important, however, its existence in secondary schools in Nairobi County has not been established (Ogolla & Ondia, 2019).

In the past, there has been concurrence among scholars that it is not known where or how both teenage girls and boys aged about 10-18 access information about their sexuality (Keogh et al., 2018). Studies suggest that at early adolescence, both boys and girls rely on sex explicit magazines, videos, internet sites, totally avoiding parents, teachers, or legitimate sources (Nelson et al., 2019). The nature of sexuality education on gender issues learnt by adolescents in schools except what is in the formal curriculum is also not clear. Drawing from the fore discussed, it is probable that boys and girls could be receiving inadequate and ineffective sexuality education, which is unlikely to mitigate risky sexual behaviours, considering there seems to be no formal curriculum and the risks seems to be rising. As is in the public domain the high number of expectant girls who did 2018 Kenya Certificate of Primary education and Kenya Certificate of Secondary Education is an indicator of sexuality risks girls are exposed to. So, this study sought to establish the influence of implementation of life skills education on protective sexuality behaviours among boys and girls in secondary schools in Nairobi City County to bridge the gap.

1.2 Statement of the Problem

Huge investment has been made in the education sector to enhance learning especially in behaviour change among secondary school students in Kenya but statistics indicate that schools are grappling with a lot of sexuality related challenges among male and female students. In Nairobi County, it is estimated that 33% female and 47% male students in secondary schools have engaged in sex with 36% of the former having more sexual partners aged 20 years and above. In 2018, the number of female students who were reported to be pregnant during KCSE examination was alarmingly high prompting the cabinet secretary to form a task force to investigate the matter. Some girls gave birth while sitting the examination (MoE, 2018).

The consequences of teenage pregnancies are far reaching. Some of the negative effects include; school dropout, early marriages and psychological distress among others. These negatively affect girls including denying them the opportunity to realize the promises of education. This problem

continues to persist despite the integration of life skills education in secondary schools. Notwithstanding the behaviour control challenge issues in Kenyan schools, it is assumed that equipping boys and girls with 'life skills education will lead to a reduction of already existing risky sexual attitudes and behaviour. On the other hand, it is imprudent to continue with some forms of life skills education without clarity on its effectiveness on target attitudes and behaviour. It is therefore imperative that this study examined the role of teachers in delivery LSE to influence sexuality behaviours among boys and girls in secondary schools in Nairobi City County of Kenya.

1.3 Purpose of the study

The purpose of this study was to establish the role of teachers in life skills education delivery to influence boys' and girls' sexuality behaviour in secondary schools in Nairobi City County of Kenya.

2.0 LITERATURE

The World Summit on Children (2002) extended in an extension of Convention on Rights of Children (aged up to 18 years) affirmed the rights of all adolescents to receive sexual and reproductive health information, education and services. It also emphasized the need to promote mutual respect for gender relations and provision of reliable information through education systems to ensure young people gain knowledge about their health and more so on their sexuality and reproduction. To achieve this goal, teachers are pivotal and therefore the need to examine the extent to which they have facilitated the implementation of sexuality education. Haruna et al. (2018) conducted a study to explore ways in which sexual health education among adolescents can be improved. The experimental study used mixed method approach with a random sample of 120 secondary students. The participants were divided into three groups; game-based learning, control group and gamification. The posttest scores of gamification teaching methodology were significantly higher than those of the control group and game-based learning. The teacher's motivation, knowledge, attitude and engagement contributed to the differences in knowledge on sexuality education. It was concluded that the support the teachers give the students was important in enhancing sexuality education. Since the studies were conducted in contexts that differ in many aspects from the Kenyan situation, there was need to for the current study for more conclusive results.

A qualitative study by Aransiola et al. (2013) examined teacher's perception on sexuality education and interventions in Nigeria. The findings showed that teachers supported school-based sexuality education but with diverse opinions on the content to be included. Majority of the teachers were against personal counselling of the students but agreed that they can teach sexuality education in the classroom. The findings are consistent with other studies that have established that teachers are willing to support the students in learning sexuality education and have no problem with the subject being discussed in the classrooms (Wanje et al., 2017). In other contexts, studies have established contrary findings that majority of the teachers are not willing to teach sexuality education (Muasya & Kazungu, 2018). These mixed results on this topic prompted the need for this study to make a scholarly contribution from a Kenyan perspective.

A recent study by Mohammed et al. (2018) examined the teachers' perception and support towards the sexuality education in selected secondary schools in Bauchi State. The descriptive study used a sample of 300 teachers who were purposively sampled. The respondents completed structured questionnaires each with 10 items. The results showed that the respondents considered teaching of sexuality education in schools as inappropriate due to cultural and religious beliefs. The teachers

also indicated that they were not ready to discuss matters of sexuality with the students due to religious dogmas. In another study, Omeje et al. (2012) examined the role of teachers who were practicing as counsellors in providing sexuality education in secondary schools. A total of 120 respondents were randomly sampled from 240 secondary schools to fill the questionnaires. Frequencies, mean scores and percentages were used to analyse the data. The results indicated that the respondents rated highly on the significant role of the teachers in the delivery of sexuality education but the findings did not indicate how teachers supported boys and girls on matters of sexuality education.

In an effort to find out the extent of implementation of sexuality education, Kasonde (2013) carried out a study to investigate the opinion of teachers concerning sexuality education in secondary schools in Botswana. The cross-sectional study used a sample of 25 (14 males and 11 females) teachers to collect quantitative data. The collected data were analysed using percentages and the results revealed that majority of the respondents (80%) indicated that sexuality education was appropriate for secondary school students. Nearly all the respondents (97%) stated that they were willing to teach sexuality education and if effectively implemented it would enhance sexual health behaviours. To enhance the delivery of sexuality education in secondary schools, the respondents suggested that teachers should attend in service training to improve on their knowledge on sexuality and teaching skills.

In Kenya, there is a scanty of literature on the role teachers have played on delivery of life skills education on sexuality. However, there is documented literature on sexuality education policies and how they have been implanted. Sidze et al. (2017) examined teacher support in the implantation of sexuality education in secondary schools. The findings of the survey revealed that teachers did not take sexuality education seriously because it was not taught as a stand-alone subject that is examinable. Most of the teachers who were observed while teaching sexuality education did not have sufficient knowledge on what they were teaching. It was also established that the teachers were not trained on the teaching activities to use while teaching sexuality education. Majority of the teachers (89%) perceived that there was support in teaching life skills education on sexuality. The current study examined the support teachers give to boys and girls in secondary schools to close the gap.

3.0 METHODOLOGY

3.1 Research Design
The study adopted exploratory research design. In this design, the researcher explores the status of the research issue without manipulating the independent variables (Creswell, 2018). This design was appropriate for this study because it provided an in-depth analysis and understanding of life skills education on sexuality among secondary school students in in Nairobi County. Correlational analysis was used to ascertain the nature of the relationships among study variables.

3.2 Target Population
The target population of this study was form two and four students taking life skills education in selected secondary schools in Nairobi County. This was informed by a survey conducted by Kumar et al. (2018) in Nairobi, whose findings revealed that about 30% of adolescent girls mostly aged 14 to 16 get pregnant before they attain the age of 18. In addition, life skills' education teachers and secondary school counsellors in Nairobi County were sampled as KIIs because they were better

placed to provide reliable information on the program uptake and its effect towards responsible sexual behaviour among their students.

3.3 Sampling Size and Sampling Techniques

Stratified random sampling was used to select the schools that were involved in the study. The schools were categorized into boy's boarding, boy's day, girl's boarding, girls' day, coeducational boarding and coeducational day. The sampling strategy allowed for overall population estimates with greater precision, ensured a more representative sample from a relatively homogenous population (Cooper & Schindler, 2003). Purposive sampling was also used to select form two students, school counsellors and life skills education teachers. Statistics available (MoE Report on Teenage Pregnancy, 2018) indicate that secondary school learners in the age bracket of the students who were sampled have engaged in sex. The boys and girls who participated in this study were selected using simple random sampling.

Table 1. Sample Size

| School Type | Target Population | | Sample Size | | | |
	G & C and LSE Teachers	Enrolment	Schools	G & C and LSE Teachers	Students Male	Female
Boys' Boarding	21	1421	2	4	57	-
Girls' Boarding	18	1242	2	4	-	80
Girls' Day	8	978	1	2		51
Boys' Day	13	824	2	4	58	-
Coeducational Day	26	1442	5	10	48	47
Coeducational Boarding	6	965	1	2	17	20
Total	**92**	**6872**	**13**	**26**	**378**	

Sample size was obtained using Slovin's (1960) formula; $n = \dfrac{N}{1+N(e)^2}$ where N is the target population and e is the margin of error (0.05). Using this formula, a sample of 378 form two students was selected. The sample of students from the categories of schools was proportionately sampled as indicated in Table 1.

3.4 Research Instruments

This study used self-constructed questionnaires in Likert scale to measure content taught in life skills education on sexuality, teacher support on sexuality education, knowledge on life skills education on sexuality, intent to have sexual intercourse and sex abstinence behaviours. Adolescents' views obtained on sensitive issues have been found to be valid and thus some researchers have used this approach in gathering information on their own behaviours and those of significant others (Greens & Hogan, 2005). Equally, adolescents' self-report measures have been found to have high validity with respect to objective measures of delinquent behaviour (Regoli & Hewitt, 1997). Additionally, questionnaires are effective data collection instruments that allow respondents to give much of their opinions in regard to the research problem (Kothari, 2004). The questionnaire consisted of sections A to F. Section A collected demographic information whereas the other sections collected data as per the study objectives. The interview schedule for the life skills and guidance and counselling teachers collected background information, topical issues on sexuality education, the content in sexuality education, how sexuality education is conducted and its influence on sexuality attitudes and behaviour among the students.

3.5 Validity of the Instruments

The suitability of the research instrument was assessed by peers, experts in this field of study and supervisors; by so doing the content and face validity was the ascertained (Nachmias & Nachmias, 1987). The variables under study were operationalized based on theories and literature review; this led to high construct validity. For the qualitative interview schedules the responses were considered to be valid by focusing on the coherence of information with available literature and across respondents. The qualitatively generated data was assessed through rigorous and truthful scrutiny to identify major themes as recommended by Creswell and Clark (2007) and Johnson and Christensen (2008).

3.6 Reliability of the Instruments

The researcher assessed the reliability of the questionnaires using test-retest technique. The questionnaires were administered to 12 students and 2 teachers who were selected from one school. After one week, the research instruments were administered to the same respondents. Chronbach Alpha reliability coefficient which according to Drost (2011) is the most commonly used technique in estimating reliability was used to establish the reliability of the research instruments. In Rosnow and Rosenthal (1991) view, self- report measures with a reliability coefficient of about 0.8- 0.99 is acceptable.

Table 2. Reliability Diagnostics of the Questionnaire

	Test 1	Test 2
Cronbach's Alpha	.81	.83
N	12	12

The results presented in Table 2 shows that the questionnaires were reliable because the Cronbach's Alpha coefficients were .81 and .83 for test 1 and 2 respectively which were within the range 0.8-0.99 as recommended by Rosnow and Rosenthal (1991). To establish the reliability of the interview guide, the responses from the teachers were checked using narrative codes and themes. All the research instruments were found to be reliable.

3.7 Piloting

The research instruments were pre-tested using a sample of 1.5% as per Mugenda and Mugenda (1999) who recommends that 1% to 10% of the actual sample size is adequate. Based on this recommendation, 12 students and two teachers were sampled from one school. The respondents who were used for pretesting were similar to the sample used in the actual study. Piloting was carried out to test the validity and reliability of the instruments. From the pilot study, the researcher was able to detect questions that needed editing and those that were ambiguous. The final questionnaire was then printed and used to collect data after the corrections were done.

3.8 Data Collection Procedure

The researcher randomly selected boys and girls to fill the questionnaires. On students completing the questionnaires within a period of 45 minutes to 1 hour they were collected for processing. In the randomly identified schools, a class teacher for each of the selected classes, the teacher counsellor and life skills education teacher were purposively selected for interview. Finally, in schools where life skills education exists 3 groups of 12 boys, and 12 girls in single gender school and 6 girls and 6 boys in Co-Education schools held focussed group discussion for data collection.

3.9 Data Analysis

Both quantitative and qualitative data analysis methods were used. First, the completed questionnaires were examined for completeness and consistency. Qualitative responses were coded to enable grouping into various thematic categories for analysis. The numerical data were then analysed using Statistical Package for Social Science (SPSS) Version 25.0 Descriptive data were presented in form of percentages, means and standard deviations. Pearson's product moment correlation and Chi square analyses were used to establish any relationships.

4.0 RESULTS

The respondents were asked to state the level of agreement with various statements using a Likert scale ranging from 1-5, where 1=disagree, 2=strongly disagree, 3=Not sure, 4=Agree and 5=strongly agree. Table 3 presents the findings together with the Mean Rating (MR) and Standard Deviation (SD).

Table 3. Responses on Life Skills Education Provided by Teachers

	5 (%)	**4** (%)	**3** (%)	**2** (%)	**1** (%)	**MR**	**SD**
Growth and development of both girls and boys	15.2	13.7	22.2	25.4	23.6	2.71	1.37
Sexual differences in boys and girls?	4.1	14	8.7	20.4	52.8	1.96	1.24
Both girls and boys in a relationship are equal?	1.7	21	9.6	18.1	49.6	2.07	1.26
The risks of involving in sex for both girls and boys	5	21.6	15.7	22.2	35.6	2.38	1.29
Risks of unplanned pregnancy for both young boys and girls	5	14.9	15.5	39.4	25.4	2.34	1.15
HIV & AIDS modes of transmission and protection for both boys and girls	17.2	15.2	14	12.8	40.8	2.55	1.55
to value the opposite sex person for whom they are	1.5	19.5	17.5	29.7	31.8	2.29	1.15
respect for opposite sex views and decisions	0.6	23.6	12	35.3	28.6	2.32	1.14
self-esteem and self-worth	5.8	14.6	12.8	35	31.8	2.27	1.22
abstinence from sex	4.4	12.2	11.4	22.7	49.3	1.99	1.22

When the respondents were asked to rate their level of agreement on whether they had learnt growth and development of both girls and boys in life skills education, 25.4% strongly disagreed and 23.6% disagreed. Those who strongly agreed were represented by 15.2% while those who agreed were 13.7% of the total respondents. Another 22.2% of the respondents were not sure whether they had learnt or not. The mean score stood at 2.71 with a standard deviation of 1.37, implying that the majority of the respondents were not sure whether they have learnt growth and development of both girls and boys. On whether they had learnt sexual differences in boys and girls, majority of the respondents representing 52.8% disagreed and another 20.4% strongly disagreed. Only 4.1% and 14.0% strongly agreed and agreed respectively. Those who were not sure represented 8.7% of the total respondents. On whether the students had learnt that both girls and boys in a relationship are equal, the majority (49.6%) of the respondents disagreed while 22.7% were in agreement. The mean score stood at 2.07 with a standard deviation of 1.26. This implies that the majority of the respondents did not agree with the statement that they had learnt that both boys and girls were equal

in a relationship. When asked whether they had learnt about the risks of involving in sex for both girls and boys in life skills education, 35.6% disagreed, followed by those who strongly disagreed at 22.2%. Those who agreed represented by 21.6% and 5% strongly agreed. Those who were not sure represented 15.7% of the total respondents. The mean was 2.38 with a standard deviation of 1.29.

On the risks of unplanned pregnancy for both young boys and girls, those who strongly agreed were 5.0% while 14.9% agreed. About 15.5% of the respondents were not sure. The majority of the respondents disagreed where 39.4% strongly disagree and 25.4% disagreed. The mean score was 2.34 and the standard deviation was 1.15, implying that majority of the respondents had not learnt about the risks of unplanned pregnancy for both young boys and girls. On the question if they had learnt HIV and AIDS modes of transmission and protection for both boys and girls indicated that a combined majority of 53.6% disagreed while a combined minority of 32.4% agreed. The remaining 14.0% were not sure whether they had learnt or not.

When asked whether they had learnt about valuing the opposite sex person for whom they are, 31.8% disagreed, 29.7% strongly disagreed, 19.5% agreed, 1.5% strongly agreed. Those who were not sure represented 17.5% of the total respondents. The mean score was 2.29 and the standard deviation was 1.15. Again, majority of the respondents disagreed that they had learnt about valuing the opposite sex person for whom they are. On whether they had learnt about respect for opposite-sex views and decisions on life skills education, 35.3% strongly disagreed, 28.6% disagreed, 23.6% agreed, and 0.6% strongly agreed. Those who were not sure were 12% of the total respondents. When asked whether they had learnt about self-esteem and self-worth in life skills education, 35% strongly disagreed, 31.8% disagreed, while 14.6% agreed, and 5.8% strongly agreed. The respondents who were not sure represented 12.8%. The mean score was 2.27 with a standard deviation of 1.22, implying that majority had not learnt about self-esteem and self-worth in life skills education. Finally, when asked whether they had learnt about abstinence from sex, a resounding 49.3% disagreed followed by those who strongly disagreed at 22.7%. Only 4.4% strongly agreed and another 12.2% agreed that they had learnt about abstinence. The respondents who were not sure represented 11.4%. Descriptive statistics for life skills education scores were conducted to obtain the minimum score, maximum score, the range, mean and standard deviation. The findings are presented in Table 4.

Table 4. Descriptive Statistics of Life Skills Education Scores

	N	Min	Max	Range	Mean	SD
Life Skills Education	343	13	34	11	22.92	4.28

The minimum score obtained was 13, while the maximum score was 34. The mean score was 22.92 with a standard deviation of 4.28, indicating that life skills education was moderately done. To further the understanding of the delivery of life skills education and gender, descriptive statistics were obtained and the results shown in Table 5.

Table 5. Descriptive Statistics of Life Skills Education and Gender of the Student

Gender	N	Min	Max	Mean	SD	Sk.	Kur.
Male	159	13	34	22.69	4.55	0.14	-0.68
Female	184	14	34	23.12	4.04	0.15	-0.48

The minimum scores for male and female students were 13 and 14 respectively and the maximum score was 34 for both boys and girls. The mean score for the male students was 22.69 while that of the female students was 23.12. In order to determine whether the gender of the students and life skills education were related, a Chi-Square test was conducted and the results were presented in Table 6.

Table 6. Relationship between Gender of the Student and Life Skills Education

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	19.19[a]	1	.02
Likelihood Ratio	20.04	1	.01
Linear-by-Linear Association	.87	1	.04
N of Valid Cases	343		

From the results, the Pearson Chi-square value was 19.19 and the p-value was 0.02 $\chi^2(1, 342) = 19.19$, $p<.05$. Therefore, gender of the student had an impact on the delivery of life skills education and this was in favour of female students. The researcher sought to establish if there existed any relationship between life skills education and the gender of the life skills teacher. The descriptive statistics were generated and the results are presented in Table 7.

Table 7. Descriptive Statistics of Life Skills Education Scores and Gender of Life Skills Teacher

Gender	N	Min	Max	Mean	SD
Male	189	13	34	22.93	4.19
Female	154	15	33	22.90	4.41

The minimum score obtained for the male teachers was 13 while that of the female life skills teachers was 15. The maximum score for the male teachers was 34 while that of the females was 33.

The above findings prompted the researcher to further determine whether there was a relationship between life skills education and the gender of the teacher delivering the content. A Chi-square test was conducted to confirm this, and the results are presented in Table 8.

Table 8. Relationship between Gender of Life Skills Teacher and Life Skills Education

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	29.39[a]	1	.11
Likelihood Ratio	32.15	1	.06
Linear-by-Linear Association	.04	1	.95

From the results, the Chi-Square value was 29.39 and the p-value was 0.11 which was greater than the *p*-value of .05, indicating no significant relationship between gender of life skills teacher and life skills education, $\chi^2 (1, 342) = 29.39$, p > .05. Analysis was also done to determine whether the school category had an impact on the delivery of life skills education. The results obtained are presented in Table 9.

Table 9. Descriptive Statistics of Life Skills Education Scores and School Category

School Category	N	Min	Max	Mean	SD
Boys Boarding	52	14	30	21.44	4.20
Girls Boarding	74	16	33	22.92	4.18
Girls Day	48	14	32	22.40	4.13
Boys Day	50	13	33	23.42	5.25
Coeducational Day	86	16	34	23.63	3.92
Coeducational Boarding	33	16	34	23.39	3.79

From the above results, the lowest minimum score was posted by the boys' day schools at 13, while the highest minimum score was posted by girls' boarding schools, coeducational day, and Coeducational Boarding each obtaining a score of 16. The lowest maximum score was obtained at Boys Boarding at a score of 30, while both coeducational day and coeducational boarding posted the highest maximum score of 34. A Chi-square test was conducted to determine whether there is a relationship between the school category and life skills education. The results obtained are presented in Table 10.

Table 10. Relationship between School Category and Life Skills Education

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	141.43[a]	5	.01
Likelihood Ratio	152.41	5	.00
Linear-by-Linear Association	7.21	5	.00
N of Valid Cases	343		

The results from Table 10 indicated a chi-square value of 141.43 and p-value of .01 which is less than .05,

To establish the relationship between life skills education delivery and the boys' and girls' sexuality behaviour, a 2-tailed Pearson correlation test was done. The results are presented in Table 11.

Table 11. Pearson Correlation for LSE and Sexuality Behaviour

		Boys' and Girls' Sexuality Behaviour
Life skills	Pearson Correlation	.52[**]
education	Sig. (2-tailed)	.00
delivery	N	343

The results in Table 11 show that there is a strong positive correlation between life skills education delivery and boys and girls sexuality behaviour, r (343) = .52, p =.00.

5.0 DISCUSSION

From the findings it was clear that majority of the students had not been adequately involved in learning various Life Skills Education on sexuality. From the analysis of various topics taught, they tend to strongly disagree that they had learnt some of them in their life skill education. At the same time, majority of the respondents disagreed that they had learnt sexual differences in boys and girls as indicated by the mean score of 1.96. This means that a lot needs to be done on sexual differences between boys and girls. A further majority of the respondents disagreed that they had learnt about the risks of involving in sex for both girls and boys in life skills education. The mean score was 2.55

with a standard deviation of 1.55; indicate that the students had not learnt HIV and AIDS modes of transmission and protection for both boys and girls. The results show that most of the respondents were not well acquainted with the topic. Furthermore, majority of the students indicated that they had not been adequately taught about abstinence.

The findings also show that there was a slight difference in life skills education between boys and girls. The p-value was less than the standard value of 0.05 indicating the existence of a significant relationship between the gender of the student and Life Skills Education. The mean score for the male teachers was 22.93 and 22.90 for the female teachers. The results indicate no major difference in life skills education scores between male and female teachers. Therefore, the gender of LSE teacher does not affect the delivery of life skills education on sexuality. The boys' boarding performed poorly as indicated by its lowest mean score of 21.44, while coeducational day performed highly in the delivery of Life Skills Education, which implies that there is a significant relationship between school category and delivery of life skills education, χ^2 (5, 338) = 141.43, $p <$ .05. Therefore, school category had an influence on life skills education provided. The findings show that there was a significant relationship between the life skills education and boys and girls sexuality behaviour. Hence, LSE delivery highly influenced sexuality behaviour among the students. The findings infer a positive and significant relationship between life skills education delivery and boys' and girls' sexuality behaviour.

Similar studies conducted on this topic reported similar findings. A study by Haruna et al. (2018) investigated ways in which sexual health education among adolescents can be improved. The experimental study used a mixed-method approach with a random sample size of 120 secondary students. The participants were divided into three groups; game-based learning, control group, and gamification. The posttest scores of gamification teaching methodology were significantly higher than those of the control group and game-based learning. These findings are consistent with those of Chiu and Chow (2011) and Longobardi et al. (2016) who found out that teacher support helps in building the relationship with the student. These researchers noted that the teachers who were close to their students and always ready to help them whenever the need arises, motivated the students to repay back to their teachers by following what the teachers expected them to do. Chiu and Chow (2011) arrived at this conclusion while investigating classroom discipline in forty-one countries, while Longobardi et al. (2016) were conducting a study on student versus teacher relationship and how it influences the transition from middle to high school. In Kenya, Wanje et al. (2017) reported contrary results. The researchers conducted 10 interviews with five parents and five teachers and 4 – focused group discussions with two parents and two teachers. They were investigating the views of the parents and teachers on sex education and STIs screening. The researchers established that teachers are willing to support the students in learning sexuality education and have no problem with the subject being discussed in the classrooms.

6.0 IMPLICATION TO RESEARCH AND PRACTICE
It has been demonstrated that adolescence as a period of development poses risks to boys' and girls' sexuality attitudes and behaviour. Studies outlined in the background demonstrate that adolescents in Kenya and the rest of Sub-Saharan Africa are exposed to sexuality health risk. Life skills based education approaches that provide comprehensive sexuality education have been proven to be most effective in enhancing protective sexual behaviour. It was therefore necessary to find out whether life skills education in Nairobi County schools constitutes comprehensive sexuality education, is

gender responsive, addresses power balance in opposite sex relationships and if it is associated with protective sexuality attitudes and behaviours among adolescents. It is hoped that the findings may lead to effective life skills education on sexuality for improved sexuality attitudes and behaviour of both boys and girls in secondary schools in Kenya. This study is of importance to various stakeholders who include; the students, teachers and parents. Notably, the findings are likely to provide useful information to teachers and school managers on the influence of teacher support on knowledge on sexuality education on adolescent's intent to have sexual intercourse.

This information may be used to nurture desirable sexuality behaviours and attitudes. The teachers and school administrators may also get insights on the relationship between sexuality education and sex abstinence behaviours among students. It is hoped that the findings may enhance life skills education and improve the teenagers' sexuality health and behaviour. It is also hoped that the results of this study may enhance the teaching of gender responsive content teaching for both girls and boys in a manner that they take care of equity and equality. It is also anticipated gender responsive life skills education may enhance power balances in relationships between both girls and boys in schools. The Ministry of Education through the results of this study may find need to promote more deliberate and structured life skills education on sexuality for enhancement of protective sexuality attitudes and behaviour. It is also hoped that the Ministry of Education may be triggered by the findings of this study to conduct gender responsive life skills training for teachers to equip them with capacities to train adolescents. Finally, the results of this study contribute to literature on sexuality education among secondary school students which may guide future research in this area.

7.0 CONCLUSIONS
The purpose of this study was to find out the role of teachers in life skills education delivery to influence boys' and girls' sexuality behaviour. The study established that there was a strong positive correlation between life skills education delivery and boys' and girls' sexuality behaviour. Therefore, Life Skills Education delivery to influence sexuality behaviour among secondary students in Nairobi City County.

8.0 FUTURE RESEARCH
Based on the findings of this study, there is need to conduct research on:
  i. Attitudes of Boys and Girls on Life Skills Education.
  ii. Challenges faced by teachers in the implementation of Life Skills Education.

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