

# An Exploratory Study into Perceptions of Grade 11 Learners towards School-Based Sex Education

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**Abstract:-** The qualitative study aimed to explore the perceptions of Grade 11 learners towards school-based sex education in Randburg, Johannesburg. A phenomenological design was used and a sample of 5 male and 5 female Grade 11 learners was obtained through snowball sampling. Thematic analysis was used to analyze the data. Findings of the study indicated that while learners believed that sex education in schools was appropriate, it was shallow and needed a more in-depth approach. Learners believed that emotional issues regarding sexual activity needed to be discussed and that LGBTQIA youth should be catered for. 5 recommendations were identified and included an open, honest learning environment; in-depth classes as well as a learner-focused approach to sex education.

**Keywords:-** Sex, school based sex education, LGBTQIA, schools, sexuality.

## I. INTRODUCTION

Sexuality education and research are imperative to young people learning and understanding sexuality (Fields & Tolman, 2006). Schools remain a place where many young people spend majority of their time and so schools have become one of the best places to reach a broad and diverse community of students. School-based sex education legitimizes and recognises sexuality as part of a young person's life, regardless of how they are negotiating the

challenges and promises associated with their sexuality (Fields & Tolman, 2006). The referent adolescent sexual health programs have been a way of combating medical, emotional and physical threats to the well-being of adolescents for a long time and hence, schools have become effective tools used to manage the sexuality of children in an attempt to reduce unwanted consequences such as; teenage pregnancy and sexually transmitted infections (STI's) (McCarty-Caplan, 2013).

The introduction and existence, or lack thereof sex education has been miscellaneously ascribed to increasing rates of teenage pregnancies and sexually transmitted diseases among young people. However, sex education remains a contested issue as there are still anxiety, fears and stigma associated around the discussion about sex and sexuality (Buston, Scott & Wight, 2001). However, Fields & Tolman (2006) assert that 'both research and education also reflect a commitment to learning more about youth and sexuality on many levels, not only about their risk for HIV, sexually transmitted diseases (STD's), and pregnancy, but also about their feelings, perceptions, and needs - including the nature of desire, stigma, agency, identity, and the human right to ask and know about oneself' (p.64).

Sex education is fundamentally comprised of three elements (Buston Scott & Wight, 2001) which form the ABC model of attitude as shown in figure 1 (Jain, 2014).

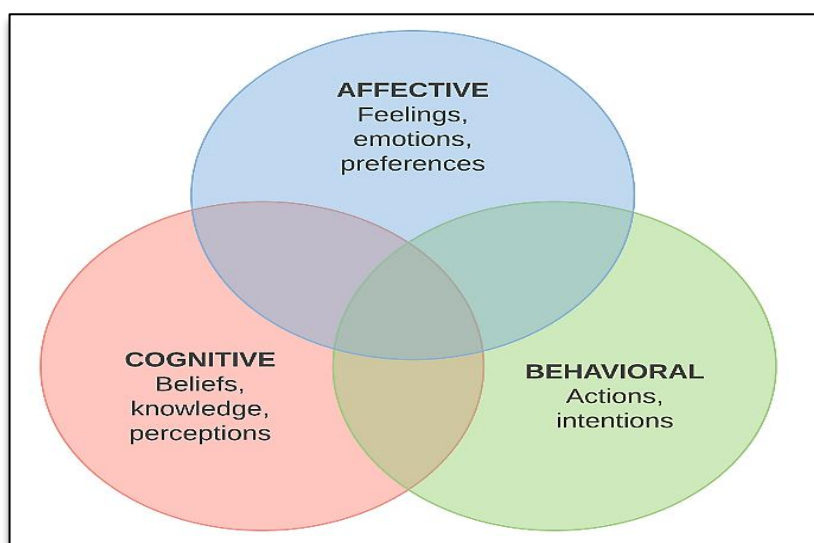


Fig. 1: ABC Model of Attitude (Jain, 2014)

As shown above, these elements are the cognitive, the affective and the behavioural. The cognitive element is related to beliefs, knowledge and perceptions and includes the facts and information about sex education specified to the students. The affective element relates to feelings, emotions and preferences and includes the attitudes and values of students related to sex. Lastly the behavioural aspect includes actions and intentions and thereby attempts to ensure that students have grasped and understood the material and are able to effectively communicate and make responsible decisions with regards to sex (Buston, Scott & Wight, 2001; Jain, 2014).

Sex education was developed to navigate inconsistent fears of sexualised adolescents - with a focus on making young people strict adherents of the established code of sexual morality. It was not developed to create new sexual ideals through abstinence only education. Despite this intention, sex education was initially met with opposition. There was public outcry against discussing sex in a classroom setting. Critics and conservatives argued that even if the intentions were beneficent, any open discussion with adolescents about sex and sexuality would inevitably lead to the pollution of young minds and social degradation; thereby launching campaigns aimed at denouncing premarital sex, homosexuality, liberal sex education and abortion (McCarty-Caplan, 2013).

Abstinence-only education, however, does not reflect the reality of adolescent sexual behaviour. It is often scientifically incorrect and does not effectively reduce adolescent sexual health risk but may rather perpetuate these risks by providing misleading, inaccurate or stigmatizing information (McCarty-Caplan, 2013). Frustration with abstinence-only education paved the way for a more comprehensive approach to sex education, which is referred to as comprehensive sex education.

McCarty-Caplan (2013) state that comprehensive sex education may be defined as “sex education that not only teaches abstinence as the best method for avoiding STD’s and unintended pregnancy but also teaches about the benefits of risk-reduction such as condom and contraception use. Additionally, comprehensive sex education includes education on interpersonal and communication skills, and helps young people explore their own values, goals and options” (p.252).

Comprehensive sex education that includes a more liberal discussion of contraceptives, premarital sexual activity and sexuality is in line with realistic adolescent sexual behaviour and provides more medically accurate information (McCarty-Caplan, 2013). When young people are allowed to assert themselves in dialogue about and reflections on their sexuality, they force educators to respond to subjectivity that adults who typically make decisions about students’ lives in school often avoid (Fields & Tolman, 2006).

#### A. Aim

The study aims to evaluate Grade 11 learners’ perceptions towards school based sex education (SBSE). In doing so, it will allow policy makers and schools to understand learners’ views around what they believe sex education entails, and should include.

#### B. Objectives

The study aimed to determine the perceptions of Grade 11 learners towards school-based sex education in the Randburg area of Johannesburg, South Africa. The specific objectives of this study were:

- To ascertain learners’ understanding of sex education
- To determine what content learners would like to be included in sex education programs.
- To identify how learners evaluate sex education currently being taught.

## II. METHODOLOGY

#### A. Population

The target population for this study consisted of 5 male and 5 female grade 11 learners who have been exposed to school based sex education and who reside in the Randburg area of Johannesburg.

#### B. Sampling and sampling techniques

This study used non-probability methods in the form of snowballing sampling which resulted in a sample of ten participants – five female and five male Grade 11 learners of various races (Black, White, Coloured and Indian) who live in the Randburg area and attend different public schools.

#### C. Data gathering instruments

The study used in depth interviews to collect data. This method allowed for the comprehension of the underlying phenomena by using open-ended questions to understand the perceptions, attitudes, opinions and feelings of the learners and enhanced the exploratory nature of the study. A structured interview schedule was used to keep structure and guide participants. The participants were allowed and encouraged to elaborate on their answers as the questions were open-ended. The interviews were conducted telephonically. Telephonic interviews were used in this study as they were deemed to be the most efficient way to complete the interviews in a timely manner and in a way that was convenient to the learners.

#### D. Procedure

The study made use of telephonic interviews of 5 males and 5 females. Consent forms were emailed to participants beforehand and the interviews commenced only after consent forms, signed by both the parent and the participant, were returned. As previously mentioned, the interviews used a structured interview schedule and questions were sent to participants. Participants were given the option to send individually typed responses, one continuous typed response or a recorded response via voice notes over the WhatsApp social media platform. The interviewer sought clarity and added follow up questions where necessary.

### E. Design

This study was guided by the phenomenological paradigm. Groenewald (2004) describes phenomenology as being concerned with understanding psychological and social events from the perspectives of the individuals involved. The advantages of using a phenomenological approach is that it acquires unique perspectives from participants, that is, it allows the researcher to focus on the ways in which individuals perceive a phenomenon rather than the way it exists in a vacuum. The phenomenological approach was used as it provides an understanding and description of participants' experiences of a phenomenon, which in this case were the perceptions towards school based sex education.

### F. Data analysis

Thematic analysis was used to analyse the data obtained. Miles & Huberman (1994) identified a model for the thematic analysis process which consists of three stages that focus on visualising data through display techniques such as quotations and figures; organising research concepts and building coherent findings.

## III. RESULTS AND DISCUSSION

The results revealed that learners feel that overall, the content in school-based sex education programs is not effectively catering to their needs. Some learners believe that although many topics are being covered, they are being taught in a way that only scratches the surface and does not provide enough information that will address the learners' questions and needs. Other learners believe that only negative aspects are being taught while neglecting to include emotional topics and topics on consent.

### A. Understanding of sex education

Guided by the research topic, it was important to understand the learners' ideas and understanding of sex education. Although answers to this question varied, mostly all focused on the aspects related to the content and aims of sex education.

While most of the responses echoed similar responses, one contrasting response stood out, *"I don't have an understanding of sex education, I come from an Indian family that doesn't talk about it at all."*

From the responses given, it becomes clear that there is not one universal definition that may be used to describe sex education and that understanding is subjective and varies from one individual to another. However, common general themes that can be derived from the definitions given by learners are that sex education includes sexuality, prevention of sex-related diseases and contraception.

### B. Does Sex Education Belong in Schools?

This section illustrates the belief that majority of learners believe that sex education has a place in schools. Reasons for this belief ranged from an inability to discuss sexual issues at home due to it still being considered taboo, to being an additional source of reliable information that is not informed by peers, peer pressure and the internet. While majority of the learners interviewed were in agreement that sex education has

a place in schools, one learner was strongly opposed to the idea that sex education should be taught in schools

### C. Other Sources of Sex Education Compared to School Based Sex Education

It is evident that the internet is the most widely used alternative to school-based sex education, where majority of learners stated they are learning about sex via YouTube and pornography. While exploring this theme it emerged that some learners, sought out information because they believed that school-based education was too formal and that it was difficult to open up during sexual education lessons for various reasons that included, shyness and fear of being negatively labelled. With one student stating *"...None really, it's usually just my friends and then I have to Google some stuff just to make sure. School based education is more formal and we don't always get to be free and ask and understand some stuff. Some people are shy and will never say anything in front of the class or because they're scared of being judged as being stuck up or a hoe...The boys can be a bit silly and immature about it as well sometimes."*

### D. Topics Learners Would Like to be Included

This theme dealt with topics learners would want to be included in sex education programmes. It was clear from the responses that while learners had been presented with topics discussing the physical aspects of sex; such as STI's and the use of contraceptives, emotional aspects had been neglected. It also emerged that the female students believed that not enough time was spent discussing all the options females had with regards to contraception as well as female masturbation.

### E. Inclusivity of All Gender Groups and Sexual Orientations

The beliefs and perceptions communicated within this theme are indicative of the fact that despite slight differences in the reasons why, all participants were unanimous in their views that school-based sex education should be inclusive of the LGBTQIA community. Participants felt that currently sex education curriculums do not cater to this community adding to the stigmatisation and misunderstanding of these minority groups. Further, participants believe that LGBTQIA individuals may have a need for a more specialised curriculum that focuses on the ways in which gay and lesbian groups engage in sexual intercourse, anal sex and the use of lubricants which is not currently addressed, with statements from a student including *"Yes, I think it should. Why do I say it should include all gender groups? Because everyone can get an STD, whether you are gay or straight or lesbian. And also, people have identity crisis...some people they don't even know if they are gay or straight, they don't even know how to have sex and using lubricants and those type of things and also how to have sex properly without dire consequences."*

### F. Evaluation of sex education content

How school-based sex education is evaluated is a central theme and focus of this study. Analysis of the responses given to the question, "How would you evaluate the content being taught?", shows another case where all participants unanimously agree that content currently being taught in SBSE programs is sub-par at best and leaves room for improvement.



#### IV. CONCLUSION

The motivating force behind conducting this exploratory study arose from literature that suggests that adolescents' views tend to be excluded from implementation of SBSE programs, and the belief that a learner-centred approach was the key to unlocking the full potential of SBSE programs by engaging with the youth and including content and information that learners actually want to know.

The study revealed that learners believe that sex education has a place in schools as it offers them a place to learn about sex that has adult perspective and oversight. The need for school-based sex education is noted in Kapinga & Hyera's (2015) study on student perceptions on sex education in Tanzania. They found that education is important to learners over the age of 10 years old.

Learners believe that issues of sex are uncomfortable and awkward to discuss with parents. However, they did not only want to rely on their peers and the internet for sex as the information provided had a higher chance of being inaccurate and so school provided a type of balance in learning for them. Although they (the learners) believed that sex education belonged in school, they identified certain problems in the way that it was being taught. Goldman (2005) found that it was imperative for schools to provide children with an authentic and satisfying learning environment. She further adds that school-based sexuality is extremely relevant and universally applicable.

The study concluded that much can be learned from studying adolescents' perceptions and experiences if adolescents are given an opportunity and platform to express their views, with a learner-centred approach making it easier for learners to internalise the information and messages provided, resulting in lasting behaviour change or modifications and effectively reducing problems associated with sexual risk-taking behaviours and consequences.

#### V. RECOMMENDATIONS

Based on findings of this study, the following policy recommendations have been made:

Policy makers and schools should not view students as passive in the learning process and provide learners with opportunities to express their views in order to implement programs that address learners' needs.

Policy makers and schools should provide full accurate and in-depth information to students regarding all aspects of sex, sexuality and all contraceptive options available to them. In doing so, learners will be given the ability to make informed, responsible decisions about their sexual health.

An open, honest and non-judgemental environment needs to be cultivated in schools in order for students to open up about issues affecting them and to seek clarification on issues they are unsure about.

#### REFERENCES

- [1.] Aggleton, P., Whitty, G., Knight, A., Prayle, D., Warwick, I., & Rivers, K. (1998). Promoting youth's health: the health concerns and needs of youth. *Health Education 6*, 213-219.
- [2.] Ajzen, I., & Fishbein, M. (2005). The influence of attitudes on behaviour. In Albaraccin, D., Johnson, B., & Zanna, M (Eds.), *The handbook of attitudes* (pp 173-221).
- [3.] Alhojailan, M. (2012). Thematic analysis: A critical review of its process and evaluation. *West East Journal of Social Sciences 1(1)*, 39-47.
- [4.] Allen, L. (2005). Say everything: Exploring young people's suggestions for improving sexuality education. *Sex Education*, 389-404.
- [5.] Bandura, A. (1977). *Social Learning Theory*. New York: General Learning Press
- [6.] Bandura, A. (1986). *Social Foundations of Thought and Action: A social cognitive theory*. New Jersey: Prentice-Hall
- [7.] Bandura, A. (1997). *Self-Efficacy: The Exercise of Control*. New York: Freeman .
- [8.] Bay-Cheng, L. (2003). The trouble of teen sex: The construction of adolescent sexuality through school-based sexuality education. *Sex education: Sexuality, Society and Learning 3(1)*, 61-64.
- [9.] Beyers, C. (2011). Sexuality education in South Africa: A sociocultural perspective. *Acta Academia 43(3)*, 192-209.
- [10.] Brasof, M., & Mansfield, K. (2018). Student voice and school leadership: Introduction. *Journal of Ethical Educational Leadership Special Issue 1*, 5-9.
- [11.] Buhi, E.R., & Goodson, P. (2007). Predictors of adolescent sexual behaviour and intention: A theory-guided systematic review. *Journal of Adolescent Health 40*, 4-21.
- [12.] Buston, K., Wight, D., & Scott, S. (2001). Difficulty and Diversity: The context and practice of sex education. *British Journal of Sociology and Education 22(3)*, 353-368 .
- [13.] Carlson, D., McNutty, T., Bellair, P., & Watts, S. (2014). Neighbourhoods and racial/ethnic disparities in adolescent sexual risk behaviour. *Journal of Youth and Adolescence 43(9)*, 1536-1549.
- [14.] Chisholm, L. (2004). Changing class: Education and social change in post-Apartheid South Africa. Cape Town: HSRC Press
- [15.] Creswell, J.W. (2003). *Research design: qualitative, quantitative, and mixed methods approaches*. Thousand Oaks: SAGE Publications.
- [16.] Crosnoe, T., & McNeely, C. (2008). Peer relations, adolescent behaviour, and public health research and practice. *The Journal of Health Promotion and Maintenance*, 71-80.
- [17.] Farooq, M.B., & De Villiers, C. (2017). Telephonic qualitative research interviews, when to consider them and how to do them. *Metitari Accountancy Research 25(2)*, 291-316
- [18.] Drabble, L., Trocki, K.F., Salcedo, B., Walker, P.C., & Korcha, R.A. (2016). Conducting qualitative interviews by telephone: Lessons learned from a

- qualitative study of alcohol use among sexual minority and heterosexual women. *Qualitative Social Work* 15(1), 118-133.
- [19.] Fields, J., & Tolman, D. (2006). Risky Business: Sexuality Education and Research in U.S. Schools. *Sexuality Research and Social Policy* 3(4), 63-76.
- [20.] Fouka, G., & Mantzourou, M. (2011). What are the major ethical issues in conducting research? Is there a conflict between the research ethics and the nature of nursing? . *Health Science Journal* 5(1), 3-14.
- [21.] Francis, D. (2010). Sexuality Education in South Africa: Three essential questions. *International Journal of Educational Development* 30, 314-319.
- [22.] Glanz, K., Rimer, B., & Viswanath, K. (2008). *Health Behaviour and Health Education: Theory, Research, and Practice*. San Francisco: Jossey-Bass.
- [23.] Glover, J., & Macleod, C. (2016). Rolling out comprehensive sexuality education in South Africa: An overview of research conducted on Life Orientation sexuality education. Unpublished policy brief document, Critical Studies in Sexualities and Reproduction, Rhodes University, Grahamstown.
- [24.] Godin, G., & Kok, G. (1996). The Theory of Planned Behaviour: A Review of Its Applications to Health-related Behaviours. *American Journal of Health Promotion* 11(2), 87-98.
- [25.] Goldman, J. (2011). An exploration in health education of an integrated theoretical basis for sexuality education: Pedagogies for young people. *Health Education Research* 26(3), 526-541.
- [26.] Groenewald, T. (2004). A phenomenological research design illustrated. *International journal of Qualitative methods* (3)1, 42-55.
- [27.] Grusec, J. (1992). Social Learning Theory and Developmental Psychology: The Legacies of Robert Sears and Albert Bandura. *Developmental Psychology* 28(5), 776-786.
- [28.] Hale, J., Householder, B., & Greene, K. (2003). The Theory of Reasoned Action. *The Persuasion Handbook: Developments in Theory and Practice*, 259-286.
- [29.] Halx, M., Mansfield, K., & Welton, A. (2018). Listening to student voice: toward a more holistic approach to school leadership. *Journal of Ethical Educational Leadership Special Issue* 1, 10-27.
- [30.] Hasbullah, N., Mahajar, A., & Salleh, M. (2014). A conceptual framework of extending the Theory of Planned Behaviour: The role of service quality and trust in the consumer cooperatives. *International Journal of Business and Social Science* 5(12), 142-148.
- [31.] Hogben, M., & Byrne, D. (1998). Using social learning theory to explain individual differences in human sexuality . *The Journal of Sex Research* 35(1), 58-71.
- [32.] Hosek, S., Celum, C., Wilson, C., Kapogiannis, B., Delany-Moretlwe, S., & Bekker, L.G. (2016). Preventing HIV among adolescents with oral PrEP: observations and challenges in the United States and South Africa. *Journal of the International AIDS Society* 19(6).
- [33.] Jemmott, L.S. & Jemmott, J.B. (2007). Applying the theory of reasoned action to HIV risk reduction behavioural intentions. In Ajzen, I, Albarracin, D & Hornik, R. (Eds.), *Prediction and change of health behaviour: Applying the reasoned action approach*. 243-263. New Jersey. Lawrence Erlbaum Associates, Inc.
- [34.] Joniak, L. (2002). The qualitative paradigm: An overview of some basic concepts, assumptions and theories of qualitative research.
- [35.] Kirby, D. (2003). The Impact of Schools and School Programs Upon Adolescent Sexual Behaviour . *The Journal of Sex Research* 39(1), 27-33.
- [36.] Kohler, P., Manhart, L., & William, L. (2008). Abstinence-only and comprehensive sex education and the initiation of sexual activity and teen pregnancy . *Journal of Adolescent health* 42, 344-351.
- [37.] Kolb, B. (2012). *Marketing research: a practical approach*. London: Sage Publications.
- [38.] Leung, H., Shek, D., & Shek, E. (2019). Development of contextually relevant sexuality education: Lessons from a comprehensive review of adolescent sexuality education across cultures. *International Journal of Environmental Research and Public Health* 16(4), 621.
- [39.] Luszczynska, A., & Schwarzer, R. (2005). The Role of Self-Efficacy in Health Self-Regulation. In Greve, W., Rothermund, K., & Wentura, D. (Eds.) *The adaptive self: Personal continuity and intentional self-development*. 137-152. Ohio. Hogrefe & Huber Publishers.
- [40.] Maramwidze-Merrison, E. (2016). Innovative Methodologies in Qualitative Research: Social media window for accessing organisational elites for interviews. *The Electronic Journal of Business Research Methods* 14(2), 157-167.
- [41.] McCarty-Kaplan, D. (2013). Schools, Sex Education , and Support for Sexual Minorities: Exploring Historic Marginalization and Future Potential . *American Journal of Sexuality Education* 8, 245-272.
- [42.] Montano, D.E., & Kasprzyk, P. (2008). Theory of reasoned action, Theory of planned behaviour and the integrated behaviour model. In Glanz, K., Rimer, B., & Viswanath, K. (2008). *Health Behaviour and Health Education: Theory, Research, and Practice*. San Francisco: Jossey-Bass.
- [43.] Papathanasiou, I., & Lahana, E. (2007). Adolescence, Sexuality and Sexual Education. *Health Science Journal* 1, 1-8.
- [44.] Prinsloo, E. (2003). Challenges to the provision of schooling in South Africa. In Van Wyk, J.N., & Lemmer, E.M. *Transforming education: The South African experience*. New York: Nova Science Publishers, Inc.
- [45.] Prinsloo, E. (2007). Implementation of life orientation programmes in the new curriculum in South African schools: perceptions of principals and life orientation teachers. *South African Journal of Education* 27(1) , 155-170.
- [46.] Rahman, S. (2017). The advantages and disadvantages of using qualitative and quantitative approaches and methods in language "testing and assessment" research

- : A literature review. *Journal of Education and Learning* 6(1), 102-112.
- [47.] Rooth, E. (2005). *An investigation of the status and practice of Life Orientation in South African schools*. (Unpublished doctoral dissertation, University of the Western Cape). Retrieved from <https://hdl.handle.net/11394/1838>.
- [48.] Rosenstock, I., Stretcher, V., & Becker, M. (1988). Social learning theory and the health behaviour model. *Health Education Quarterly* 15(2), 175-183.
- [49.] Rye, B., Fisher, W., & Fisher, J. (2001). The Theory of Planned Behaviour and Safer Sex Behaviours of Gay Men. *AIDS and Behaviour* 5(4), 307-317.
- [50.] Setia, M. (2016). Methodology series module 3: Cross Sectional Studies. *Indian Journal of Dermatology* 61(3), 261-264
- [51.] Shefer, T., Kruger, M.L., Macleod, C., Baxen, J., & Vincent, L. (2015). '...a huge monster that should be feared and not done': Lessons learned in sexuality education classes in South Africa. *African Safety Promotion Journal* 13(1), 71-87.
- [52.] South African Department of Education. (2003). National Curriculum Statement Grades 10-12 Life Orientation. Pretoria: Government Printer
- [53.] Tulipa, D., & Muljani, N. (2015). The Country of Origin and Brand Image Effect on Purchase Intention of Smartphone in Surabaya-Indonesia. *Mediterranean Journal of Social Sciences* 6(5), 64-70.
- [54.] Tulloch, T., & Kaufman, M. (2013). Adolescent Sexuality. *Pediatrics in Review* 34(1), 29-37.
- [55.] Unis, D.B., & Sallstrom, C. (2019). Adolescents' conceptions of learning and education about sex and relationships. *American Journal of Sexuality Education*, DOI: 10.1080/15546128.2019.1617816.
- [56.] Waites, M. (2005). *The age of consent: Young people, sexuality and citizenship*. Hampshire: Palgrave Macmillan.
- [57.] Wagner, C., Kawulich, B., & Garner, M. (2012). *Doing social research: a global context*. New York: McGraw-Hill Higher Education
- [58.] Watts, G., & Nagy, S. (2000). Sociodemographic Factors, Attitudes and Expectations Towards Adolescent Coitus. *American Journal of Health Behaviour* 24(4), 309-317.
- [59.] Wiid, J., & Diggins, C. (2013). *Marketing Research*. South Africa: Juta & Co.
- [60.] Wilson, C. (2015). *Adolescent Sexual Risk Reduction and the Theory of Planned Behaviour: Moderation Effects and the role of Previous Experience* (Masters dissertation, Georgia State University). Retrieved from [https://www.scholarworks.gsu.edu/psych\\_theses/144](https://www.scholarworks.gsu.edu/psych_theses/144).