



Research Article

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## Enhancing School-Based Sexuality Education in Rural Areas of South Africa: Educators' Perspectives

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### Abstract

Sexuality Education aims to reduce teenage pregnancies and other consequences of risky sexual practices such as sexually transmitted infections including human immunodeficiency virus (HIV) among young people. This descriptive-explorative study explored and described how teachers in the senior phase at Soutpansberg West Circuit, South Africa perceived Sexuality Education in their schools. Ten purposively recruited teachers in the research setting were individually interviewed in 2019. The collected data were thematically analysed. The research findings revealed the teachers' perceived benefits of Sexuality Education, the barriers to Sexuality Education and impact of Sexuality Education on senior level learners in the study setting. Furthermore, it emerged that teachers used different approaches such as lectures, questions and answers, class discussions, and targeted individuals to facilitate Sexuality Education lessons in their schools. This study recommends the provision of support to teachers through training, access to relevant curriculum resources, as well as the monitoring and evaluation of Sexuality Education programmes in the study setting.

**Keywords:** learner; perceptions; senior phase; Sexuality Education; teacher

## 1. Introduction

Sule, Akor, Toluhi, Suleiman and Ali (2015) define Sexuality Education as a properly designed curriculum to equip adolescents and teenagers with the relevant skills, knowledge and proper understanding of their own sexuality in relation to societal expectations. After the outbreak of HIV in South Africa, Sexuality Education became part of the compulsory curriculum for all learners in South Africa. A school-based Sexuality Education programme has been implemented in South Africa since 2004 under the Revised National Curriculum Statement (Francis, 2010). Several studies reported that a well-implemented school-based Sexuality Education programme has multiple benefits and positive sexual outcomes such as delayed sexual debut, reduced risk of HIV infection and unplanned pregnancies among learners (Tyndale, Mugwete & Jayeoba, 2013; Frisco, 2008; Sule et al., 2015). Despite the implementation of a Sexuality Education programme in schools located in Soutpansberg West Circuit, the HIV infection rate and the number of learners falling pregnant are rising among learners (Tucker, George, Reardon & Panday, 2017). The same authors reported that two-thirds of the learners who were in grade 8 to grade 11 do not use condoms consistently when having sex, while about half of the learners had multiple sexual partners. The lack of expected positive Sexuality Education outcomes among learners prompted the researcher to conduct this study aimed to explore the perceptions of senior phase teachers regarding Sexuality Education in the schools located in the research setting.

### 1.1 Why Sexuality Education is important

A well-implemented Sexuality Education programme fosters a safe learning environment that promotes gender equity and provides learners with sexuality-related information and skills that enable them to make informed decisions about their sexuality (Adekola & Mavhandu-Mudzusi, 2021). Sexuality Education is crucial to young people's attainment of psychosocial and physical well-being (Tucker et al., 2017). Kumar, Goyal, Singh, Bhardwaj, Mittal and Yadav (2017) indicate that effective Sexuality Education can enhance learners' self-esteem, effective communication skills and heighten their awareness about health and disease-related knowledge.

Many studies conducted in sub-Saharan Africa indicated that adolescents and young adults are increasingly sexually active and are at a higher risk of contracting sexually transmitted infections (STIs) (Doyle, Mavedzenge, Plummer & Ross, 2012; Keogh, Stillman, Awusabo-Asare, Sidze, Monzon, Motta & Leong, 2018; Adeomi, Adeoye, Asekun-Olarinmoye, Abodunrin, Olugbenga-Bello & Sabageh, 2014). Mugwandala and Hagedorn (2017) believed that a school-based Sexuality Education programme is the intervention that could lead to behaviour and attitudinal change among learners. The same authors mentioned that Sexuality Education could guide adolescents to shun behaviours that put them at risk.

Therefore, it is important for them to have access to age appropriate and scientifically accurate information that will empower them to achieve and maintain positive sexual and reproductive health outcomes. Riley (2014) argues that schools are the most appropriate platforms to reach the majority of young people with the messages of Sexuality Education. While Mahlalela (2012) noted that early sexual activity predisposes young people to concurrent multiple partner relationships and unplanned pregnancies, Frisco (2008) maintains that school-based Sexuality Education promotes the delayed sexual debut of sexual activity in adolescents. In addition, Sexuality Education assists youths to experience sex and sexual relationships positively because they have good knowledge that enables them to negotiate well, and to show trust and mutual respect (Kumar et al., 2017). Sule et al. (2015) concur that Sexuality Education allows adolescents to express their sexual desires in a manner that reduces their risk of HIV infection and unwanted pregnancies. The same authors mentioned improved academic performance, development of negotiation skills, decision-making skills, assertion, and listening skills as additional benefits of an effective Sexuality Education programme.

### 1.2 Scope of Sexuality Education curriculum in the senior phase

In South Africa, Sexuality Education and HIV/AIDS information is offered as part of the mandatory Life Orientation curriculum (LO). While the subject is examinable, the results are not considered for university admission points. This makes learners perceive the subject as less valuable and count it as a waste of precious time that can be used to study subjects that counts towards the university grades. The South African Department of Basic Education decides the curriculum content of Sexuality Education and adapts it to the South African context. The Sexuality Education curriculum focuses on abstinence, safe sex, and biological and risk factors. Louw, Kosciulek and Chen (2014) indicated that the Sexuality Education curriculum should include updated information on HIV, sexual behaviour, and STIs' risk factors, as well as strategies for health promoting behaviours among learners. Riley's (2014) study recommended that the Sexuality Education curriculum should impact sexual and reproductive health knowledge and promote positive healthy behavioural outcomes. To promote its effectiveness, a school-based Sexuality Education programme should focus on genders issues, roles, and power dynamics in a relationship (Mugewandala & Hagedorn, 2017; Francis & DePalma, 2014). The curriculum should also cover accurate and age appropriate biomedical facts, address issues relevant to learners such as stigma and discrimination, political impact of HIV/AIDS, and psychosocial determinants of health, gender diversity, sexual orientation, communication and safer sex practices negotiations (Grose, Grabe & Kohfeldt, 2014).

### 1.3 Approaches used by teachers for Sexuality Education

For Sexuality Education to accomplish its goals, various approaches such as peer teaching, stage drama, and collaboration with key stakeholders need to be applied in its implementation (Born, Woolvaardt & McIntosh, 2015). Similarly, the findings of Grewe, Taboada, Dennis, Chen, Stein, Watson, Barrington and Lightfoot's (2016) study showed that using a participatory theatre-based approach for Sexuality Education can improve adolescents' sexuality-related knowledge and attitudes towards sexual risk taking. In addition, Adeleye, Adeomi, Asekun-Olarinmoye, Abodunrin, Bello and Sabageh (2014) showed that peer education is effective in improving knowledge, attitude, and prevention of harmful sexual practices among young people.

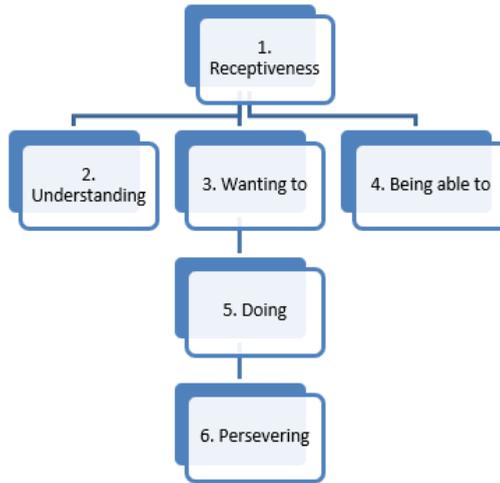
### 1.4 Strategies for equipping Sexuality Education teachers

Sarma, Ashraful and Gazi (2013) reported that training educators on the Sexuality Education curriculum improve their knowledge, attitudes, and readiness to impart appropriate sexuality information to their learners. Training also assists teachers to feel comfortable and confident about Sexuality Education topics to be discussed with learners. Therefore, well-trained teachers are crucial to the success of school-based Sexuality Education programmes. Riley (2014) suggested key elements to be incorporated into teachers' training to enhance their competence, confidence and comfort in facilitating all aspects of the Sexuality Education curriculum in the classroom. These elements include training educators on contents knowledge and challenges related to interacting with different contextual factors and stakeholders while offering Sexuality Education to the learners.

While the literature reviewed addressed the importance of sexuality education, the scope of the Sexuality Education curriculum and approaches used by teachers in the classroom, the researcher is prompted to conduct this study due to limited information on the attitudes of teachers regarding Sexuality Education in Limpopo Province. In addition, there is a lack of documented studies in Soutpansberg West about the perceptions of teachers regarding Sexuality Education.

### 1.5 Theoretical framework

This study is grounded on the Behavioural Change Model designed by Balm (2000). Balm's Behaviour Change Model has the following stages: Receptiveness, Understanding, Wanting to, Being able to, Doing and Persevering. The model is diagrammatically presented as follows:



**Figure 1:** The structure of the Behaviour Change Model by Marcel Balm (adopted from Doyle et al., 2012).

Balm identified six stages that people go through in the process of behaviour change. The stages follow each other systematically according to the complexity of change. The first one is simple, while the last one is complex. However, people can get stuck in or fixated on any of the stages. The stages are as follows:

#### 1.5.1 Receptiveness

For an individual to undergo any change, there should be a willingness and openness to change. If that is not the case, the behaviour will not be changed. This means that an individual should be ready to receive new ideas and insights, which is the initial step in the behaviour change process. The focus is on learners' reception of Sexuality Education knowledge. This will mainly be determined by learners' attitude towards Sexuality Education.

#### 1.5.2 Understanding

According to Balm (2000), for people to change their behaviour, they should be fully informed about the behaviour until they fully understand and even verbalise the expected change and the benefit thereof. The main aim of Sexuality Education is to elicit positive change in adolescents' sexual behaviour. In order to achieve this, Sexuality Education must be taught by teachers with a good understanding of the subject. Therefore, to foster learners' understanding of the key concepts of the Sexuality Education curriculum, teachers should be adequately trained to promote fidelity and facilitate curriculum implementation (Mouhana, DeJong, Afifi, Asmar, Nazha & Zu-ryk, 2017). This study explored the perception of teachers on Sexuality Education and their understanding of its key concepts, including their preparedness to teach Sexuality Education to learners.

### 1.5.3 *Wanting to*

Behavioural change can only be realised when an individual is prepared to change. When people want to change, they begin to disregard the disadvantages and focus on the advantages of the new behaviour. Balm (2000) asserts that behaviour change can only happen if the person is willing to change.

### 1.5.4 *Being able to*

An individual can initiate a change of behaviour if they have skills to effect and maintain the change. Such a person should know how to maintain change in order to avoid reverting back to the previous unwanted habits. For example, condom usage should be demonstrated so that those who want to use condoms should know how to do that.

### 1.5.5 *Doing*

This is a stage where an individual initiates and practises the new behaviour. A person who desires a behavioural change should now practise what they have been taught.

### 1.5.6 *Persevering*

This is a stage where a new behaviour is fully embraced and sustained by an individual and becomes the known lifestyle and nature of that individual.

Support from significant others and a conducive environment that promotes such changed behaviour could help individuals to maintain and sustain the new behaviour.

## 2. **Methodology**

### 2.1 *Design*

Guided by Grove, Burns and Gray (2013), this study used an exploratory-descriptive design to explore and describe the perceptions of teachers in the senior phase at Soutpansberg West Circuit regarding the school-based Sexuality Education programme. The design helped the researcher to discover new meaning and describe what exists in the research setting regarding the perceptions of teachers in the senior phase at Soutpansberg West Circuit on the Sexuality Education programme being offered in their schools (McLeod, 2017).

### 2.2 *Study setting*

This study was conducted in the senior phase of secondary schools located in the Soutpansberg West Circuit. The Soutpansberg West Circuit is in a rural area located in Limpopo Province of South Africa.

### 2.3 *Sampling*

The population of the study was composed of all the teachers who teach Life Orientation in the senior phase at the Soutpansberg West Circuit. Purposive sampling techniques were used to recruit senior phase teachers to participate in the study. To participate in the study, an individual must be a Life Orientation teacher in the senior phase, willing to participate in the study voluntarily, must have been employed at the school where the study is conducted for at least one year, and must be permanently employed. To ensure variation, male and female teachers who have different qualifications and working at the selected schools in varied periods were selected. A total of ten

senior phase teachers participated in the study. The sample size was determined by data saturation. Urquhart (2013) defines data saturation as a point where the data analysis yields no new codes, but rather uses previously identified codes. Data saturation for this study was reached after interviewing the tenth participant. Two participants (n = 2) are staying at the town (Louis Trichardt), and the rest (n = 8) are staying at rural areas where the schools are located. They are all working within the circuit. The majority (n = 8) work in public schools, while the others (n = 2) work in private schools. Seven (n = 7) of the participants were males, and the rest (n = 3) were female. Half (n = 5) of the participants were in the age group of 51-60 years, four (n = 4) are at the age of 41-50 years and one (n=1) participant is within the age group age 31-40 years. The majority (n = 7) of the teachers have a Bachelor of Education (BEd) or honours degree, one (n = 1) has master's degree, and two have a non-teaching academic degree.

#### 2.4 Data collection

Data were collected from August to December 2019. The researcher conducted ten individual in-depth interviews to collect data from the participants. Open-ended questions were used to elicit rich and detailed responses from the participants. All the interviews were initiated using the following central question: "What are your perceptions of Sexuality Education?" The researcher used probing and follow-up questions to obtain rich data from the participants.

All the interviews were recorded using a high quality audio-recorder and lasted for about 60 minutes. During the interview, field notes were used to record non-verbal aspects of the interviews such as tone of participant's voice, body language, researcher's observations and also the environment where the interview took place. Data collection and analysis were iteratively done till data saturation was reached.

#### 2.5 Data analysis

Data were analysed thematically following steps described by Snyder (2012). Audio-recorded data from the in-depth interviews were transcribed verbatim immediately after each interview. The researcher read and re-read transcripts thoroughly while exploring an alternative understanding of the text. This led to the emergence of different codes. Similar codes were clustered together as sub-themes, themes, and super-ordinate themes. This was done for each transcript. Later, all the transcripts were compared and similar categories, themes and sub-themes from each transcript were merged or combined, with the quotations from each individual identified with a code to ensure the confidentiality of participants. A similar analysis process was performed by an independent coder who analysed the transcripts and came up with the table of super-ordinate themes, themes and sub-themes coupled with relevant quotations. Both tables of themes were compared and discussed. The discussion led to a final table of themes composed of three super-ordinate themes, themes and sub-themes with the relevant excerpts from the transcripts.

#### 2.6 Trustworthiness

This study followed Guba and Lincoln's (1994) criteria for ensuring trustworthiness as cited by Polit and Beck (2016). These criteria are credibility, transferability, dependability, confirmability and authenticity. The researcher used member checking and a validity check to ensure the credibility of the study. The ten participants were given the transcripts to ensure that data captured give accurate reflections of their views and perspectives. To ensure dependability and confirmability, field notes were used during the interviews to document aspects that cannot be audio-recorded. In addition, all audio-recorded interviews were independently transcribed and analysed by an independent coder. The independent coder's table of theme was compared with the researcher's table, leading to the final table of themes. The biographical details of all the participants, the research setting, data collection

method and data analysis were fully described to ensure transferability. Furthermore, the rich details and description of findings from the teachers regarding the school-based Sexuality Education programme was provided. Besides a description of the participants, authenticity was ensured by using participants' direct quotations verbatim and an audit trail of the research process.

### 2.7 Ethical measures

Ethical clearance to conduct study was obtained from the University of Zululand Research Ethics Committee. In addition, the Department of Education, Soutpansberg West Circuit and the schools where data were collected gave permission to conduct the study in the study sites. The purpose of the study, details of the data collection process and the potential benefits of the study – such as the enhanced Sexuality Education programme and improved sexual health outcomes among learners – were fully explained to the participants.

Participants were thoroughly informed that their participation was voluntary and they reserved the right to withdraw their participation in the study at any time if they so wished without any negative consequences. Therefore, a signed informed consent was obtained from each participant to ensure that their participation was voluntary. To maintain confidentiality, convenient and comfortable venues suggested by participants were used for data collection. In addition, personal details of the participants were not shared with unauthorised persons. To protect the identities of the participants, codes were used in the interview transcripts and in the presentation of the findings. All the research data such as audio-recorded interviews, transcripts and field notes are safely kept in code-locked electronic folders to prevent unauthorised access.

## 3. Results

Three super-ordinate themes emerged from data analysis of the interview transcripts, namely: (1) teachers' perceptions regarding Sexuality Education (2) approaches used to render Sexuality Education, and (3) strategies to improve Sexuality Education.

### 3.1 Teachers' perceptions regarding Sexuality Education

The study findings indicate that teachers in the research setting believe that Sexuality Education is beneficial to learners. Furthermore, the teachers perceived certain factors to be barriers to effective school-based Sexuality Education in the study setting.

#### 3.1.1 Benefits of Sexuality Education

Participants mentioned that Sexuality Education has several benefits such as improved knowledge, enhanced skills, reduced teenage pregnancy, reduced STIs including HIV, and improved academic performance.

##### 3.1.1.1 Improved knowledge

Results indicate that Sexuality Education improves learners' knowledge regarding sexuality. Participants alluded to the fact that Sexuality Education increased learners' awareness of the consequences of unprotected sex and forced relationships, increased knowledge about their bodies, and prepared them to handle changes to their bodies as they grow up.

*I think that Sexual Education should be taken seriously as it helps the learners to understand better and fully become aware of their sexuality. (P2, Male)*

*Sexuality Education helps the learners to understand their bodies. If learners are not taught about these issues, they become frustrated. Therefore, Sexuality Education assist learners in Senior Phase in understanding their body and how their body function. (P6, Male)*

Besides improving learners' knowledge about their bodies, it also provides learners with information on where they can access sexual and reproductive health care and services.

*Before learners are taught about sexuality education, most of them use to be absent from school when they are having period. Some will come to school but end up going home before the end of the school if they start to menstruate. But during Sexuality Education, we tell them that, if they start to menstruate while at school, they can go to the Life Orientation teacher to request for pads. If they cannot afford to buy the pads, they can go to the government and to the local clinics to request for pads to use during their menstrual circles. (P5, Male)*

### 3.1.1.2 Enhanced skills

Participants indicated that Sexuality Education can improve learners' communication and negotiation skills.

*Sexuality Education assist learners to develop negotiation skills. This skill assists them in negotiating when to have sex and also how to have sex. They are able to negotiate condom use and also delaying sexual debut which is absent to those learners who are not exposed to Sexuality Education. (P8, Female)*

### 3.1.1.3 Self-confidence

Participants believe that Sexuality Education boosts learners' self-confidence.

*I think learners, develop self-confidence through participation in Sexuality Education because they are able to understand themselves and this make them to develop self-confidence and to have positive self-esteem. (P5, Male)*

### 3.1.1.4 Reduction of the pregnancy and sexually transmitted infections including HIV/AIDS

It emerged from data analysis that teachers believe that the Sexuality Education programme reduces the incidence of unplanned pregnancies and STIs, including HIV, among learners.

*When learners are exposed to Sexuality Education, they know what to do when they want to engage in sexual activities. They will use condoms to avoid engaging in unprotected sex. They are always cautious. This also protect learners from STIs. So, learners have knowledge on using different methods to protect themselves from getting pregnant. They know that they can use pills or injections and also how to use condoms. (P10, Female)*

### 3.1.1.5 Improved academic performance

Participants felt that learners who accept the message of the Sexuality Education curriculum perform better in class than those who do not.

*Early pregnancy affects the minds of our learners. Same as STIs and others. Sexuality Education assist in preventing all these problems among learners thus leading to improved class performance as healthy learners concentrate in class and performs well. (P10, Female)*

### 3.1.1.6 Improved class attendance

Results indicate that learners who acted on acquired Sexuality Education knowledge have improved class attendance compared to the learners who did not.

*Absenteeism will not be there if they are not falling pregnant. If may be one is pregnant, she has to go to the clinic now and then. If a learner is sick due to STIs, he/she has to take a sick leave. (P4, Female)*

### 3.1.2 Barriers to Sexuality Education

The study finding revealed that certain school-based factors, cultures and learners' attitude constitute barriers to effective Sexuality Education programme education in the research setting.

#### 3.1.2.1 School-based barriers

Participants acknowledged that Sexuality Education teachers are not sufficiently trained to implement the curriculum effectively. In addition, some participants felt that a lack of recognition of learners' achievements by tertiary institutions for admission purposes water down the commitments of learners and teachers to Sexuality Education.

*I do not think that educators are well prepared to offer Sexuality Education. The teachers that are teaching have been trained in the old system when it was a taboo for a parent or an adult to talk to a learner about these sexual activities. (P1, Male)*

*Sexuality Education is not taken seriously as it is part of Life Orientation which contribute nothing when learner pass Grade 12. (P3, Male)*

*As Life Orientation is taken as a minor subject, in most of the school it is allocated to the less competent educators. Sexuality Education is not valued at all. (P6, Male)*

#### 3.1.2.2 Cultural barriers

The findings showed that messages received by learners from their cultures, such as initiation schools, are sometimes contradictory to the message of the Sexuality Education curriculum. Participants noted that culturally, it is taboo to discuss sexual matters with children in the research setting. Such a culture of silence negatively impacts the teaching and learning of Sexuality Education in the schools located in the study setting.

*Sometimes when we talk about sexuality, parents are not happy about us in the community. They think that we are encouraging their children to engage in sex and also making their children to fall pregnant because we are saying things which are taboo. (P3, Male)*

*You know this thing of sexuality, especially from VhaVenda culture they were taboo, to be divulged to our children who, are learners now at schools where the learners were never taught about their menstrual circles, they were never taught about the benefit of being circumcised, they were never taught about the period' pain, they were never taught about dating and preparing for marriages during their earlier period. So even today, for us, it is not easy to talk about these things (sexuality issues) in class. (P5, Male)*

#### 3.1.2.3 Learners' attitude towards Sexuality Education

Participants reported learners' attitude as one of the barriers to Sexuality Education in their schools.

*You can see that there is a lot of excitement that we are talking about sex, but they will just be laughing and talking with their friends. (P2, Male)*

*Some think that you are giving them license to date each other. All these perceptions need to be changed so that they may know to take care of themselves in relationship. (P4, Female).*

### 3.1.3 Approaches used to render Sexuality Education

Results highlight different teaching approaches used by the educators to implement the Sexuality Education curriculum. These methods include lectures, questions and answers, targeting individuals and class discussions.

#### 3.1.4 Lecture

This study found that the most commonly used approach adopted by teachers for offering Sexuality Education at schools located in Soutpansberg West Circuit is lecturing.

*What I do, when I enter the class, I usually tell learners that today we are going to talk about sexuality education. I tell them that they must listen very carefully. I will tell them whatever I know and what is written in the book. (P4, Female)*

#### 3.1.5 Questions and answers

Besides using lecture methods, teachers utilised a question and answer strategy to facilitate Sexuality Education lessons.

*I usually ask them questions such as, give me the names of sexual transmitted infections. What is the danger of unprotected sex? What are the signs of puberty in males? What are signs of puberty in females and so on and so on. This approach is what learners want. (P6, Male)*

#### 3.1.6 Targeting individuals

Results indicate that teachers sometimes target certain individuals instead of teaching Sexuality Education to the entire class in the research setting.

*I don't want to corrupt innocent learners. What I usually do is that, I target those boys who are misbehaving in class who seems to be knowing more about sex. I call them to the staff room and start telling them that what they are doing wrong. I have seen that if I teach the entire class, it makes those learners who are innocent to start being sexually active. (P3, Male)*

*So, most of the time I just call a specific learner and explain the issue of sexuality. Especially those who I know that they have low IQ and they can easily be sexually abused. (P9, Male)*

#### 3.1.7 Class discussion

While some teachers used lectures or targeted methods to teach Sexuality Education, it emerged that others combine both lectures and class room discussions during Sexuality Education lessons

*I think a combination of discussion and narrative methods are the best. The issue of just lecturing them, it doesn't help that much. I think discussion method involves the learners, and will help them. (P6, Male)*

### 3.2 Strategies to enhance teachers' skills for providing Sexuality Education to senior phase learners

This super-ordinate theme focuses on the strategies that can be utilised to enhance teachers' knowledge and pedagogical skills to effectively facilitate the Sexuality Education curriculum to senior phase learners in the study setting. These strategies include enhancement of the Sexuality Education curriculum and providing training support to Sexuality Education teachers.

### 3.2.1 Curriculum enhancement

Participants believed that making Sexuality Education as an examinable, stand-alone subject will improve its effectiveness. In addition, they proposed that the results of Life Orientation subjects should be considered for admission into tertiary institutions.

*I think firstly Sexuality Education has to be included within the curriculum in which the teachers have to teach. That is to say by now the little of it has been taught through Life Orientation, which is a wide learning area. So, teachers do not see its value, and sometimes people can even skip the learning unit, nobody will know or say something. But if it is a standalone subject, with dedicated educators, it will be well taught. (P5, Male)*

Some participants further suggest that Life Orientation should be a specialised course at the university where people can qualify as a Life Orientation Educator.

*I think that, if they know that they can go to the university and major with Life Orientation, the Sexuality Education will be taken seriously. I think if there is such major such as Life Orientation, even the teachers will be serious about Sexuality Education. (P2, Male)*

### 3.2.2 Training and mentoring

The other suggested strategy to improve Sexuality Education programme effectiveness among learners is to enhance teachers' skills through training and mentoring. Teachers should be trained on the curriculum contents and methods of teaching Sexuality Education.

*Teachers must be exposed to several workshops where they will learn different methodologies on how to implement Sexuality Education in their respective schools. (P3, Male)*

*Teachers must remain learners for the rest of their life. When people study their mind become sharp and active. Knowledge is power. It builds confidence and positive self-esteem. When teachers further their study, they become confident and they can be able to have skills and deliver what is supposed to be deliver. (P10, Female)*

Besides continuous professional training, the results indicated that teachers can be supported through mentorship in order to develop skills for effectively rendering Sexuality Education in the research setting.

*Sexuality Education mentoring of educators is necessary. It can either be by curriculum advisors, senior teachers, or by the lecturer. Or the school can call the professionals to assist in mentoring the educators who are supposed to teach sexuality Education. (P7, Male)*

## 4. Discussion

This study found that Sexuality Education helps learners to develop sexual awareness, self-respect and motivation to maintain positive sexual health outcomes. This is in line with previous studies, which noted that Sexuality Education assists children to develop self-respect, self-efficacy, positive interpersonal relationship and communication skills (Kumar et al., 2017; Sule et al., 2015; Mlakado & Timothy, 2014). Findings further indicate that Sexuality Education helps learners to understand their body changes and processes. The understanding of these processes reduces learners' frustration when they see changes such as menstruation, hoarseness of voice, acne, beards and pubic hairs, and wet dreams. The findings agree with Res (2017) and Tyndale et al. (2013), who assert that school-based Sexuality Education provides young people with knowledge about their bodies before they become sexually active.

Additionally, the study showed that Sexuality Education at the research setting has a positive impact on the academic performance of learners who acted on the knowledge received. This was

supported by Frisco (2008) who argues that learners who engage in risky sexual practices are likely to have low academic performance. While this study agrees with earlier studies that the Sexuality Education programme promotes positive sexual and reproductive health outcomes, some participants in this study were of the view that Sexuality Education motivates learners to become engage in sexual activities. According to Francis and DePalma (2014), teachers who share such a view are likely going to skip some aspects of the Sexuality Education curriculum such as contraception, as they assume learners may consider such lessons as permission to engage in sexual activities.

Apart from identifying the benefits of Sexuality Education among learners, the study revealed some barriers to successful implementation of Sexuality Education in schools located in the study setting. One of such barriers is poorly trained Sexuality Education teachers. It emerged from the data analysis that teachers are not well trained to offer Sexuality Education. This make teachers give basic information on abstinence and avoid sensitive topics such as sex, contraception, and gender identities. Riley (2014) concurs that untrained teachers might feel more uneasy about teaching issues related to sexuality and sexual health. Similarly, Francis and DePalma (2014) noted that Sexuality Education teachers in most schools received inadequate, superficial and non-uniform training resulting in poorly prepared teachers who lack confidence in offering Sexuality Education.

The findings indicate that learners and teachers did not attribute any importance or value to the Sexuality Education curriculum being offered in their school because it is not considered a major subject, but merely a lesson unit in another subject such as Life Orientation. Some teachers often used the allocated period to teach other subjects or encourage learners to do their homework during the Life Orientation lesson. The negative attitude towards the subject is further reinforced by its lack of recognition for admission points into tertiary institutions. Such a curriculum arrangement may adversely affect the attitude of learners and teachers to the school-based Sexuality Education programme (Turker, George, Reardon & Panday, 2016; Wood, Rogow & Stines, 2015).

The findings of this study highlighted cultural practices that hinder the effectiveness of Sexuality Education in the study setting. These include contradictory messages that emanate from initiation schools and beliefs that sexuality-related discussions with young people is a taboo. While this study revealed that initiation schools for circumcision promote an earlier sexual debut among learners in the research setting, Sule et al. (2015) see traditional practice and initiation ceremonies as an enhancer of Sexuality Education. The contradiction could be due to the lack of a uniform standard of operation of these initiation schools, which may differ from one culture to another. Furthermore, discussion about sexuality with children was considered taboo in the VhaVenda culture. Therefore, to avert criticism and a backlash from learners' parents, teachers avoid aspects of the curriculum on sexual pleasure, contraception and sexual diversity. These findings aligned with Francis and DePalma (2014) who indicated that some of the teachers felt compelled to skip some lessons, such as condom use demonstration, due to the prevailing societal beliefs.

Besides cultural barriers, the findings indicate that learners' negative attitude could be a barrier to Sexuality Education. While the attitude of learners could be influenced by issues such as teachers' competence and confidence, learners' cultural antecedents, and peer pressure, the acceptance and readiness to act on the acquired knowledge is dependent on their attitude to the messages of the Sexuality Education curriculum. Results further indicate the approaches used by teachers to mediate learning during Sexuality Education lessons. Lectures, using questions and answers, and individual targeting and classroom discussions were identified as strategies to implement the Sexuality Education curriculum in the research setting. The teachers focus on what is written in the textbooks and also only what they think learners should know. Francis and DePalma (2014) noted that some teachers may prefer a lecture method because it give them the power to choose topics they are comfortable with, while learners will not be able to ask probing questions of them. This finding contradicts Bonjour and Van der Vlugt's (2018) recommendation, which advocates for a participatory learning approach to mediate learning in the Sexuality Education classroom. The use of a question and answer approach was explained by Wood et al. (2015) who mentioned that the learners approach teachers with questions – both inside and outside of class – wanting to know more about aspects such

as sex and sexuality, condom use, STIs and safe periods during the menstrual cycles. The issue of the “targeting individuals” approach is unique to this study. The choice of this method may be more related to teachers’ attitude to Sexuality Education, especially those who may assume that, talking about Sexuality Education to “innocent” learners may encourage learners to be sexually active. Sarma et al. (2015) argue that well-trained teachers use a group discussion method and group tasks to teach sexuality education. This allows learners to easily discuss sensitive issues among themselves, which enables them to benefit from the lessons equally.

Continuous professional training, mentoring, and integrating Sexuality Education pedagogy into teachers’ training are suggested strategies identified by this study for enhancing Sexuality Education teachers’ skills. Several studies agree that these strategies will help teachers to utilise participatory methods for teaching Sexuality Education, which will allow more interaction with learners (Riley, 2014; Sarma et al., 2013; Wood et al., 2015). The authors further maintain that these strategies will help teachers to improve their knowledge, attitudes, and readiness to teach Sexuality Education, leading to positive sexual health behavioural outcomes among learners.

This study is underpinned by Balm’s Behavioural Change Model. The interpretations of the findings were guided following the stages in the model: Receptiveness, Understanding, Wanting to, Being able to, Doing and Persevering.

**Receptiveness:** The findings indicate that some of the teachers in the research setting perceived Sexuality Education as beneficial, while others considered it to negatively influence learners to engage in sexual activities. The data analysis also suggested that some learners were not receptive to Sexuality Education messages due to certain contextual barriers.

**Understanding:** Teachers’ training, re-training and mentoring are needed to enhance the effective implementation of Sexuality Education in the research setting. The training intervention should aim to develop and deepen teachers’ understanding of Sexuality Education content, philosophy and pedagogy.

**Wanting to:** This study found that educators are willing to change their approaches when adequate support is provided to them. Learners’ acceptance of sexuality education, and improved attitude towards its messages, can be enhanced when the Sexuality Education curriculum is being facilitated by well-trained and well-motivated teachers.

**Being able to:** The findings showed that Sexuality Education teachers in the research setting were limited by their training, which compromises curriculum fidelity. It was also revealed that the school-based Sexuality Education programme will achieve its expected outcomes when facilitated by competent and comfortable teachers. The study findings further highlighted strategies to empower the teachers to improve their pedagogical efficacy. These strategies include training and mentoring.

**Doing:** At this stage, teachers could be motivated to act on newly acquired skills in the classroom when the identified strategies to support them and enhance their skills are implemented. Therefore, the actual attainment of required skills by learners and offering of the Sexuality Education based on the needs of learners at study setting is dependent on the ability of the teachers.

**Persevering:** Generate sustainable support for all relevant stakeholders regarding Sexuality Education teachers. Fostering conducive and supporting learning environments in schools to disseminate contextually relevant, culturally sensitive, scientifically accurate and age appropriate sexuality information to promote and maintain positive sexual and reproductive outcomes among learners.

These stages are dependent on each other and are all important to ensure that the school-based Sexuality Education programme achieved the desired positive behavioural outcomes among learners.

## 5. Limitations

The study was conducted only in one circuit, which is Soutpansberg West Circuit. Though the circuit has both public and private schools, the majority of the participants were from public schools. At the selected schools, the perceptions of Sexuality Education teachers who did not meet the inclusion criteria were left out of this study. The study focused only on the perspectives of educators regarding

sexuality education, while learners' and parental perceptions regarding Sexuality Education were left out. These limitations should be considered when interpreting the findings of this study.

## 6. Recommendations

In order to enhance the effectiveness of Sexuality Education in the research setting, a multi-pronged intervention strategy should be used. The strategy should target capacity building of teachers through training, re-training, mentoring and further studies. In the same vein, Sexuality Education teachers should be provided with relevant teaching resources. The formation of a support network for Sexuality Education teachers in the research setting is suggested. To ensure sustained improvement of the Sexuality Education programme in the school located in the study setting, monitoring and evaluation mechanisms should be put place. Regular multi-stakeholders' engagements should be implemented to address other contextual factors limiting the effectiveness of the Sexuality Education programme and to promote its acceptance in the research setting. Further studies to explore learners' and parental perspectives regarding Sexuality Education in research setting is recommended.

## 7. Conclusion

This study explored and described the perceptions of teachers in the senior phase at Soutpansberg West Circuit regarding Sexuality Education. The teachers in the research setting believed that the Sexuality Education programme is beneficial to the learners. Poorly trained teachers, cultural antecedents and learners' attitude constitute barriers to effective Sexuality Education in the schools located in the research setting. The approaches used by teachers for mediating learning during Sexuality Education lessons in the research setting include lectures, questions and answers, class discussions and targeted individuals. Furthermore, strategies and recommendations to enhance the skills of Sexuality Education teachers were discussed.

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