

The Birds and the Bees: A Phenomenological Inquiry on Parental Sex Education

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Article info:

<http://doi.org/10.70848/cnj.v2i3.63>
pISSN 3063-9247
eISSN 3063-9255

Article History:

Received: July 31st, 2025
Revised: November 2nd, 2025
Accepted: November 6th, 2025

Abstract

Introduction: The increasing incidence of adolescent pregnancies underscores the critical need for parental involvement in providing sex education. **Objective:** This study explored the lived experiences, challenges, and insights of parents in educating their adolescent children about sex-related topics. **Methods:** A descriptive phenomenological approach was employed, with ten purposively selected parents from Kabacan, North Cotabato serving as key informants. Participants met the following criteria; having adolescent children, experience in providing sex education, and residency in the area. Data were gathered through in-depth interviews and analyzed using Colaizzi's seven-step method. **Results:** Thematic analysis revealed three major emergent themes: Parents' Rendezvous in Sex Parenting, Overcoming Obstacles in Sex Parenting, and Sex Parenting Enlightenment. These encompassed subthemes such as serious conversations, feelings of discomfort, proper timing and discourse, learning from experience, and the need for professional guidance. Parents expressed both confidence and uncertainty in navigating conversations about sex, emphasizing the value of persistence, warmth, and support from healthcare professionals, particularly nurses. **Conclusion:** The findings affirm that parental sex education fosters communication, trust, and informed decision-making, which are essential in preventing premarital sex, early pregnancy, and early marriage. This study advocates strengthened collaboration between parents and healthcare professionals to enhance the sexual health literacy of adolescents and promote responsible behaviors

Keywords:

Parental Sex Education, Adolescent Sexual Health, Health Literacy, Phenomenology, Philippines



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INTRODUCTION

Teenage pregnancy remains a critical public health and societal concern, particularly in developing regions. According to the World Health Organization (2025), over 21 million adolescent girls become pregnant annually in low- and middle-income countries, with nearly half of these pregnancies unintended. Alarmingly, approximately 777,000 births occur among girls under the age of 15 (Chamdimba et al., 2023). These early pregnancies are often associated with severe health risks, and infants born to adolescent mothers are more likely to be premature or underweight, while the high rate of unintended pregnancies frequently results in unsafe abortions, further endangering young girls' well-being (Lesinskienė et al., 2025). The consequences extend beyond health, contributing to school dropout, limited job opportunities, and increased vulnerability to violence and discrimination (Otegbayo et al., 2023).

In the Philippines, a predominantly Catholic nation, teenage pregnancy is a growing national concern. The National Economic and Development Authority (NEDA) declared it a "national and social emergency" in 2019. A 2020 survey by the Commission on Population and Development reinforced its urgency, naming adolescent pregnancy the top concern across all regions and socioeconomic groups. By 2022, 3,135 girls under 15 had given birth, a 35.13% increase from the previous year. That same year, births among mothers aged 19 and below rose by 10.15%, reversing a previous downward trend and totaling 150,138 live births (Cordero, 2024).

In response, the government enacted the Responsible Parenthood and Reproductive Health Act of 2012, which mandates age-appropriate sexuality education in schools and improved access to reproductive health services (Philippine Commission on Women, 2012). However, gaps in knowledge persist. Many adolescents still lack accurate information about puberty, reproduction, and contraception. Although most adolescents support sex education, parents are often seen as the least preferred source of information, only 37.3% of adolescents considered them reliable (Kumar et al., 2017). This reveals a disconnect between adolescents' educational needs and the vital role parents could play in guiding their sexual development.

Parental involvement, while essential, is often limited by discomfort, lack of training, and cultural constraints. Many parents feel unprepared to discuss sex education, having received little guidance themselves. This perpetuates a cycle of silence and misinformation, particularly in culturally conservative regions like Mindanao, where discussions on sexuality are often taboo (Gerber et al., 2023; Noorman et al., 2022; Pell, 2023; Yamat et al., 2023).

Yet, research increasingly supports the value of parental involvement in sexuality education. Evidence shows that comprehensive sex education, especially when reinforced at home, can significantly reduce

teenage pregnancy without encouraging early sexual activity (Albert Sekhar et al., 2024; Mark & Wu, 2022). As Ballesteros (2020) notes, informed and communicative parents can counter misinformation from peers and online sources. Nevertheless, most sex education efforts remain school-centered, with parents often sidelined in the process.

This study addresses a critical gap in literature. While extensive research exists on comprehensive sex education and its implementation barriers, little is known about the actual lived experiences of parents who engage in sex education at home. Most studies either generalize parental attitudes or focus on adolescents' perspectives, overlooking the nuanced reflections, challenges, and insights of parents, especially in low-resource, culturally complex settings like Mindanao. There is a pressing need to understand the personal narratives of Filipino parents who have taken on this role to inform culturally sensitive and family-centered interventions.

Guided by Nola Pender's Health Promotion Model (Murdaugh et al., 2019), this study conceptualizes parental sex education as a health-promoting behavior. The model posits that health behaviors are shaped by interpersonal influences and role modeling. When parents engage in open, positive communication about sexuality, they help establish norms that discourage risky behavior and support healthy sexual development. Pender emphasizes that such behaviors are more likely to be sustained when reinforced by supportive relationships, positioning the parent-child bond as a crucial influence on adolescent well-being.

Therefore, this phenomenological study seeks to explore and understand the lived experiences of Filipino parents who have provided sex education to their adolescent children. Specifically, it aims to know the experiences of parents in giving sex education to their adolescent children, what those experiences mean to them, and the insights these parents can offer to other families and the nursing profession. Through this inquiry, the study hopes to illuminate meaningful perspectives that can inform nursing education, public health strategies, and more inclusive, culturally grounded approaches to adolescent sexual health.

METHODS

1. Design

This study employed a qualitative descriptive phenomenological design to explore the lived experiences of parents providing sex education to their adolescent children. This approach was specifically chosen because its central aim is to provide a rich, detailed description of the essence of a shared human experience.

Unlike grounded theory, which aims to generate a new theory, or an ethnographic study, which focuses on cultural norms, the phenomenological approach was best suited here to deeply investigate the subjective meaning and

practical insights of the parents. Grounded in Husserlian philosophy, the design deliberately emphasizes describing participants' perceptions without external interpretation or theoretical bias (Ayton, 2023), ensuring the findings are rooted directly in the participants' voices.

Consequently, individual, in-depth semi-structured interviews were conducted to gather the rich, first-person narratives essential to this design. This choice allows for sensitive probing of complex topics like discomfort or uncertainty, enhancing the trustworthiness of the data. While this design is well-suited to uncover the essence of parental sex education within the cultural context of Kabacan, North Cotabato, the findings are context-bound, requiring cautious consideration for transferability to different populations.

2. Sample Size and Sampling Technique

The study involved parents from Kabacan, North Cotabato, who had adolescent children and personal experience providing sex education. Using purposive sampling, ten informants were selected for their ability to offer rich, relevant insights into the phenomenon. This sample size aligns with the recommended range of 5 to 25 participants for phenomenological research (Ahmed, 2025).

Participants were recruited through home visits, during which the study's purpose was explained and informed consent obtained. Inclusion criteria required participants to: (1) reside in Kabacan, (2) have adolescent children, (3) have experience discussing sex education with them, and (4) be literate in Filipino or English. There was no exclusion criteria related to age, race, religion, or ethnicity.

The research was conducted in Kabacan, a first-class municipality in Cotabato, Philippines, with a population of 93,822 as of the 2022 census (Cities and Municipalities Competitive Index, 2022). Data collection occurred over a nine-month period, from September 2021 to May 2022.

3. Instruments

A semi-structured interview guide with three open-ended questions and corresponding probes was used to explore parents' lived experiences in providing sex education. The questions addressed the context and challenges of sex parenting, the personal meanings attached to these experiences, and insights for other parents and the nursing profession. To ensure credibility and cultural sensitivity, three research experts validated the guide, leading to minor revisions for clarity. Its flexible structure encouraged open dialogue while maintaining consistency across interviews, facilitating the collection of rich, descriptive data.

4. Data Collection Process

Data collection was conducted from September 2021 to May 2022 in Kabacan, North Cotabato. Prior to the study, approval was obtained from the Master of Arts in Nursing Program Chair and the technical

panel of Davao Doctors College, Inc. A semi-structured interview guide, validated by three research experts, was used to elicit rich, in-depth narratives.

Researchers personally oriented each participant on the study's purpose, procedures, duration, and their rights. Informed consent was obtained, and participants were assured of their right to decline participation, skip questions, or withdraw at any time without penalty. Confidentiality and privacy were strictly maintained. Interviews were conducted in locations chosen by participants to ensure comfort and privacy. With consent, all sessions were audio-recorded, transcribed, and translated verbatim by the researchers, who also acted as facilitators and observers, using probing techniques to deepen responses. Each interview lasted between 30 minutes to an hour.

5. Data Analysis

This study utilized Colaizzi's phenomenological method to explore parents' lived experiences in providing sex education to their adolescent children (Morrow et al., 2015). This approach involved extracting significant statements from transcripts, formulating meanings, organizing them into thematic clusters, and synthesizing an exhaustive description of the phenomenon.

Interviews were audio-recorded, transcribed verbatim, and translated into English when necessary. Researchers immersed themselves in the data through repeated readings, ensuring a deep understanding of each participant's perspective. Significant statements were identified and analyzed to formulate meanings faithful to the participants' voices. These meanings were then grouped into themes and sub-themes. To enhance validity, member checking was conducted, allowing participants to verify the accuracy of interpretations. A qualitative research expert also reviewed the transcripts to refine the thematic structure.

To ensure the trustworthiness of the study, the researchers followed Lincoln and Guba's criteria, as cited in Nowell et al. (2017). Credibility was established by using validated interview questions, selecting participants through purposive sampling based on clear inclusion criteria, and conducting member checking to confirm that the themes accurately reflected participants' lived experiences. Transferability was addressed by providing rich, contextual descriptions of the study setting in Kabacan, North Cotabato, and offering detailed insights into the participants' backgrounds, allowing readers to assess the relevance of the findings to other contexts. Dependability was ensured through a transparent and consistent research process, which included maintaining an audit trail and having the interview guide reviewed by three qualitative research experts. Finally, confirmability was demonstrated by grounding all interpretations in participants' own words, bracketing researcher biases, and maintaining

reflexive journals throughout the study to ensure neutrality and data-driven conclusions.

6. Research Ethics

A descriptive phenomenological approach was purposefully chosen to provide a deep, essential understanding of parents' lived experiences, justifying the use of rich, in-depth interviews over other methods. Though findings are context-bound, this choice enhances their trustworthiness. Ethical approval was secured from the Davao Doctors College, Inc. Master of Arts in Nursing technical panel. The interview guide, validated by three qualitative experts for cultural sensitivity, ensured participant rights were protected and institutional standards were strictly observed.

Participation was voluntary, with informed consent obtained prior to each interview. Participants were fully informed of the study's purpose and assured of their right to refuse, skip questions, or withdraw at any time without consequence. Researchers fostered a respectful and safe environment, remaining attentive to any emotional discomfort given the topic's sensitivity. Privacy and confidentiality were maintained through secure data handling, coding of personal identifiers, and adherence to the Data Privacy Act of 2012 (RA

10173). All interviews were conducted with consent and stored securely, with data retention limited to five years. The researchers upheld professional boundaries and institutional ethical guidelines, ensuring that participants' experiences were treated with respect, sensitivity, and honesty throughout the study.

RESULTS

Profile of the Informants

As seen in Table 1, a total of ten key informants participated in the in-depth interviews for this study. The informants were parents aged between 38 and 63 years, with the majority in their 40s. In terms of gender, the group was predominantly female, comprising 90% of the informants, while only one participant (10%) was male. Most of the informants were self-employed or engaged in farming, reflecting the rural and agricultural nature of the study setting. Regarding family size, the informants reported having between two and six children, providing a diverse range of parenting experiences relevant to the study's focus on parental sex education.

Table 1. Key Informants' Profile (n=10)

Code Name	Age in Years	Gender	Number of Children
Informant 1	53	Female	6
Informant 2	42	Female	3
Informant 3	63	Female	3
Informant 4	40	Female	4
Informant 5	38	Female	2
Informant 6	43	Male	2
Informant 7	42	Female	3
Informant 8	45	Female	2
Informant 9	47	Female	4
Informant 10	52	Female	3

Theme 1. Parents Rendezvous in Sex Parenting

Parents' Rendezvous in Sex Parenting

captures the crucial moments when parents are drawn into conversations about sex, often prompted by their adolescent children's curiosity. These encounters are rarely planned; they emerge from spontaneous questions, observed behaviors, or external influences like peers and media. Parents find themselves unexpectedly stepping into the role of educator, aware that their voice, though hesitant, is needed.

The theme reflects a delicate interplay between openness and discomfort. Many parents described initial sincerity and seriousness in responding to their child's questions, even as they struggled internally with uncertainty, embarrassment, or fear of saying the wrong thing. Openness was present, but tentative, shaped by cultural norms, personal discomfort, and unfamiliarity with the right language.

Articulating sexual concepts was often difficult. Parents grappled with expressing themselves in ways that were both clear and culturally appropriate. Some avoided the topic altogether, citing feelings of inadequacy or concerns about propriety. Yet beneath these challenges was a shared conviction: that their involvement was vital in guiding their children toward responsible decisions.

Ultimately, this theme reflects a meaningful, though often imperfect, expression of parental care. Even amid awkwardness, parents embraced these conversations as opportunities to affirm values, build trust, and influence their children's understanding of sexuality in a way no one else could.

Theme Cluster 1.1. Serious Conversations

Serious Conversations captures parents' intentional and sincere efforts to discuss sex education with their children, often prompted by developmental cues or signs of curiosity. These

moments marked a significant turning point for many informants, as they engaged in topics traditionally viewed as sensitive or taboo. Parents emphasized the importance of addressing these topics with seriousness and clarity, regardless of the child's age. One shared, "My child was 10 years old that time. We talked successfully and seriously" (Informant 4), reflecting early, purposeful engagement. Another noted, "Even if our child is young, we need to teach them and be serious" (Informant 6), underscoring that parental readiness often outweighs chronological age.

For some, seriousness took the form of authoritative or moral instruction. "Every time I advise them, it's serious and sometimes in an angry style," said one parent (Informant 8), while another described it as "like a sermon" (Informant 10). These responses reflect a culturally influenced approach where moral guidance and discipline are embedded in parental communication.

Still, the topic's sensitivity sometimes led to awkwardness. "I was serious when I talked to them about sex education, but they laughed" (Informant 9), one parent recalled, illustrating the generational and cultural discomfort that often accompanies such discussions.

Overall, these conversations, while not always easy, served as pivotal entry points into broader discussions on values, responsibility, and reproductive health. This theme highlights how Filipino parents, driven by concern and moral duty, initiate deeply personal dialogues that lay the groundwork for their children's understanding of sexuality.

Theme Cluster 1.2. Openness to the Topic

Openness to Topic reflects parents' willingness to engage in honest, proactive conversations about sex education, a shift from traditional silence to meaningful dialogue that signals a cultural and generational transition in parenting. Many informants noted that their children's receptiveness encouraged them to be more open. "My child was 13 years old that time. He listened to me" (Informant 2), one parent shared, while another said, "Our talking was okay because my child listened to me" (Informant 3). These responses highlight how a child's attentiveness fosters a safe environment for discussing values, guidance, and information.

In some cases, openness was prompted by the child's own curiosity or situational cues. "We talked about sex education when I saw them talking about relationships" (Informant 7), one parent recalled. Another said, "My children asked me why I married my husband... I told them we had sexual intercourse because we wanted children" (Informant 1). These moments show how openness can coexist with parental hesitation, as they balance honesty with personal discomfort. Informants emphasized that such conversations strengthened their relationship with their children. "Our relationship was not negatively affected... the effect is positive" (Informant

3), and "They listened to me every time I talked to them" (Informant 7). Open dialogue fostered emotional closeness and mutual trust.

Several parents also recognized the value of responding directly and promptly to questions. "When they ask, I respond immediately... our talking has benefits" (Informant 4), said one. Another added, "They receive answers to their curiosity and become open to us" (Informant 6), illustrating how responsiveness nurtures openness and continued communication.

Still, parents acknowledged the weight of their responsibility. "Our teaching has effects on them, especially when the teaching is wrong" (Informant 2), one noted. Another shared, "At least they know what is right and wrong after we teach them" (Informant 5), underscoring that sex education involves not just information, but value formation.

Ultimately, *Openness to Topic* is more than a conversational choice; it's a relational commitment that builds trust, strengthens bonds, and supports adolescents in navigating sexual development with clarity and confidence.

Theme Cluster 1.3. Feeling of Discomfort and Uncertainty

Feelings of Discomfort and Uncertainty captures the emotional challenges parents face when discussing sex-related topics with their adolescent children. Many informants described feelings of shyness, hesitation, and self-doubt, often due to limited knowledge, uncertainty about appropriate language, and fear of how their children might react. Parents admitted discomfort, particularly when addressing topics like sexual intercourse. One shared, "I have encountered problems, especially on the things done in sexual intercourse" (Informant 9), while another said, "I felt shy sometimes also when our topic is sex education" (Informant 10). These sentiments reflect how discomfort can hinder clarity and confidence during such conversations.

Parents also encountered resistance from their children, ranging from laughter and avoidance to visible discomfort. "Sometimes my children feel uncomfortable when we talk about sex education" (Informant 8), one noted. Another said, "They become open to me... but when we talk about sex education and marriage, they immediately avoid" (Informant 10). These reactions highlight the tension between parental intent and adolescent readiness. Some interactions led to strained communication. "Sometimes they are not willing to listen to me" (Informant 9), one parent shared, illustrating how repeated attempts, if not attuned to the child's emotional state, can cause disengagement.

Despite these challenges, parents still viewed their efforts as meaningful. They believed that even uncomfortable conversations contribute to their children's informed decision-making. This duality, careful intention met with emotional complexity, defines much of the parent-child dynamic in sex education. Ultimately, this theme underscores the

internal barriers parents must navigate and the varied responses from adolescents that shape these discussions. The theme points to a need for culturally sensitive support and resources to help parents communicate effectively and confidently about sexual health.

Theme Cluster 1.4. Difficulty in Articulation

Difficulty in Articulation captures the internal struggle many parents face when discussing sex-related topics with their adolescent children. Despite recognizing the importance of sex education, parents often found it challenging to convey sensitive information due to cultural taboos, personal discomfort, limited knowledge, and uncertainty about age-appropriate language.

Several informants shared that explaining sex education felt daunting, especially when trying to match their child's level of understanding. "We always land on repeated questions," noted one parent (Informant 6), while another said, "It was difficult... especially on the topic itself and the terms I needed to use" (Informant 7). These accounts reveal the cognitive and emotional effort parents exert in finding the right words and analogies.

Unexpected questions from children intensified this challenge. "When my child asked how they were formed, I couldn't tell them directly. It was difficult for me" (Informant 4), one parent explained. Others expressed similar difficulty navigating spontaneous inquiries, often due to a cultural perception that such discussions are "indecent" or "impolite." As one noted, "That gives difficulty for me" (Informant 5), while others admitted feeling shy or embarrassed (Informants 1, 9).

Some parents doubted their ability to teach the topic effectively. "I think I cannot teach them about sex education" (Informant 2) and "I have little doubt about the topic" (Informant 8) reflect a lack of confidence. In response, some resorted to disciplinary tones to assert authority, such as, "I need to act like I'm angry so they will listen" (Informant 10), a strategy rooted more in control than in open communication.

Others struggled to find relatable examples or language suited to their child's age. "We need to find a good example... so that they would understand" (Informant 7), one parent shared, highlighting the effort to bridge the gap between intent and comprehension in the absence of structured guidance.

In essence, this theme reflects how Filipino parents' attempts to educate are often hindered by cultural norms, emotional discomfort, and lack of preparation. Their efforts, grounded in care, are burdened by a communication gap that underscores the need for culturally sensitive resources and support systems to help parents engage confidently and effectively in sex education.

Theme 2. Overcoming Obstacles in Sex Parenting

Overcoming Obstacles in Sex Parenting reflects how parents intentionally confront the emotional, cultural, and informational barriers that complicate their role as primary educators in sexuality. Despite discomfort and uncertainty, parents shared a strong sense of duty to guide their adolescents toward responsible decisions about sex, relationships, and values.

Timing emerged as a crucial element. Parents emphasized that sex education should be introduced when adolescents begin asking questions or when life events naturally open the door. These conversations were rarely singular; rather, they unfolded as ongoing, age-appropriate dialogues anchored in trust and parental presence. For many, past experiences shaped their current efforts. Some parents recalled growing up in households where sex was never discussed, an absence they now sought to correct. Others turned to online resources, videos, or professional advice to better meet their children's developmental needs, especially when their own knowledge felt inadequate. A recurring tension was the fear of giving incorrect information. Several parents admitted struggling with how to explain sensitive topics clearly and truthfully. Yet, this challenge was often met with a proactive spirit. Some sought professional guidance, while others relied on intuition, conversation, and responsiveness to their child's readiness.

Throughout these varied approaches, what remained consistent was the desire to do right by their children. Cultural norms and religious beliefs often informed their decisions, framing adolescence as a time for moral grounding rather than sexual exploration. In this way, parents viewed themselves not only as informants but as moral guides and protectors. Collectively, this theme captures parents' resilience and adaptability as they navigate unfamiliar territory with intention, learning, and deep care. Their efforts reveal not only the weight of the responsibility they carry, but also the enduring hope that their guidance will make a meaningful difference in their children's lives.

Theme Cluster 2.1. Proper Timing and Discourse

Proper Timing and Discourse highlights the strategic, ongoing efforts of parents to educate their children about sex-related matters. Informants viewed sex education not as a one-time conversation but a continuous responsibility requiring thoughtful timing, age-appropriate language, and consistency, aimed at preventing early sexual activity, unplanned pregnancy, and premature marriage.

Parents stressed their role in preparing children for adulthood through early, intentional discussions. "The obligation of parents... is important to make them adults before entering marriage," shared one (Informant 1), while another noted, "We serve as guides... to avoid unwanted pregnancy" (Informant 10). These affirm the belief that parental

guidance shapes adolescents' decision-making and values.

Consistency was also emphasized. "I talked to my children continuously," said Informant 10, while Informant 5 added, "I explained to my child thoroughly so she will understand." Parents reinforced lessons over time to support comprehension and instill core values. Support from others played a role in navigating this responsibility. "I asked another mother," shared Informant 7, while Informant 4 received help from a relative who was a nurse. These reveal the collaborative nature of sex parenting where peer and professional input supplement parental efforts. Some parents also drew strength from spiritual practices. "I accompanied it with prayer," said Informant 1, showing how faith contributed to their confidence and moral grounding.

Parents showed discernment in choosing appropriate words, tone, and timing. Informant 6 noted, "I look for the right terms... and take opportunities when I hear my daughter talking about relationships." This pragmatic approach ensures that conversations align with the child's maturity and context.

Ultimately, this theme reflects parents' deliberate strategies to guide their children's sexual development with care, resilience, and a sense of duty. Despite cultural taboos and personal discomfort, they demonstrated adaptability in fulfilling this critical role through consistent dialogue, collaboration, reflection, and faith.

Theme Cluster 2.2. Learning from Experience

Learning from Experience highlights how parents rely on personal history, previous conversations, and self-initiated efforts to guide their approach to sex education. Most informants lacked formal training and instead drew from lived experiences, adapting their communication through reflection and trial-and-error.

Several parents shared those earlier conversations served as learning moments for future discussions. "My learnings from our previous talk... became my guide" (Informant 8), said one, while another added, "I made some improvements for the next talking with them" (Informant 10), illustrating how experience shaped a dynamic and evolving approach. Many described a self-reliant model of parenting, grounded in instinct and life lessons. "I use my personal experience to teach my children and solve problems" (Informant 1), one noted. Others echoed, "We did not receive help" (Informants 2 and 3), underscoring how adaptation emerged from their own parenting journey. Despite this independence, some parents acknowledged informal support. "I watch educational videos... sometimes nurses guide me" (Informant 9), shared one, while another said, "I talked with health professional friends to learn" (Informant 6). These show openness to supplemental learning even in the absence of formal advice. Digital resources also played a role. "There are available ideas on the internet which I can use," said Informant

6, explaining that professional help wasn't yet needed as long as their child remained receptive. Online information thus became a practical alternative for guidance.

Collectively, this theme reveals how parents adapt and grow in their role through reflection, resilience, and creativity. While most lacked structured guidance, they refined their strategies through real-life interactions and informal learning. This theme also highlights the value of community-based resources and culturally sensitive tools that build on personal experience to strengthen parental confidence and effectiveness in addressing sensitive topics like sexuality.

Theme Cluster 2.3. A Need for Right Education

A Need for Right Education reflects parents' recognition of their limitations in delivering accurate, age-appropriate, and culturally sensitive sex education. While many made sincere efforts to guide their children on topics like sexuality, pregnancy, and relationships, they acknowledged gaps in knowledge, discomfort with certain questions, and a lack of formal training.

Several parents expressed the need for professional support to enhance their teaching and avoid passing on misinformation. "Our children need help from them [professionals]... we parents may be teaching the wrong thing" (Informant 2), shared one parent. Another added, "I need help... about the right steps and procedures" (Informant 5), highlighting a desire for clearer guidance and structure.

Parents also struggled with specific challenges, responding to difficult or "indecent" questions, selecting appropriate language, or advising their children on romantic relationships. "I need help... especially for their difficult and indecent questions" (Informant 7), noted one, while another said, "I need help in guiding them... when they have engaged in relationships" (Informant 9). These responses reveal the emotional and cognitive burden of addressing sensitive issues without sufficient support.

Informal help was often sought from relatives or neighbors. "I received help from my nurse relative" (Informant 4) and "from our neighbor... it was helpful" (Informant 7) demonstrate how community-based networks provided valuable assistance when formal resources were lacking.

However, not all parents felt the need for immediate external help. "For the meantime, I do not need help... my child is still listening, and there are ideas on the internet" (Informant 6), one parent shared. This reflects how some rely on digital tools and personal experience when they feel effective in their role.

Ultimately, this theme underscores the tension between parents' sense of duty and their awareness of personal limitations. It highlights the importance of providing accessible, evidence-based resources and professional support to empower parents in addressing complex, sensitive topics confidently,

fostering trust, understanding, and adolescent well-being.

Theme 3. Sex Parenting Enlightenment

Sex Parenting Enlightenment captures parents' growing awareness of their vital role in their children's sexual development and their evolving openness to collaborative, informed approaches. Moving beyond hesitant or isolated efforts, parents began to see sex education as both a personal responsibility and a shared endeavor, with trust, warmth, and professional support at its core.

This theme reflects a shift in perspective: parents still viewed themselves as key influencers of values but acknowledged their limitations in navigating complex or sensitive topics. Many expressed a desire to partner with professionals, particularly nurses and educators, to provide accurate, developmentally appropriate information while reinforcing family values. They emphasized the importance of privacy, respect, and emotional warmth in these conversations.

Parents remained committed to teaching persistently, using their child's curiosity as an entry point for deeper discussions. They adapted, drawing on personal experiences, technology, and guidance from others, to stay responsive and relevant. Tone and setting mattered deeply; conversations grounded in compassion and trust were seen as essential to reducing shame and fostering openness.

Importantly, parents were not only receptive to external support but actively sought it. They valued professional insight, especially when delivered with cultural sensitivity and empathy. This openness signaled a shift from doing it alone to embracing partnership, where professional guidance complements parental care.

In sum, this theme reflects a maturing view of sex education as a collaborative process. Parents recognized that by combining persistent engagement, emotional warmth, and expert support, they could better equip their adolescents to make informed and responsible choices. It is through this shared commitment that both families and professionals create safe, empowering spaces for adolescent sexual health and development.

Theme Cluster 3.1. Persistence in Teaching

Persistence in Teaching highlights parents' consistent efforts to educate their adolescent children about sexuality despite sociocultural barriers and the sensitivity of the topic. This theme underscores the importance of timing, responsiveness, and the use of effective strategies to ensure that sex education is delivered meaningfully and consistently.

Parents emphasized recognizing the right moment to engage, typically when children express curiosity or when situational cues present an opening. "We should immediately respond... to avoid our children remaining under curiosity" (Informant 6), one parent noted. Another added, "It is important to know

the right timing" (Informant 10), reinforcing the need for attentiveness.

Persistence also involved proactive observation. Parents responded to behaviors, overheard conversations, or access to explicit content. "Even if they are still young, they know how to watch videos about sex..." (Informant 1), one parent shared, prompting immediate guidance and correction.

To enhance their teaching, parents turned to resources like digital content and professional collaboration. "Parents should use technology... as sources of information" (Informant 7), while another stated, "Parents and expert persons like nurses should exchange ideas" (Informant 8), highlighting the value of blended approaches.

A key role parents identified was correcting misconceptions. "We should explain... what is right about sex education" (Informant 9), one said, while another emphasized seizing teachable moments: "The best way is the time that they will ask" (Informant 2).

Collectively, these insights show that Persistence in Teaching is rooted in consistency, observation, and timely engagement. Rather than avoiding uncomfortable topics, parents remained present and responsive, recognizing adolescence as a critical period of curiosity and vulnerability that demands thoughtful, ongoing guidance.

Theme Cluster 3.2. Guidance with Warmth in Parenting

Guidance with Warmth in Parenting captures the nurturing, intentional approach parents use to educate their adolescent children about sex-related topics. This theme emphasizes how timing, tone, setting, and emotional warmth enhance the effectiveness of family-based sex education. Rather than relying on authority alone, parents focused on building trust, maintaining privacy, and delivering age-appropriate information with empathy and care.

Parental guidance was consistently viewed as the most effective strategy. Parents believed that consistent, values-based conversations helped adolescents avoid early sexual activity, unwanted pregnancy, and premature marriage. "Parental guidance is effective... they will learn not to engage in early marriage unless they reach above 20" (Informant 1), noted one, while another added, "...so our children will learn... and avoid unwanted pregnancy" (Informant 3). Timing and setting were also important. Quiet, private moments, especially in the evening, were seen as ideal for serious conversations. "It is effective to talk to your child privately... before they go to bed" (Informant 7), said one parent, underscoring the importance of calm, personal settings. Parents tailored their messages to their child's age and understanding. "It depends on the age and level of understanding... we should explain in a way they could relate to" (Informant 6), reflecting the need for developmentally appropriate communication. Crucially, warmth and affection were

viewed as keys to fostering openness. “We should include also love... to get their trust,” said Informant 5, highlighting the belief that emotional connection makes it easier for children to confide in their parents.

Overall, this theme illustrates that effective sex education goes beyond information delivery. Parents aimed to create safe, trusting spaces where adolescents could learn, ask questions, and feel supported. Through warmth, privacy, and thoughtful engagement, parents strengthened the parent-child bond while guiding their children’s sexual development with compassion and care.

Theme Cluster 3.3. Seek Professional Help

Seek Professional Help reflects parents’ openness to involving healthcare professionals, particularly nurses, in the sexual education of their adolescent children. While parental guidance was seen as foundational, parents recognized the value of professional support in delivering accurate, age-appropriate, and culturally sensitive information.

Parents expressed a desire for nurses to serve as co-educators, particularly in addressing difficult or sensitive topics. “Hopefully our nurses will continue helping our children... to avoid early marriage” (Informant 4), one parent shared. Another added, “Nurses should teach our youth carefully” (Informant 9), highlighting the trust placed in nurses to reinforce and complement parental efforts.

However, parents emphasized that professional involvement must be holistic, combining scientific knowledge with emotional intelligence, cultural awareness, and relational sensitivity. As Informant 6 explained, “They need to combine scientific methods with emotion, relationship, and culture... so that our children will value it.” This underscores the importance of psychosocial and cultural alignment in effective sex education.

Parents also encouraged nurses to adopt a caring, parental mindset. “They need to think that they are parents too so that our children will value their teaching” (Informant 7), one suggested, highlighting the importance of empathy and genuine concern. Others called for more structured, collaborative approaches: “Nurses should make a checklist... based on parents, culture, and science” (Informant 8), advocating for educational strategies that integrate family values with evidence-based content.

Collectively, this theme highlights parents’ willingness to collaborate with professionals while advocating for a balanced approach, one that merges expertise with empathy and cultural sensitivity. Parents view nurses not only as sources of knowledge but as trusted partners in guiding adolescents toward informed, responsible, and value-based sexual decisions.

DISCUSSION

This study explored the lived experiences and perspectives of Filipino parents in providing sex education to their adolescent children. Using

Colaizzi’s method of thematic analysis, three major themes emerged: Parents’ Rendezvous in Sex Parenting, Overcoming Obstacles in Sex Parenting, and Sex Parenting Enlightenment. Together, these themes reveal the complex interplay of cultural expectations, communication dynamics, parental roles, and the perceived value of professional support, insights that resonate both locally and globally (Ellin et al., 2024; Aventin et al., 2020).

The first theme, *Parents’ Rendezvous in Sex Parenting*, highlights adolescent curiosity as a common trigger for parent-child discussions about sexuality. In many cases, Filipino parents found themselves responding to their children’s inquiries about sex, pregnancy, and marriage despite personal discomfort and cultural taboos. These conversations, though often challenging, became opportunities for meaningful engagement, aligning with global findings that emphasize the importance of adolescent-initiated dialogue in sexual development (Gerber, 2023; Pell, 2023; Noorman et al., 2022). The tension between parental intent and cultural norms reflects the ongoing struggle Filipino parents face in reconciling openness with societal expectations, particularly in regions where discussing sex remains taboo (Yamat et al., 2023; Ruiz Austria, 2006).

The second theme, *Overcoming Obstacles in Sex Parenting*, illustrates parents’ persistence despite emotional discomfort, limited knowledge, and lack of formal training. Many relied on instinct, lived experience, and informal support from peers or relatives. These findings align with prior studies noting the absence of structured resources, particularly in conservative settings, which often compels parents to navigate sex education through trial-and-error (Noorman et al., 2022; Rouhparvar et al., 2022; Sham et al., 2020). Filipino parents viewed their efforts as preventive, aimed at reducing early pregnancies and marriages, and recognized their guidance as a critical protective factor. This is supported by evidence showing that early parental involvement positively influences adolescent sexual and reproductive health outcomes (Kim et al., 2023; UNFPA, 2023).

The third theme, *Sex Parenting Enlightenment*, underscores the evolving awareness among parents of the need for emotional warmth, persistence, and collaboration with professionals. Parents identified respectful, private, and developmentally appropriate conversations as key strategies, echoing global best practices for compassionate and culturally responsive sex education (Hungo & Casinillo, 2023; Ellin et al., 2024). Many advocated for nurses to serve as co-educators, blending scientific expertise with empathy and cultural understanding, a view supported by literature promoting interdisciplinary, family-inclusive approaches (Aventin et al., 2020; Sham et al., 2020).

These findings align with Nola Pender’s Health Promotion Model (Murdaugh et al., 2019), which emphasizes the role of interpersonal influences, perceived benefits, and self-efficacy in sustaining health-promoting behaviors. Parents in this study acknowledged the importance of receiving support

from professionals and expressed that adolescent receptiveness improves when sex education is delivered through both familial and professional channels that reflect warmth, trust, and cultural competence. This reinforces Pender's assertion that health behaviors are shaped by meaningful relationships and environments that encourage reflective, informed choices.

The strength of this study lies in its use of Colaizzi's method, which provided a rich, in-depth exploration of parents' narratives. The diversity of informants in terms of age, family structure, and educational background added depth and credibility to the findings. However, the study's limitations include a small sample size and reliance on qualitative data, which may affect generalizability. Social desirability bias may have influenced participants' responses, particularly given the sensitivity of the topic. Additionally, the exclusion of adolescent perspectives limited the ability to assess how parental sex education was received or internalized.

Despite these limitations, the study offers practical implications. First, there is a clear need for community-based initiatives that empower parents with culturally sensitive sex education strategies, ideally in collaboration with nurses and educators. Second, healthcare institutions should recognize and strengthen the role of nurses in adolescent sexual health education by equipping them with tools for family engagement. Third, sex education interventions must be contextually grounded, integrating cultural values, language, and emotional intelligence to foster openness and trust.

Future research should include adolescent perspectives to provide a fuller understanding of the impact of parental sex education. Comparative studies across urban and rural settings could also reveal contextual differences in parental practices. Additionally, longitudinal research examining the long-term effects of early sex education delivered by both parents and professionals would offer valuable insights into behavioral outcomes.

In conclusion, this study sheds light on the resilience, commitment, and reflective growth of Filipino parents as they navigate the often uncomfortable but crucial task of sex education. Despite cultural taboos and limited resources, parents demonstrated a strong desire to guide their children with care, knowledge, and openness. The findings call for greater collaboration between families and healthcare professionals to ensure that adolescents receive comprehensive, empathetic, and culturally attuned sexual education, laying the groundwork for healthier decisions and futures.

CONCLUSION

This study illuminated the vital role parents play in the sexual education of their adolescent children and underscored the importance of collaborative partnerships with healthcare professionals, particularly nurses. The emergent themes revealed

that while parents strive to guide their children with persistence, warmth, and experience, they also recognize the limitations of their knowledge and the growing need for professional support. Anchored in Nola Pender's Health Promotion Model, the findings highlight how empowering parents through culturally sensitive education and fostering open communication between families and nurses can significantly enhance adolescents' awareness, decision-making, and protection from risks such as early pregnancy and unsafe sexual behaviors. Ultimately, sex parenting is not a solitary endeavor but a shared responsibility, requiring timely, informed, and empathetic dialogue between the home and the healthcare system to promote healthy adolescent development.

Conflict of Interest

The authors declare no conflicts of interest.

Acknowledgments

The researchers extend their heartfelt gratitude to their families, mentors, and friends for their unwavering support throughout this study. Above all, the researchers thank Almighty Allah (SWT) for His infinite love, guidance, and mercy.

Funding

This study is self-funded.

REFERENCES

- Ahmed, S. K. (2024). Sample size for saturation in qualitative research: debates, definitions, and strategies. *Journal of Medicine Surgery and Public Health*, 5, 100171. <https://doi.org/10.1016/j.gjmedi.2024.100171>
- Albert Sekhar, M., Edward, S., Grace, A., Pricilla, S. E., & G, S. (2024). Understanding Comprehensive Sexuality Education: A Worldwide Narrative Review. *Cureus*, 16(11), e74788. <https://doi.org/10.7759/cureus.74788>
- Aventin, Á., Gough, A., McShane, T., Gillespie, K., O'Hare, L., Young, H., Lewis, R., Warren, E., Buckley, K., & Lohan, M. (2020). Engaging parents in digital sexual and reproductive health education: evidence from the JACK trial. *Reproductive Health*, 17(1). <https://doi.org/10.1186/s12978-020-00975-y>
- Ayton, D. (2023) Chapter 6: Phenomenology in Ayton, D., Tsindos, T., & Berkovic, D. (2023). *Qualitative research: A practical guide for health and social care researchers and practitioners*. Council of Australian University Librarians, Open Educational Resources Collective. https://oercollective.caul.edu.au/qualitative-research/chapter/unknown_-6/
- Ballesteros, A. (2020). Knowledge of sexual education and awareness of access to

- contraceptives. *Capstone Projects and Master's Theses*. 883. Digital Commons @ CSUMB. https://digitalcommons.csumb.edu/caps_thes_all/883
- Chamdimba, E., Kabiru, C. W., Ushie, B. A., Munthali, A., Thakwalakwa, C., & Ajayi, A. I. (2023). Naïve, uninformed and sexually abused: circumstances surrounding adolescent pregnancies in Malawi. *Reproductive health*, 20(1), 114. <https://doi.org/10.1186/s12978-023-01655-3>
- Cities and Municipalities Competitive Index. (2022). Cotabato (North Cotabato). [https://cmci.dti.gov.ph/prov-profile.php?prov=Cotabato%20\(North%20Cotabato\)&year=2022](https://cmci.dti.gov.ph/prov-profile.php?prov=Cotabato%20(North%20Cotabato)&year=2022)
- Cordero D. A., Jr (2024). Letter to the Editor: Teenage Pregnancy in the Philippines: Effects and Interventions. *Journal of preventive medicine and public health = Yebang Uihakhoe chi*, 57(3), 304–305. <https://doi.org/10.3961/jpmp.24.221>
- Ellin, M. R. B., Hazariah, A. H. S. B., Arifin, S. R. M., Hasan, H. B., Othman, S. B., & Zain, N. M. B. (2024). Examining Asian Parents' Perspectives and Challenges in Sexual and Reproductive Health Education with Implications for Public Health: A Systematic Review. *Indian Journal of Public Health*, 68(3), 407–417. <https://doi.org/10.4103/ijph.ijph.1281.23>
- Gerber, N. (2023). Parent-Child Conversations about Body Safety and Consent [Doctoral dissertation, The University of San Francisco]. USF Scholarship: a digital repository @ Gleeson Library | Geschke Center. <https://repository.usfca.edu/diss/649>
- Hungo, M., & Casinillo, L. F. (2023). Evaluating parents' perspective on sex education in elementary schools. *JPI (Jurnal Pendidikan Indonesia)*, 12(4), 826–835. <https://doi.org/10.23887/jpiundiksha.v12i4.67469>
- Kim, J., Huh, J., & Yoo, S. (2023). Implementation of reproductive health education in a Filipino city: A case study. *International Journal of Educational Development*, 100, 102778. <https://doi.org/10.1016/j.ijedudev.2023.102778>
- Kumar, R., Goyal, A., Singh, P., Bhardwaj, A., Mittal, A., & Yadav, S. S. (2017). Knowledge Attitude and Perception of Sex Education among School Going Adolescents in Ambala District, Haryana, India: A Cross-Sectional Study. *Journal of clinical and diagnostic research : JCDR*, 11(3), LC01–LC04. <https://doi.org/10.7860/JCDR/2017/19290.9338>
- Lesinskienė, S., Andruškevič, J., & Butvilaitė, A. (2025). Adolescent Pregnancies and Perinatal Mental Health-Needs and Complex Support Options: A Literature Review. *Journal of clinical medicine*, 14(7), 2334. <https://doi.org/10.3390/jcm14072334>
- Lincoln, Y., & Guba, E. G. (1985). *Naturalistic inquiry*. Sage.
- Mark, N. D. E., & Wu, L. L. (2022). More comprehensive sex education reduced teen births: Quasi-experimental evidence. *Proceedings of the National Academy of Sciences of the United States of America*, 119(8), e2113144119. <https://doi.org/10.1073/pnas.2113144119>
- Morrow, R., Rodriguez, A. & King, N. (2015). Colaizzi's descriptive phenomenological method. *The Psychologist*, 28(8),643-644. https://eprints.hud.ac.uk/id/eprint/26984/1/Morrow_et_al.pdf
- Murdaugh, C., Parsons, M.A., & Pender, N.J. (2019). *Health Promotion in Nursing Practice* (9th ed.). Pearson.
- Noorman, M. A., Daas, C. D., & De Wit, J. B. (2022). How Parents' Ideals are Offset by Uncertainty and Fears: A Systematic Review of the Experiences of European Parents regarding the Sexual Education of Their Children. *The Journal of Sex Research*, 60(7), 1034–1044. <https://doi.org/10.1080/00224499.2022.2064414>
- Nowell, L., Norris, J., White, D., & Moules, N. (2017). Thematic Analysis: Striving to Meet the Trustworthiness Criteria. *International Journal of Qualitative Methods*, 16, 1-13. <https://doi.org/10.1177/1609406917733847>
- Otegbayo, B. E., Omar, N., Danaee, M., Mohajer, S., & Aghamohamadi, N. (2023). Impact of individual and environmental factors on academic performance of pregnant adolescent. *BMC women's health*, 23(1), 383. <https://doi.org/10.1186/s12905-023-02520-y>
- Pell, T.S. (2023). Understanding approaches to parental education on sex education [Master's thesis, Grand Valley State University]. ScholarWorks@GVSU. <https://scholarworks.qvsu.edu/gradprojects/254>
- Philippine Commission on Women. (2012). Republic Act 10354: The Responsible Parenthood and Reproductive Health Act of 2012. <https://pcw.gov.ph/republic-act-10354>
- Rouhparvar, Z., Javadnoori, M., & Shahali, S. (2022). Parents' approaches to sexuality education of their adolescent boys: a qualitative study in Ahvaz, Iran. *Reproductive Health*, 19(1). <https://doi.org/10.1186/s12978-022-01367-0>
- Ruiz Austria, C. (2006). *Say It Isn't Sex: The Politics of Sex Education in the Philippines*. University of the Philippines: Center for Integrative and Development Studies. <https://cids.up.edu.ph/wp-content/uploads/2022/03/Say-it-Isn't-Sex-vol.10-no.2-July-Dec-2006-5.pdf>

- Sham, F., Zaidi, W.N.A.W.M., Zahari, Z.N., Danis, A., & Razali, S. (2020). Sexuality Means "Sex": Opinions of Parents on Sexuality Education in Malaysia. *International Journal of Caring Sciences*, 13(3), 1818-1825. https://internationaljournalofcaringsciences.org/docs/33_sham_original_13_3_2.pdf
- United Nations Population Fund (UNFPA). (2023). Philippines: Country case studies on out-of-school comprehensive sexuality education. <https://www.unfpa.org/resources/philippines-country-case-studies-out-school-comprehensive-sexuality-education>
- World Health Organization. (2025). WHO releases new guideline to prevent adolescent pregnancies and improve girls' health. <https://www.who.int/news/item/23-04-2025-who-releases-new-guideline-to-prevent-adolescent-pregnancies-and-improve-girls--health>
- Yamat, K., Hernandez, J.K., Salas, K.M., Soliman, K.B., Delos Reyes, R.C. (2023). Should sex education in the Philippines remain taboo? *Journal of Social Health*, 5(2), 45-49. <https://doi.org/10.61072/j.osh.2023.524>
- Zhang, W., & Yuan, Y. (2023). Knowledge, attitudes, and practices of parents toward sexuality education for primary school children in China. *Frontiers in psychology*, 14, 1096516. <https://doi.org/10.3389/fpsyg.2023.1096516>