



USAID SOUTH AFRICA SCHOOL-BASED SEXUALITY AND HIV PREVENTION EDUCATION ACTIVITY

LEARNER RECEPTIVENESS TO COMPREHENSIVE SEXUALITY EDUCATION. ISSUE BRIEF I

September 1, 2021

Contract Number: AID-674-C-15-00002
EDUCATION DEVELOPMENT CENTER (EDC)

Contract period: January 18, 2015 – December 31, 2021

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This report is made possible by the generous support of the American People through the United States Agency for International Development (USAID). The contents of this report are the sole responsibility of HEARD and do not necessarily reflect the views of USAID or the United States Government.

Comprehensive sexuality education in schools

In South Africa, adolescent girls are at high risk of HIV, sexually transmitted diseases, unwanted teenage pregnancy, and gender-based violence. Factors contributing to HIV and AIDS vulnerability, particularly in South Africa among young women are vast and interconnected, calling for multi-layered interventions. School-based interventions are one of several interventions that have the potential to alleviate the high HIV rates and unwanted teenage pregnancies. Comprehensive Sexuality Education (CSE) in schools can contribute to delayed initiation of sexual intercourse; decreased frequency of sexual intercourse; decreased unintended pregnancy; decreased number of sexual partners; reduced STIs; and reduced risk-taking: increased use of condoms and contraceptives.

Scripted Lessons Plans

Scripted Lesson Plans (SLPs) is a DBE initiative aimed at assisting educators to deliver Comprehensive Sexuality Education (CSE) to learners. The SLP packages cover the intermediate phase (grades 4-6), senior phase (grades 7-9), and the FET phase (Grades 10-12). The SLP's include carefully designed lessons, activities, and assessment tasks aimed at facilitating learners understanding of sexuality, sex, body developments, behaviour changes and how to lead safe and healthy lifestyles. Though there are studies that highlight insights from several stakeholders¹, including educators and parents' perceptions of CSE², there is

limited evidence on learner perspectives and perceptions of CSE.

Purpose of this brief

To understand learner perceptions and attitudes towards CSE, in terms of content and pedagogy, in the LO class, and determine whether learners are confident to apply learnings in their daily lives.

Classroom survey

Education Development Centre (EDC), through PEPFAR's DREAMS program is giving technical support to DBE as it rolls out CSE in the classroom. Dreams District Managers assisted in identifying and facilitating access to schools that meet recruitment criteria i.e. schools where SLPs have been implemented for a minimum of 3 years, with operating Learner Support Agents. The data was collected from three schools in Mpumalanga (Bohlabela district). This assessment only involved grade 10 and grade 11 learners on the assumption they have been exposed to senior phase (grade 7—9) SLPs. A total of 255 adolescent girls across the 3 schools completed a paper-based self-administered survey. Non random sampling was used to select the participants therefore any conclusions drawn cannot be generalised. The survey had 30 close-ended questions and focused on socio-demographics, experience of LO and attendance of LO classes using SLPs, attitudes towards SLPs, sexual behaviour intentions and gender norms. The survey was completed confidentially with no way to trace the survey responses back to the adolescent girls. This was done to ensure that responses were not purely due to social desirability bias

¹ Chawhanda, C., et al. (2021). Comprehensive sexuality education in six Southern African Countries: Perspectives from learners and teachers. *African Journal of Reproductive Health*, 25(3).

² Wekesah, F. M., Nyakangi, V., Onguss, M., Njagi, J., & Bangha, M. (2019). *Comprehensive Sexuality Education in Sub-Saharan Africa*. African Population and Health Research Center.

and to adhere to ethical standards. The paper surveys were sent to HEARD’s offices and entered into the RedCap database and automatically exported from RedCap into IBM SPSS version 26 software. The data in SPSS were double-checked against the paper surveys to ensure the quality of the data entry. The descriptive statistics were computed in SPSS.

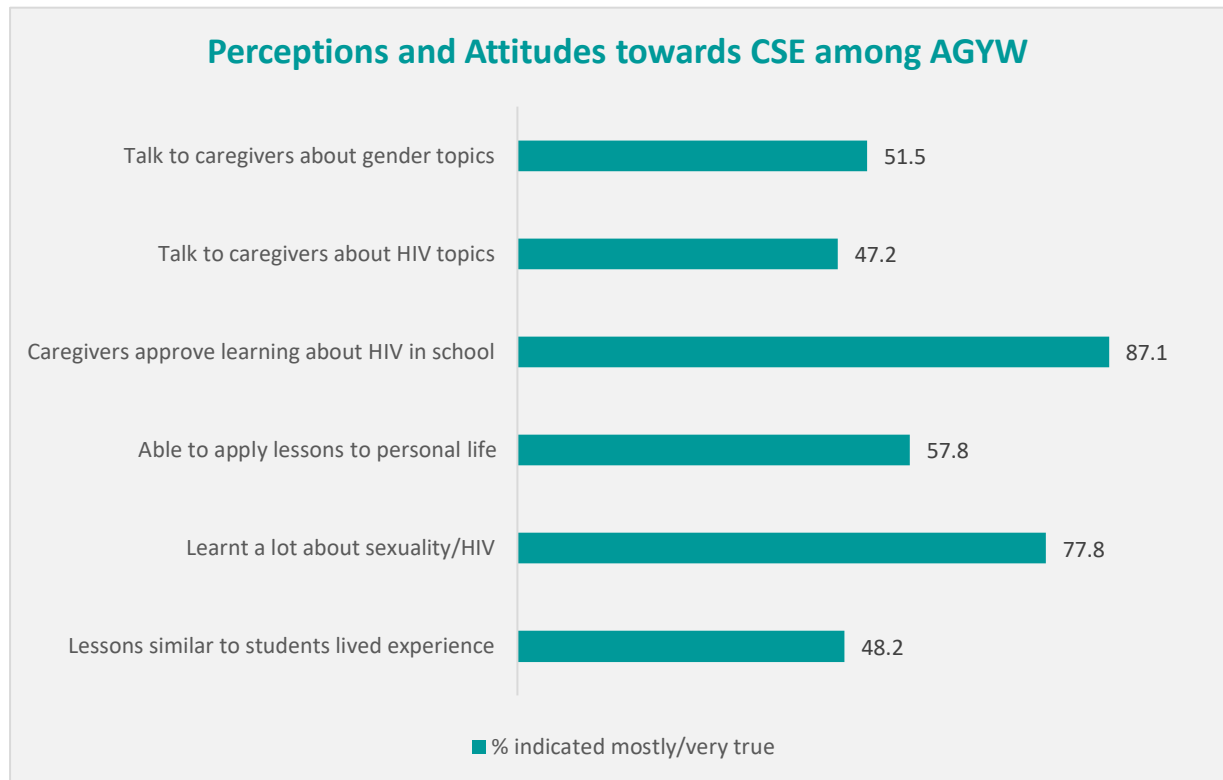
Demographics

The survey was administered to 253 adolescent girls in three schools in

The vast majority (77.8%) of adolescent girls indicated that learnt a lot about sexuality and HIV related topics during their CSE lessons. A small proportion (5.6%) felt that they hadn’t acquired any additional knowledge on sexuality or HIV from their CSE lessons (data not shown here).

Application of lessons learnt

Just over two-thirds (57.8%) of adolescent girls surveyed indicated that they could apply the lessons they have learnt during sexuality



Mpumalanga. The mean age for this group of learners was 15.7 years old (SD: 1.1) and the median is 16 years old. Just over half (53.8%) of them are in grade 10 and the rest are in grade 11. Just over a quarter (26.6%) had ever had sex. Approximately, 15.1% of girls had been absent from school in the previous 12 months.

Perceived similarity to lived experience

Nearly, half (48.2%) of adolescent girls stated that the material covered was relatable to what they experience in their everyday life. Nearly a quarter (22.1%) suggested that the material bore no practical use to their everyday life.

Perceptions on knowledge acquisition

education in their lives.

Caregiver’s opinion on CSE

The vast majority (87.1%) of the adolescent girls indicated that their caregivers/parents thought it was a good idea that they were exposed to CSE in school. Few (4.0%) indicated that their parents or guardians were not supportive of CSE lessons.

Discussion on CSE between caregiver and adolescent

Approximately half (47.2%) of adolescent girls indicated that they were able to discuss HIV related topics with their caregivers. More of the girls (51.5%) indicated that they

engaged with their caregivers about sexuality topics which had been discussed during CSE classes at school.

Strengthening CSE

The following conclusions can be drawn from these data and may assist in strengthening CSE in schools:

- Less than half of adolescent girls felt the topics were relatable. Some critics have argued, “the subject is sometimes perceived as detached from learners’ life worlds, experiences, interests and concerns”³⁴. This detachment may be due to the pedagogy (way it is delivered) employed by educators rather than the content. The adolescent girls still largely approve of the content and indicated they learnt a lot. Therefore, it may be the manner of delivery that is failing to connect with the learners. The department should make sure that the LO educators follows the guidelines on how to deliver sensitive content. This should be investigated by the subject heads for LO with a specific focus on adolescent girls experience of sexuality and HIV topics.
- There are concerns that caregivers act as a barrier to the implementation of CSE in schools. Parents and the home environment are instrumental in supporting positive health outcomes for children and young people ⁵. Furthermore, it is important to have congruence in the messaging between the school and the family environment with regards to sexual health to avoid confusion for adolescent girls. Our data highlights that most parents appear to approve adolescents learning about CSE

in school which is a good first step towards aligning parents and the CSE curriculum. misconstrued

- Adolescent girls in our study appear to be able to communicate with their parents about the CSE topics. Although it does appear that the adolescent girls find it slightly easier to talk about gender topics than HIV topics. This should probably be discussed with the learners in class. That the adolescent girls can discuss these topics with their parents is a positive finding as key CSE messages may flow to other household members. Some studies have argued that providing accurate sexual and reproductive health information to adolescents may empower them to become sexual health promoters at home and in their communities⁶.

³ Emmanuel Mayeza & Louise Vincent (2019) Learners’ perspectives on Life Orientation sexuality education in South Africa, *Sex Education*, 19:4, 472-485, DOI: 10.1080/14681811.2018.1560253

⁴ Mthatyana, A., & Vincent, L. (2015). Multiple femininities in a 'single sex' school: re-orienting Life Orientation to learner lifeworlds. *Perspectives in Education*, 33(2), 49-62.

⁵ Spencer, G., Hood, P., Agboola, S., & Pritchard, C. (2018). Parental engagement in school-based health promotion and education. *Health Education*. doi:10.1108/he-03-2018-0016

⁶ Braeken, D., & Cardinal, M. (2008). Comprehensive sexuality education as a means of promoting sexual health. *International Journal of Sexual Health*, 20(1-2), 50-62.