

Research Article



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Teachers' Perception of Sex Education in Primary Schools

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With a declining average age of reproductive fertility, a significant proportion of children experience signs of puberty in primary school. Moreover, child sex abuse is considerably prevalent among primary school students. Therefore, sex education in primary school is imperative for the well-being of students. This article describes the results of a study among primary school teachers about their perception of sex education at the primary level. This study adopted a descriptive quantitative design. Data collection was from the randomly selected primary school teachers in the Beluvai village of Karnataka, India. Their perceptions of the needs, barriers and benefits of sex education were measured using a questionnaire developed by the researchers. The sample size for this study was 60, including males and females. Data analysis of this study was in SPSS, which proved the positive attitude of teachers towards sex education, although some of their views varied with their age group. However, this study proved that teachers' unwillingness is the major obstacle to sex education at the primary level. Therefore, this article recommends adequate teacher training and support for the effective implementation of sex education in primary schools in India.

INTRODUCTION

School-based sex education (SSE) is crucial in ensuring the sexual health and well-being of the young generation (Goldfarb Lieberman, 2021). Generally, it is a comprehensive educational program that equips students with knowledge and skills related to human sexuality and sexual health. SSE currently has a broader scope that sets more goals than preventing unintended pregnancy and sexually transmitted diseases (STDs) (Kantor *et al.*, 2021). These goals include the appreciation of sexual diversity, the development of healthy relationships, improved social/emotional learning, the prevention of child sex abuse, dating and intimate partner violence, and increased media literacy (Goldfarb Lieberman, 2021).

Although much academic literature uses sex and sexuality education interchangeably, the latter is broader than the former when considered separately. Sex education instructs on sexual anatomy, sexual activity, reproduction, reproductive health, reproductive rights and responsibilities, abstinence and birth control, and emotional relations. In comparison, sexuality education incorporates different sexual preferences, potentially shaped by cultural values, religion, history, family tradition,

parenthood and community. It discusses human feelings and attractions towards the opposite or same sex. United Nations Educational, Scientific and Cultural Organization (UNESCO) states that 'comprehensive sexuality education (CSE) is a curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realise their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives' (UNESCO, 2018, p. 16). Against the context of this study, it used the term SSE, which includes all objectives explained above and applies to primary school children.

SSE in primary school is scaffolded and extended; substantial evidence supports SSE beginning in primary school (Goldfarb Lieberman, 2021). Children learn about appropriate and inappropriate touch and how to respond if they experience sexual abuse (Baker *et al.*, 2012). SSE for young children also promotes parental involvement (Wurtele and Kenny, 2010) and social-emotional outcomes

related to personal safety in children (Topping and Barron, 2009). Children learn to appreciate and accept sexual and gender diversity with the SSE intervention (Ryan *et al.*, 2013). Moreover, SSE helps children develop media literacy to counteract the sexual narratives they encounter through media outlets (Robinson *et al.*, 2017).

However, the content of sex education varies depending on the country, region and school policies. SSE can be controversial, and different groups may hold different views about what topics should be covered, how they should be taught and by whom (Robinson *et al.*, 2017). Some argue that SSE should be comprehensive, age-appropriate and evidence-based to ensure students have accurate information to make informed decisions about their sexual health. Others say that sex education should leave to parents or that it may encourage promiscuity. Due to the existence of the second group, primary school teachers fear that parents may reject SSE (Plaza-del-Pino *et al.*, 2021). In addition, a lack of training challenges them in delivering SSE (Plaza-del-Pino *et al.*, 2021).

Despite the controversial views on the content of SSE, it stays inevitable to promote sexual health among young people. Without a formal SSE, parents and teachers may adopt culturally formed puritanical and deceptive tactics to discourage adolescents from doing anything about the sexual urges activated by developing hormones. SSE

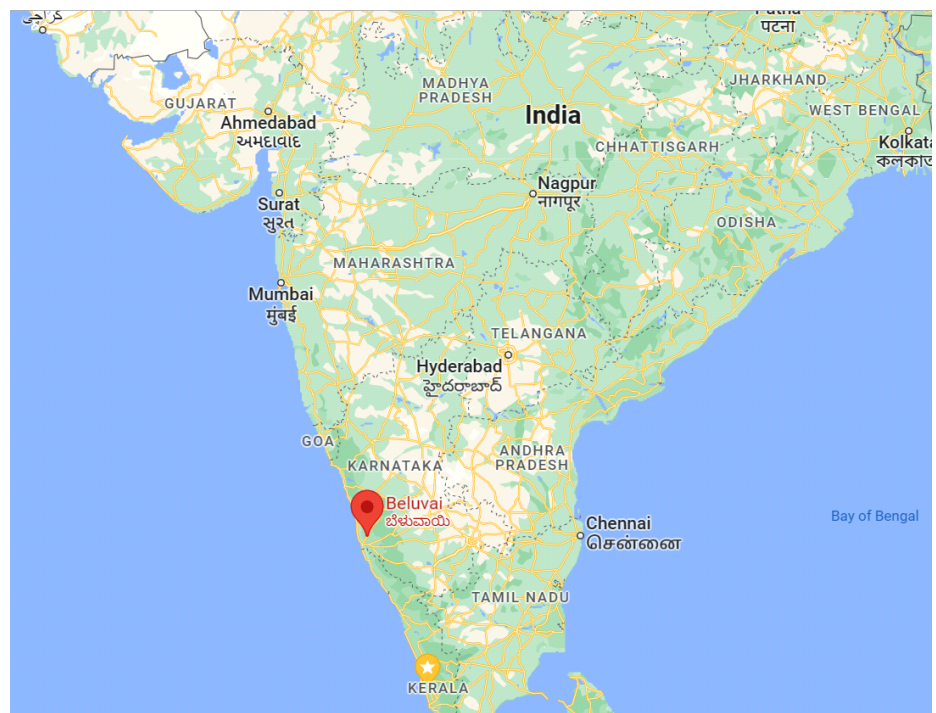
goes beyond abstinence, contraception and STDs (Bittner, 2012). It outlines instructions from trained professionals that share practical information on sex, including the social, emotional and relational aspects of sex, covering diverse sexual behaviours and identities from the primary school level onwards (Astle *et al.*, 2021). However, Children's sex education is a complex issue in any culture and is always controversial (Abolghasemi *et al.*, 2010). Against this background, this study explored teachers perceptions of SSE in primary schools in rural Karnataka, India.

METHOD

This study adopted a descriptive quantitative research design to explore the views of teachers on the content and implementation of sex education in the lower and upper primary schools in the rural area of Karnataka.

From the 31 districts of Karnataka, purposively selected Dakshina Kannada the district with the highest literacy rate (Census, 2011). As per Census (2011), 52.33% of the total population in Dakshina Kannada was rural population (Figure 1). Therefore, this study opted for rural areas of the district. Mangalore Taluka was selected among the five Talukas in the district, considering the highest literacy rate again. Further, from 74 Gram panchayats in Mangalore Taluka, Beluvai was selected using the lottery method and 84 primary school teachers were randomly

Figure 1: Geographical Location of Beluvai Village, Karnataka, India
Source: Beluvai - Google Maps



selected from the total 107 in Beluvai Gram panchayat. The researcher developed a questionnaire to assess the opinion of the participants on the needs, effects and challenges of SSE. It also incorporated questions to understand the appropriate contents for SSE. Besides, the tool included queries to measure the sociodemographic profile of participants. The tool was piloted with five teachers. After ensuring reliability, it was distributed to all the participants selected. The researcher received 60 duly filled questionnaires for analysis. The data were analysed using SPSS and reported.

RESULTS

Table 1 shows the sociodemographic profile of the respondents.

Is Sex Education Needed at the Primary School Level?

Most teachers (91.67%) opined that SSE is required at the primary level. However, 5% of the participants had no opinion, while a negligible 3.33% suggested excluding SSE from the curriculum.

Challenges for Sex Education at the Primary Level

Obstacles to implementing sex education in primary schools in Karnataka explored in this study were teachers' unwillingness, cultural and religious barriers, lack of parental support and lack of community acceptance. The majority of the participants cited teachers' unwillingness (23.33%) as the main reason. According to 20% of the participants, lack of parental support is the primary reason preventing the implementation of SSE at the primary level.

Table 1: Sociodemographic Profile of Respondents

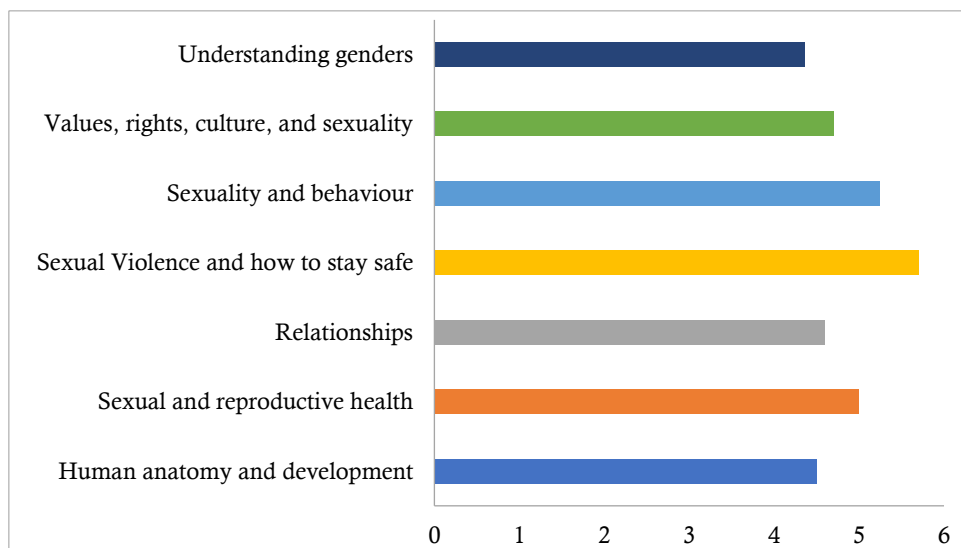
Variable		Number of respondents	Percentage (%)
Age	1828 years	23	38.41
	2838 years	15	25.05
	3848 years	14	23.38
	48-58 years	8	13.36
Sex	Male	20	33.4
	Female	40	66.6
Work experience	0-5 years	31	52
	5-10 years	11	18
	10-15 years	9	15
	15-20 years	1	2
	20-25 years	8	13
School type	Lower primary	25	41.67
	Upper primary	35	58.33

Cultural and religious barriers and the lack of acceptance for SSE in the community were the prime barriers in the view of 16.67% of participants. However, five of them believed that there were no barriers to SSE.

Content of SSE

This study measured the respondents perception of the content of sex education at the primary school level. Different aspects of sex education included in this study were human anatomy and development, sexual and reproductive health, sexual violence and how to stay safe, sexuality and behaviour, relationships, values, rights, culture, and sexuality, and understanding genders. Figure 2 shows the mean score obtained for each topic out of six.

Figure 2: Content of Sex Education in Primary School



All topics obtained a mean score above 4. However, sexual violence and how to stay safe were the content that scored highest, followed by sexuality and behaviour. Sexual and reproductive health also weighed five out of six.

Mixed-Sex SSE Classrooms

Figure 3 shows the respondents’ opinions on delivering SSE in co-education classrooms. The percentage of male teachers who supported it was more than female teachers. However, female respondents stood for the occasional separation of girls and boys for SSE were more than male respondents.

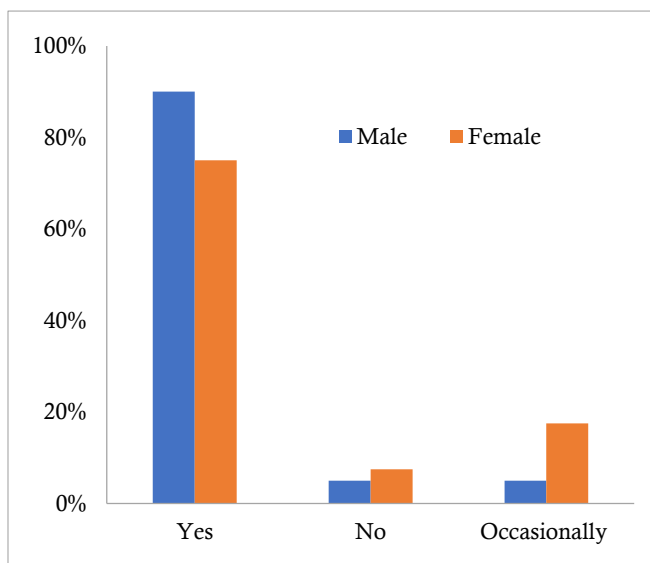


Figure 3: Opinion on Mixed-Sex SSE

Benefits of SSE

The benefits of SSE were measured using a six-item six-point Likert scale. The six statements included were (a) Helps children understand themselves biologically, (b) Empowers children to speak up if someone violates the sexual boundaries, (c) Reduces sexual abuse cases, (d) Promotes sexual health, (e) Enhances interpersonal relationships, (f) Enables children to counteract sexual narratives by media. Figure 4 shows the average score obtained for each statement.

Hypotheses Testing

This study statistically tested if primary school teachers’ perceptions of the effect of SSE vary with their age. There were four age groups of respondents; 18–18, 28–38, 38–48 and 48–58. Hypotheses setting and testing were between these age groups of respondents. The null hypotheses set are below:

H(0) 1: Teachers’ age does not affect their perceptions of E1; E1–Helps children understand themselves biologically.

H(0) 2: Teachers’ age does not affect their perceptions of E2; E2–Empower children to speak up if someone violates sexual boundaries.

H(0) 3: Teachers’ age does not affect their perceptions of E3; E3–Reduces sexual abuse cases.

H(0) 4: Teachers’ age does not affect their perceptions of E4; E4–Promotes sexual health.

Figure 4: Benefits of SSE

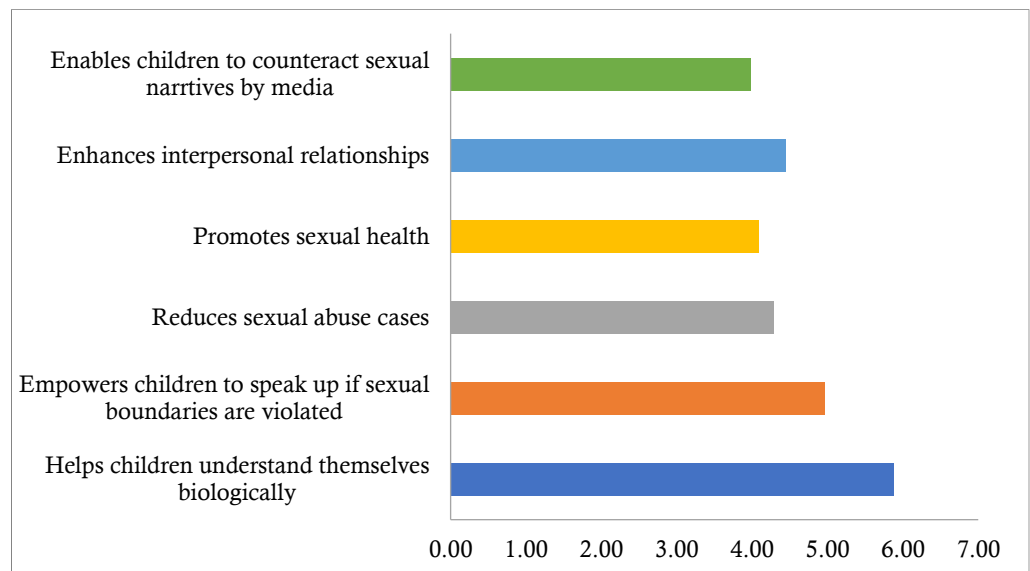


Table 2: One-Way ANOVA (Between Age Groups) Test Result

Effects of SSE	Sum of squares	df	Mean square	F	Sig.
Helps children understand themselves biologically	0.661	3	0.220	2.233	0.094
Empowers children to speak up if someone violates the sexual boundaries	2.137	3	0.712	1.676	0.183
Reduces sexual abuse cases	4.043	3	1.348	5.337	0.003*
Promotes sexual health	7.813	3	2.604	21.542	0.000*
Enhances interpersonal relationships	7.660	3	2.553	19.884	0.000*
Enables children to counteract sexual narratives by media	0.050	3	0.017	1.000	0.400
Total Effect	16.933	3	5.644	6.488	0.001*

*Significance level ≤ 0.05

H(0) 5: Teachers' age does not affect their perceptions of E5; E5–Enhances interpersonal relationships.

H(0) 6: Teachers' age does not affect their perceptions of E6; E6–Enables children to counteract sexual narratives by media.

H(0) 7: Teachers' age does not affect their perceptions of the total effect of SSE.

To test these hypotheses, we used One Way ANOVA in SPSS. Table 2 shows the test results.

Based on the above results, this study accepted H(0) 1, H(0) 2 and H(0) 6, and rejected H (0) 3, H(0) 4, H(0) 5 and H(0) 7. It confirmed that the perceptions of E3, E4, E5 and the total effect of SSE vary with the age of the respondents.

DISCUSSION

'Learning about sex is a core part of school life' (Blake, 2008, p. 34). Children are maturing earlier than previous generations. This declining average age of reproductive fertility means that a significant proportion of children experience signs of puberty in primary school. Therefore, children must have the knowledge and mental readiness to cope with changes to avoid unnecessary anxiety and minimise risk until appropriate psychosocial maturity is achieved (Goldman, 2010). Although more than 90% of participants viewed SSE as an essential subject in primary schools, they perceived teachers' unwillingness to teach SSE as the major obstacle. It resonated with the lack of interest in the topic and inadequate teacher training that hindered SSE in Spain (Martínez *et al.*, 2012). Similarly, Australian primary teachers found SSE a sensitive topic and expressed low confidence in delivering SSE (Duffy *et al.*, 2013). This situation entails the professional development

of teachers. Appropriate teacher training for sex education can facilitate SSE and enhance its effectiveness.

Additionally, social, cultural and religious barriers must be overcome to gain parental and community support for SSE. Therefore, it is imperative to educate the public about the need for SSE to ensure quality sex education in schools (Nadeem *et al.*, 2021). Moreover, well-structured curricula and supportive materials are essential for SSE. With commensurate weightage to the contents of the SSE rated in this study, the concerned professionals must develop a bespoke syllabus for sex education at the primary school level, which is contextually relevant (Leung *et al.*, 2019). Although the majority of respondents in this study supported SSE in mixed-sex classrooms, some suggested separating boys and girls to discuss topics they considered too sensitive. The comprehensive benefits of SSE have been demonstrated in numerous studies noted in the literature (Goldfarb Lieberman, 2021). The results of this study confirm those results, as the respondents rated the listed benefits as high, although their views varied according to their age groups. Therefore, this article recommends SSE in primary schools in India with a culturally relevant and age-appropriate syllabus and adequate teacher training and monitoring system.

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