

Barriers to Effective Interpersonal Communication between Parents and Their Youth on Hiv Preventon: Study Of North Kamagambo Location, Migori County, Kenya

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Abstract: Communication within the family is important since it enable members to express their needs, share ideas, feeling, thought and many other things a family may need to share. Young people between 12-30 years are increasingly becoming vulnerable to HIV AIDS. This study examined the barriers to effective interpersonal communication (IPC) between parents and their youth on HIV prevention. The specific objective was to identify the barriers to effective interpersonal communication between parent and their youth on HIV prevention and how these barriers affect HIV prevention among youth in North Kamagambo Location Migori County. The study covered a population of 18,775 according to the 2009 National Census Report .The study was supported by literature which stated that, sexual behavior of young people were based on erroneous assumption that youth rarely communicate with their parents on matters of HIV/AIDS and instead they are observational and direct.

Background: Communication is a process of founder mental element in understanding of human behavior and is useful in seeking solution to problem afflicting the society .Interpersonal communication builds good relationship between parents and their children,however successful and effective communication stem from the implementation of the communication process(Buzzannell,2000).The family has a social obligation to provide relevant information to its younger members because this is the most trusted institution by most human beings. Communication within the family is tailored to accommodate all topics that greatly influence human development and this was done with ease and comfort to allow effective articulation by all concerned members.

Method:Stratified sampled was used to sample the entire population into different sub groups or strata i.e. fathers, mothers, sons and daughters respectively whom were randomly selected from different strata between 12-30 youth age and between 30-50 parents age. Therefore, the researcher used simple random sampling techniqueto select a minimum of 240 respondents of whom 80 respondents were for in depth interviews and 160 respondents were for focus group discussion and every unit in a stratum had the same chance of being selected to satisfy the study.

Findings: Focus group discussion and in-depth Interview revealed that,56.25% of respondents perception were neutral in a continuum they were either positive or negative quite unstable in their feelings ,35% of respondents on time barriers could only talk once daily stating that they could not know when, where and how to make IPC effective on HIV prevention. While 50% of respondents agreed that relevant content depends on the family structure (one verses two families, blended families or other relative in the house hold) all are of potential relevance and 43.75% depends on cultural taboos which had a negative effect on IPC.

Conclusion: In relation to the findings of the study the researcher put emphasis on building youth self-esteem by teaching them to resist peer pressure by empowering them emotionally spiritually and mentally. Cultural beliefs and norms should be done away with those which are not helpful in confronting health activities in the community. Lastly reinforced behavior may help the youth to value their positive attitude on their sexual behavior as well as being ready to observe and learn from their parents as role models.

Key Words: Barriers, Interpersonal Communication, HIV AIDS Prevention, Parent, Youth

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I. INTRODUCTION

Open and honest communication creates an atmosphere for all members to express their differences, feelings, love and admiration for one another. A report by Avert, (2009) indicated that, young people need to have relevant information on sexual relationship issues that enable them develop all the talents, powers and faculties of their nature.

Interpersonal communication between parent and their youth helps in giving and collecting information from various sources which influence individual attitude, behavior and personal needs. Human

Immunodeficiency Virus is a human condition of health status which can be prevented through proper channel of communication process between parents and their children.

Globally, it is estimated that the number of 10 to 24 years old Africa is set to rise to more than 750 million by 2060. This means that even if current progress is maintained, new infections among young people are expected to increase. Further to that estimate, it is suggested as many as 740,000 additional youth could become infected between 2016-2030. Therefore it has been found that multiple and intersecting forms of discrimination and structural inequality affects the lives of young people and increase their vulnerability to HIV.

In Kenya AIDS strategic plan (KASF 2014 to 2019 identifies adolescents and young people (AYP) as a priority population for the HIV response. Previously adolescent and the young did not realize benefits commensurate with significant made in the provision of HIV services including prevention, care and treatment despite many pragmatics and African goals as exposed in vision 2063. Africa rising is dependent on harnessing dividends from the population. The objectives of vision 2063 is to reduce new HIV infection among young people by 49%, to reduce AIDS related death among young people by 20% and to reduce stigma and discrimination among youth people by 25%.

Migori is a cosmopolitan County with diverse Socio-Cultural characteristics and dynamics in economic growth. The Constitution of Kenya 2010 heralded the best and most comprehensive Bills of right in Kenya. In particular Article 43(1) (a) guarantees every person the right to the highest attainable standard of health care services in line with devolved governance structures NACC. The developed Kenya AIDS Strategic Framework (KASF) was to guide every county in formulating County HIV response specific plan. In this regard the County health department has developed the Migori County HIV and AIDS Strategic Plan (MCASP) 2015-2019. Therefore; Migori county youth experience stigmatization, and discrimination in health outcome.

Achitka, (2009) stated that, although many parents would want to pretend that their children were not only timid but innocent when it comes to sexuality, it is obvious that these children were both curious and seeking information from other people who instead of guiding them in the right direction, would lure them into early sex and exposure to infectious diseases such as (STIs) and HIV. The role of parents in IPC should influence their children's action;

hence have substantial influence on sexual behavior in three ways; by becoming a role model, by providing direct supervision, teaching the young on how to develop a relationship with a person before having sex with them. For effective communication the study considered the characteristics of IPC which includes its relevant content, timing, proximity and language both the verbal and non-verbal cues.

In general youth are at risk of contracting HIV virus through sexual activities. Majority were engaged in sexual behaviour with multiple partners over a period of time and fail to consistently use a condom during every act of such behaviour.

The family has a social obligation to provide relevant information to its younger members because this is the most trusted institution by most human beings. Communication strategy of the family was tailored to accommodate all topics that greatly influence human development and this was done with ease and comfort to allow effective articulation by all concerned members. The impact of parental message on their children sexual risk taking may vary as a function of characteristics of parents, characteristics of the message that they convey, characteristics of the channel through which the message is delivered, characteristics of their children and characteristics of the context.

Statement of the problem

Since HIV was first identified in the early 1980s an unprecedented number of youth had been affected by the Virus. Many parents depending on personal values, cultural norms and the societal setting, parents assumed that the discussion is not appropriate for their youth. Nonetheless, youth aged between 12-30 years are increasingly becoming exposure of the Virus.

Therefore interpersonal communication is used as one of the prevention of the Virus however several barriers on IPC were facing parents and their youth on HIV prevention in North Kamagambo Location. Little was known on the barriers to effective IPC on HIV/AIDS prevention in terms of cultural barriers, perception barriers, attitude barriers, time barriers, language barriers and place barriers. Enhancement of IPC between parent youth on HIV prevention can contribute to changed perceptions, attitudes and behaviors hence can further mitigate infection on HIV among the youth.

Objectives of the study

The general objective of the study was to assess the barriers to effective IPC between parents and their youth on HIV prevention in North Kamagambo Location, Migori County with specific objectives of describing the types of barriers to effective IPC between parent and their youth and to identify how these barriers affects HIV prevention among youth..

II. RESEARCH METHODOLOGY

Study design: This study used mixed research method in which the researcher combined elements of qualitative and quantitative approaches. Qualitative approach was used to interpret social interaction and more emphasis was on words, coding and themes while quantitative approach was used to analyze more frequency of occurrence of IPC barriers thematic elements of text and emphasis on numbers of frequency of occurrence.

Study Location: The geographical scope of the study was from the three sub- Locations Kameji, Koluoch and Kamwango of North Kamagambo Location with a total population of 18,755 according (NCR, 2009). The study area is a place of confluence for a widely varied clientele due to its economic activities, education level social activities and its geographical feature

Sample size: A sample is part of accessible target population that had been procedurally selected to present it (Oso& Onen,2009).The sample consist of two hundred and forty (240) participants selected from three sub Locations in North Kamagambo Location with a total population of 18,775 .Stratified sampling was used to sample the entire population into different sub groups or strata i.e. fathers, mothers, sons and daughters respectively who were randomly selected from different strata between 12-30 children age and between 25 -50 parents age.

Sample population: The Focus group discussion (FGD) was the main qualitative data collection technique adopted in this study with 160 participants while in-depth interview was conducted with 80 participants who included both parents and their youth in the selected sample. Focus group discussion provided opportunity for the participants (parents, children and the facilitator) to talk to one another face to face. In focus group discussion respondents were informed three days prior before the stipulated time. Out of 160 respondents the researcher segmented into groups of fathers, mothers, sons and daughters respectively and this help them to gather information about various aspects of the subject. Each panel took an estimated time of two hours. The researcher believed that two hours was adequate for each participant to get a chance to explain perspectives, knowledge or opinion on this research area. While in-depth interview was used to obtain data through direct verbal interaction. The facilitator was there to guide the discussion which captured real life data in a social setting in the specific area of study. The interview setting was as natural as possible to accommodate all the interviewees and was conducted in agreed place at the participants' convenience to aid information flow.

III. FINDINGS AND DISCUSSIONS

Barriers to Effective Interpersonal Communication between Parents and their youth on HIV prevention.

This is the second objective of the study which sought to establish barriers to effective interpersonal communication on HIV prevention. The section discussed several barriers in different aspects of the objective. The variables to be measured were: Cultural barriers, perception barriers, attitude barriers, time barriers, place barriers and relevant content in communication between parents and their youth.

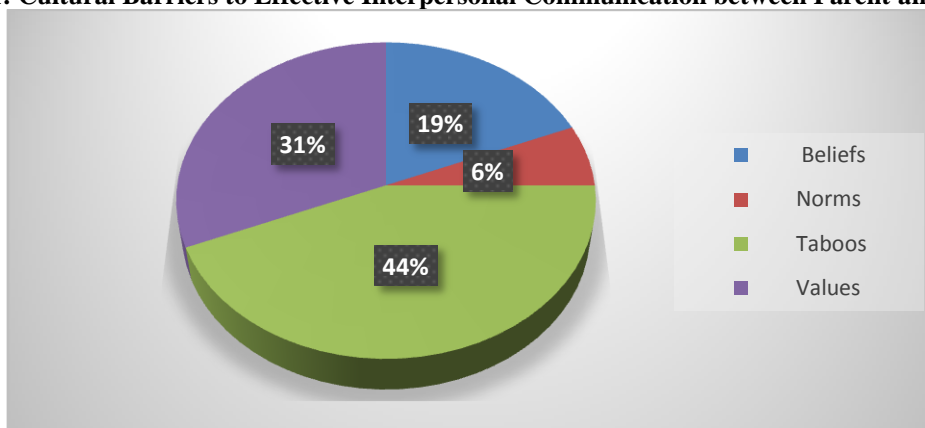
Cultural Barriers to Effective Interpersonal Communication between Parents and their Youth

Qualitative approach was used in locating the frequency of occurrence of certain contextual elements that define cultural barriers between parent-youth on HIV prevention. Communication within the context helps identify interpersonal communication barriers between parent and their youth. However, this will help break communication barriers on HIV prevention.

The frequency of occurrence of these textual elements was critically examined as emerging themes from respondents respectively. Quantitative method was used to say more about the frequency of occurrence of thematic elements of texts and meaning arising out of the context as used in a qualitative study. These textual elements and their frequencies were counted to derive meanings as shown in the figure below:

The study sought to establish how culture is a barrier that affects IPC between parent-youth on HIV prevention. There were several determinants of cultural barriers that affect IPC which includes belief, norms, taboos and values. These may not facilitate IPC process. Findings are shown in figure 1

Figure no 1: Cultural Barriers to Effective Interpersonal Communication between Parent and their youth



Source: Field Data (2020)

As per the analysis of data presented in figure1 44% of respondents argued that cultural background of taboos had greatest influence on their IPC between parent-youth on HIV prevention. It was found that, culture influence one character and personality, therefore it changes the way one think, behaves and communicates. On the other hand 25% of respondents felt that either norms or belief limits IPC between parents and their children on HIV prevention while 16% of respondents stated that, cultural norms affect IPC between parent-youth on HIV prevention. 25% of respondents were either norms or belief that limits interpersonal communication between parents and their youth on HIV prevention.

Respondent (s) remarked, " longtime ago these teachings were being conducted by family elders of the same gender for example grandmother (daughter), grandfather (son) they were the right people to teach the new generation on how children can refrain from infections like HIV AIDS. (F10 Fgd, 2020)".

Another respondent also stated that, today's children right and privileges made parents to fail in giving direction to their children when still young. (M4 Fgd, 2020).

Perception Barriers to Effective Interpersonal Communication between Parents and their Youth

The study sought to find out the suitability of frequency and confidence in use of dialogue on HIV prevention. Participants were asked to state their perception on suitability of IPC whether neutral, positive or negative on HIV prevention among youth in North Kamagambo Location. Every respondent was asked how often they perceived IPC with their youth on HIV prevention. It was indicated that majority lack trust with one another, when communicating knowledge on health issues pertaining to infection. Findings are shown in table 2

Table no 2: Perception Barriers to Effective Interpersonal Communication between Parents and their Children

Perception Barriers	Frequency	Percentages
Positive	30	18.75%
Negative	40	25%
Neutral	90	56.25%
Total	160	100%

Source: Field data (2020)

Focus group discussion findings in figure 2 depicts that 25% of respondents had negative perception on HIV prevention through IPC between parents and their children, while 56.25% of respondents were neutral in the continuum, they were either positive or negative quite unstable in their feelings. 18.75% of respondents were very stable since they were always having open and direct dialogue with their children on HIV prevention. Therefore, perception is an international barrier that occurs within a person's mind.

As one of the respondent stated, "It is difficult to discuss with my children about HIV prevention since it looks so shameful to me, they also feel shame too. For a girl it looks quite embarrassing and my son will also feel the same (F72, Fgd 2018) ".

Another respondent stated: "since I am a HIV positive carrier, I often discuss with my children about HIV prevention and how one can be affected. My main aim was to let them acknowledge the significance of my words, my health status and compare with theirs" (M94 Fgd 2020).

The study found out that most parents were not discussing with their children matters on sexual behaviour until they discovered that, they had already made difficult sexually related decision. Therefore,

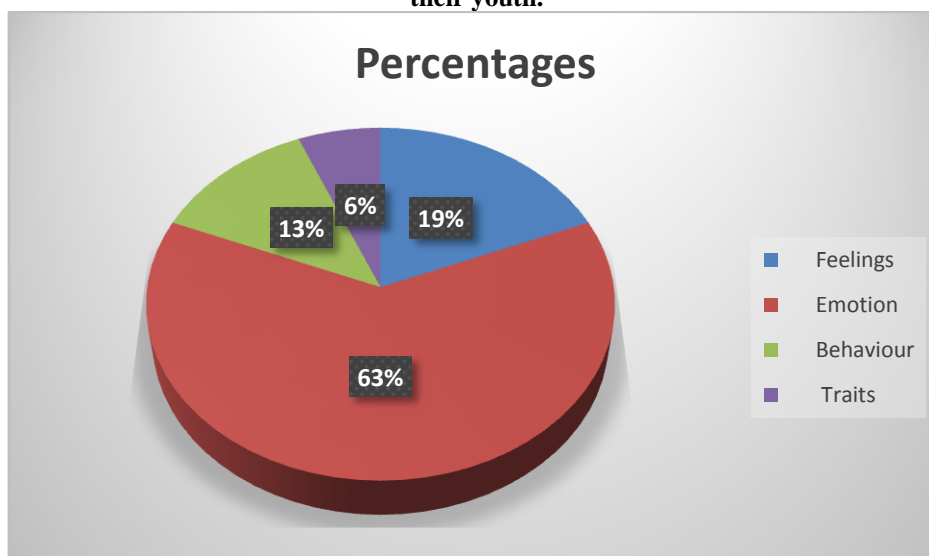
information that children get from their parents are observational and indirect. quite often they do not get comprehensive information from parental conversations about sex.

In line with findings from (Burgers et al,2005) indicated that the underestimation of the sexual behaviours of youth were based on erroneous assumptions made by the mothers and also positive parental perceptions of the parent –youth relationship increased the underestimation of parents youth sexual behaviour.

Attitude Barriers to Effective Interpersonal Communication between Parents and their youth.

The study sought to establish, the mental state which involved emotion, feelings, behaviour, traits and disposition to act incertain ways used in IPC between parent and their youth on HIV prevention. Findings are shown in figure 3.

Figure no 3: Attitude Barriers to Effective Interpersonal communication Barriers between parents and their youth.



Source: Field Data (2020)

Interview findings in figure 3 demonstrates that, 62% of respondents agreed that, emotion was a mental state that varies as per the attribution and beliefs of individuals hence may create IPC barriers between parent youth on HIV prevention. 19% of respondents attribution verified their subjective norms with optimum dependency upon HIV prevention among parents and their youth while 6% of respondents were from traits barriers. One of the interviewed respondent(s) stated, " am not willing /attempting to talk with my children about HIV Prevention, since they know information on protection for such infection" (F55 interviewed, 2020).

Another one stated how sometimes it was difficult to discuss about HIV infection because this is a life style behavior which may affect the entire family members. (S34 interviewed 2020).

The interview also revealed lack of rapport in relationship with parents and some respondents could hardly discuss issues related to health matters concerning HIV Prevention. Parents failed to be role model in their behavior at family level (D4 interviewed, 2020)

According to Wang, (2002). Parents seem or afraid to confront their children about what relationship and sexuality is, mothers do not want to admit that their daughters are growing up, they feel threatened by a sexually developing teenagers and thus find it difficult to discuss issues with their daughters.

Time Barriers to Effective Interpersonal communication between parents and their youth on HIV prevention.

The study sought to establish how much time a parent spend with his or her child to enable them run the day to day IPC on HIV prevention. The findings are as shown in table 4.

Table no 4: Time Barriers to Effective Interpersonal communication between parents and their youth on HIV prevention.

Time Barriers	Frequency	Percentages
More than twice monthly	0	0%
Once monthly	15	35%
Twice monthly	20	12.5%

Weekly	50	31.25%
Monthly	75	46.75%
Total	160	100%

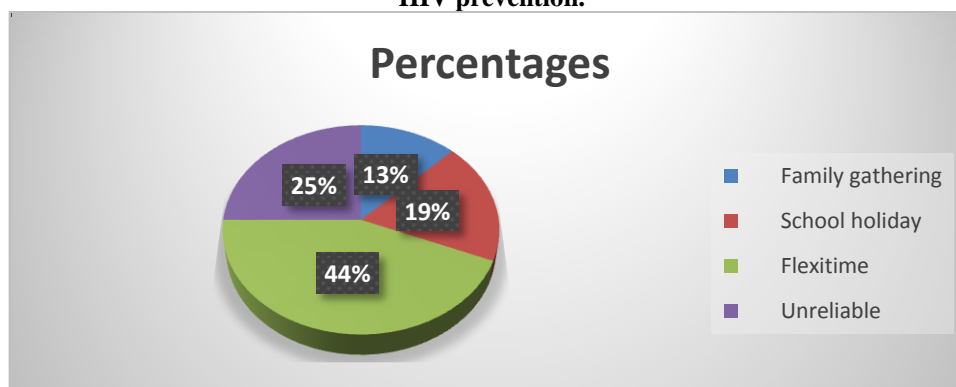
Source: Field data (2020)

The study sought to establish how much time a parent spend with his or her child to enable them run the day to day IPC on HIV prevention. The findings are as shown in table 4. Focus group discussion findings in table 4, indicates that 12.5% of respondents observed that, time factor was a barrier for IPC between parents and their youth on HIV prevention in North Kamagambo Location in which 35% of respondents pointed out that they could only talk once daily hence did not know when, where, and how to make effective IPC on HIV prevention. Meanwhile 46.75% of respondent could manage IPC on HIV prevention with their youth on a monthly basis. Therefore, it was an indication of lack of monthly interaction between parents and their youth on HIV prevention

Place Barriers to Effective Interpersonal communication between parents and their youth on HIV prevention.

The study sought to establish the effect of place as a barrier in IPC between parents and their children on HIV prevention. The findings are as shown in figure 5.

Figure no 5: Place Barriers to Effective Interpersonal communication between parents and their youth on HIV prevention.



Source: Field data (2020)

Focus group discussion findings stated that, 44% of respondents preferred flexitime which still need much improvement for effective IPC between parents and their youth while 25% of respondents were unreliable for any interaction between parents and their youth on HIV prevention. This shows that there was still lack of IPC between parents and their youth on HIV prevention. In other ward it was an indication of an individual behavior and personal feeling toward HIV prevention .19% of the respondents use school holidays as their best time for discussing HIV prevention, meanwhile 12% of respondents perceived place as a barrier in terms of family gathering. Therefore, the influence parents had on their children depends on them as a role model, how receptive they are, non-authoritative and their gender position and responsibilities in the family. Especially when father and mother tend to operate on an injustice model while son and daughter operate on a detrimental approach this may hindered them from efficient interpersonal communication within the family setting, as indicated in the following response.

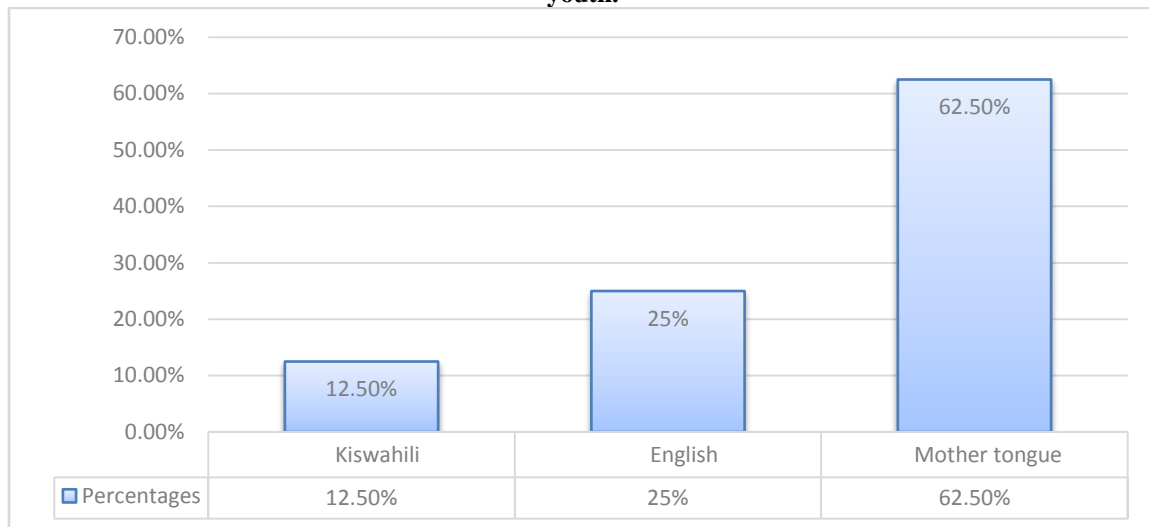
Another respondent stated, “I often do talk with my father, because he usually provokes me in a conversation process and I found it difficult to sit closer to someone who is a dictator and authoritative parent” (S 68 Fgd, 2020).

It is critical to observe that, mother, daughter conversations occurs just before puberty, where discussion of menstruation, reproduction and sexual behaviour was done. The second stage occurs during middle youth and was often initiated by the daughter and the subject includes birth control, rape, abortion and teenage pregnancy. The last stage is where social issues such as adultery illegitimacy are included. This stage reached adulthood and includes all members of the family (Chimbetwe, 2001). However, the same study revealed that in East Africa, Kenya, discussions between parents and youth were more focused on societal expectations and career than on sexuality issues and HIV prevention (Mtikrakra, 2009).

Language Barriers to Effective Interpersonal communication between parents and their youth.

The study sought to establish how participants felt about the language used in IPC process between parents and their youth on HIV prevention as follows mother tongue, Kiswahili and English. The findings are shown in table 6.

Table no 6: Language Barriers to Effective Interpersonal communication between parents and their youth.



Source: Field Data (2020)

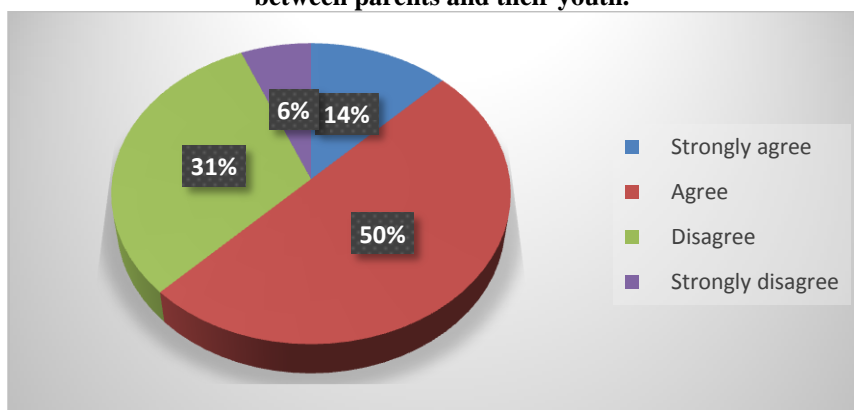
Interviewed findings in table 6 stated 62.5% of respondents were using Vernacular language as majority of parents in the study area preferred using mother tongue as was easier for them, while 37.5% of respondents interviewed were using either English or Kiswahili which was not favored by many individuals. It was indicating that 62.5% of parents and their youth understand each other to a greater extent when using mother tongue language. Respondent(s) stated, it was easy to use mother tongue than a complex language which may not create a barrier between us with our children when discussing HIV prevention (F 26 interviewed, 2020).

It was indicating that, majority of parents and their youth understand each other to a greater extent when using mother tongue language. Therefore majority of parents and their youth understand each other to a greater extent when using mother tongue language.

Relevant Content Barriers Relevant Content to Effective interpersonal Communication between parents and their youth.

The study sought to establish respondent’s opinion on the effect of message content in characterization of the general family environment. There is potential relevance on content of IPC between father, mother and their children on health behaviours. The findings are in figure 7.

Figure no 7: Relevant Content Barriers Relevant Content to Effective Interpersonal Communication between parents and their youth.



Source: Field Data (2020)

Focus group discussion findings, 50% of respondents agreed that relevant content depends on the family structure (one versus two families, blended families, presence of grand parents or other relatives in the house hold, all are of potential relevance. 37% of respondents disagree or strongly disagree stating that children viewed their intra family communication with a greater negativism in the general family environment, but eventually all are of potential relevance. Youth responses indicated that there was positive interaction with their mothers than with their fathers in terms of greater degree of openness in parent child relationship. Youth responses indicated that there is positive interaction with their mothers than with their fathers in terms of greater degree of openness in parent child relationship. Consequently, youth responding to their intra family interpersonal communication with feelings of greater negativism.

One discussant said, it was not easy for me discussing health issues with my father simply because we always differ in our responses, hence make it difficult to have interpersonal communication on HIV prevention at family level with even other siblings (S 19 Fgd, 2020),

Some of the discussants highlighted, "we found that the female sex (girls) were eager for information on health behaviour unlike the sons who deeply get discouraged" (M 31 Fdg, 2020). The question of which parent to get advice from is also one that determined interaction about HIV. One respondents argued that, "I usually get advice from my mother, and I apply that to other siblings. She taught me the kind of relationships I may share with my peers (D130 Fgd, 2020) "

There were times that youth felt that their parents did not treat them as equally and that their parents seemed to fail in having adequate knowledge about current lifestyles and pressure (Pistella & Bonati, 1999). In line with Kinsman (2001) parents need to communicate in a manner that is going to be effective in bringing about positive behavioural changes amongst their children.

IV. DISCUSSION

Based on the analysis of assessment of barriers to effective IPC barriers on HIV prevention the problem stated that, there was lack of IPC (face to face) between parents and their children for discussing HIV prevention. Parents fear discussing sex behavior with their youth hence made them vulnerable to or no access to health related programs on HIV prevention. The perception and attitudes of parents and their children stated that, there was lack of rapport and emotional bonding between parent's children to enhanced health concerned behaviors /activities. It was revealed that youth tend to operate on a detrimental approach and this may hindered them from effective IPC on HIV prevention.

Therefore the study sought to establish barriers to effective IPC between parents and their children in North Kamagambo Location. The objectives stated were, types of barriers to effective IPC between parent and their children on HIV prevention and to identify how these barriers affect HIV prevention among youth in North Kamagambo Location.

It was established that, culture can influence one character, personality and changes the way they think behave and communicate. Communication can also be used to inform, educate, and persuade behavior change on HIV prevention hence it can solved a problem and justify development of appropriate intervention.

The study concludes the types of barriers to effective IPC between parent and their youth on HIV prevention was based on the following findings. 44% of respondents depend on cultural background of taboos which had greater effects on their IPC between parent-youth on HIV prevention. It was found that, culture influence one character and personality, therefore it changes the way one think, behave and communicates. 25% of respondents was either norms or belief that limit IPC between parents and their youth on HIV prevention. 25% of respondents had negative perception on HIV prevention through IPC between parents and their youth, while 56.25% of respondents were neutral in a continuum, they were either positive or negative quite unstable in their feelings. It was quite unconditional to enhanced IPC on HIV prevention within the family level.

19% of respondents' attribution verified their subjective norms with optimum dependency upon HIV prevention among parents and their youth in North Kamagambo Location. While 6% of respondents were from traits. 35% of respondents could only talk once daily hence did not know when, where, and how to make effective IPC on HIV prevention. Meanwhile 46.75% of respondent(s) could manage IPC with their youth on monthly basis. Therefore, it was an indication of lack of monthly interaction between parents and their children on HIV prevention. 12% of respondents perceived place as a barrier in terms of family gathering. The influence parents had on their children depends on them as a role model, how receptive they are, non-authoritative and their gender position and responsibilities in the family. 37% of respondents disagree or strongly disagree stating that youth viewed their intra family communication with a greater negativism in the general family environment, but eventually all are of potential relevance. Youth responses indicated that there was positive interaction with their mothers than with their fathers in terms of greater degree of openness in parent child relationship.

V. CONCLUSION:

In relation to the findings of this study, the researcher recommends training and education for both parents and their youth about the importance of effective IPC and sexual behavior /health. This need to be provided by organizing seminars, workshops and conferences for parents and their children respectively. Another emphasis is on building children self-esteem especially teaching them life skills that will help them deal with peer pressure ,hence can done by empowering them emotionally spiritually and mentally to help them in confronting health activities in the community.

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