

**Exploring rural parents' attitudes and experiences towards
teaching and learning of the topics of human reproduction in
junior secondary schools: A Namibian case study**

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By

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Declaration

I declare that this thesis is my own work. It has not been submitted before in any other university for a degree or any form of assessment. As per Rhodes University departmental guidelines, all quotations, ideas or words cited in this thesis, have been acknowledged and indicated in the list of references.

Signature: 

Date: 04 April 2017

Dedication

This thesis is dedicated to my children as their inspiration for the future, my grandmother Perpetua Kaelishimwe Shetunyenga, my parents Gerson Kavila and Honorata Ndunga, both of whom among others have been my mentors and teachers who taught me invaluable lessons about life and the love for education.

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Abstract

The Namibian school curriculum mandates that the subject of Life Science should be taught in all schools from grade 8-10. Among the main themes in this subject is Human Biology which covers topics of human reproduction. According to the Junior Secondary Certificate JSC Life Science Examiners' reports (2010–2015), and my personal experience, learners perform poorly in the topics of human reproduction. Many of the parents in Namibian communities are not comfortable talking to their children about their sexuality, and some believe that communication about sexuality could influence adolescents to become more sexually active (Silas, 2015). Yet, there is agreement among educationists that parents' involvement in their children's education has an impact on the mediation of concepts, skills and attitudes.

It is against this backdrop that this study explored rural parents' attitudes and experiences towards teaching and learning of the topics of human reproduction being taught to their children in junior secondary schools (Grade 8-10). This study was informed by Vygotsky's socio-cultural theory with the focus on how adults and peers influence individual learning and how cultural beliefs impact on instruction and learning in science classrooms. The socio-cultural theory was supplemented by the Feminist Standpoint Theory (FST) with the focus on how different knowledge systems and standpoints produced from a specific social community (that is, rural parents) in terms of who to say what and when, to whom regarding sex-related information.

The study was located within the interpretive paradigm. Within an interpretive paradigm, a case study approach was employed. This case study used a mixed method approach, that is, both quantitative and qualitative data were gathered to help understand the subjective nature of human's attitudes and experiences. Data were collected using an administered questionnaire with twenty-two rural parents, workshop observation and semi-structured interviews with four of the twenty-two participated parents. Additionally, data from documents such as textbooks and curriculum documents were used to strengthen the context of this study.

The study provided valuable information regarding issues around discussions about sex education. It revealed that the majority of rural parents regard sexual health education a taboo.

However, the majority are of the supportive attitude towards sexual health education. The study provided some insights on the factors that influence rural parents' attitude and experiences towards sexual health education. It was also found that parent-child communication is an essential skill, which needs to be developed either through parents' workshops or other means to support and empower parents to understand the importance of teaching and learning about sexual health issues. It is also recommended to empower and support parents on how to talk to their children about sexual health issues.

List of Abbreviations and/or Acronyms

AIDS	Acquired Immuno Deficiency Syndrome
CRO	Chief Regional Officer
DNEA	Directorate of National Examinations and Assessments
ESPMLP	Education Sector Policy and Management of Learners Pregnancy
FST	Feminist Standpoint Theory
HIV	Human Immuno-deficiency Virus
JSC	Junior Secondary Certificate
LCE	Learner-Centred Education
MoE	Ministry of Education
P1	Parent one
P2	Parent two
P3	Parent three
P4	Parent four
P1Q1C	Parent one Question one part C
PhD	Doctor of Philosophy
SHE	Sexual Health Education
STDs	Sexually Transmitted Diseases
STI	Sexually Transmitted Infections
TCE	Total Control of Epidemic
USA	United States of America
US	United States
WO	Workshop Observation

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CHAPTER ONE

CONTEXT OF THE STUDY

1.1 Introduction

The main goal of this study was to explore rural parents' attitude and experiences towards teaching and learning of the topics of human reproduction in junior secondary school (Grade 8–10). The study was triggered by the fact that discussions around sex-related matters are regarded as taboo in the *Oshiwambo* culture. Similarly, using vocabulary that is associated with genitals and sex-related matters is considered an insult in *Oshiwambo* culture and in most Namibian communities. Yet, schools in Namibia are expected to implement a curriculum featuring topics that are sensitive and regarded as *taboo* by the same teachers and learners who are from the same or different cultural backgrounds.

It is also revealed during the period of 2010 – 2015 that learners performed poorly in questions on the topics of human reproduction in the Junior Secondary Certificate (JSC) national examinations (Namibia, Directorate of National Examinations and Assessments [DNEA], Ministry of Education [MoE], 2010-2015 *Examiners' reports*). This in fact, is the other important reason that prompted me to engage with this study.

In this chapter, I thus present the context of my study, the research main goal, and the research questions. The chapter also consists of the statement of the problem, significance of the study and the theoretical framework informing this study. The definitions of key concepts that are frequently used in this thesis are also provided. This is followed by a brief discussion of the data gathering techniques used and the outline of the thesis chapters. The chapter ends with some concluding remarks.

1.2 Context of the study

This study explored the attitudes and experiences of rural parents towards teaching and learning of the topics of human reproduction in junior secondary school (Grade 8–10). The *Life Science syllabus Grade 8–10* (Namibia. Ministry of Education [MoE], 2010) consists of, among other themes, health education and human biology (human body). The theme of health education is covered across all grades (8–10) and it focuses mainly on sexual health, sexually transmitted diseases/infections (STDS/I), human immunodeficiency virus (HIV) transmission

and testing. The theme of human biology/human body is covered in Grade 10 and it focuses on among other topics: reproduction, conception, pregnancy and birth, caring for the new-born child, family planning and contraception, chromosomes and variation.

Human reproduction focuses on male and female reproductive systems; male and female sex hormones and their roles (in the development of sexual secondary characteristics and puberty); the menstrual cycle; conception, pregnancy and birth, with a focus on the development of foetus throughout pregnancy and the birth process; caring for the new-born child; family planning and contraception with a focus on methods of contraception and positive and negative implications of abortion; chromosomes and variation and other related topics such as sexually transmitted infections (STIs) (Namibia. MoE, 2010, *Life Science syllabus*).

Sex education is the acquisition of adequate information, forming right attitude and beliefs about sex, sexuality, sexual identity, relationship and intimacy (Salami, 2015). Similarly, Fentahun, Assefa, Alemseged and Ambaw (2012) describe sex education as education about human sexual anatomy, sexual reproduction, sexual intercourse, reproductive health, emotional relations, reproductive rights and responsibilities, abstinence, contraception, family planning, body image, sexual orientation, sexual pleasure, values, decision making, communication, dating, relationships, STIs and how to avoid them, and birth control methods. On the other hand, Silas, (2015) describe sex education as it is about gender, how women and men are alike or different in the way they appear and act, how our bodies differ, changes that we experience when we are growing up, our feelings, our behaviours, our health, how we reproduce and the relationship we have with each other.

Drawing from the above, it is revealing that the contents of sex education is incorporated in the subject Life Science under a theme 'Human Reproduction'. However, it is also incorporated in the subject Integrated Natural Sciences and Health education (Namibia, MoE, 2010, Grade 5–7 natural sciences and health education syllabus), and in Biology (Namibia. MoE, 2009, Grade 11–12 Biology syllabus), with few topics covered in Life Skill, a non-promotional subject (Namibia. MoE, 2008, Grade 8-10 Life skill syllabus. Therefore, in the Namibian context, this study focused on education on human reproduction in the Life Science curriculum specifically. Literature from countries outside Namibia, such as the USA, Canada, England, Nigeria, Botswana, South Africa and Tanzania (and some from Namibia) refer to

sex education or sexual health education and not human reproduction. Thus, in this study, references were made to sex education or sexual health education where necessary.

Studies have been conducted globally and locally to determine the impact of teaching and learning of sex education in schools (Brandenburg, 2015; McCall, 2008; Ngalangi, 2015; Silas, 2015). For example, Brandenburg (2015) talks about public opinion on sex education in Mississippi and McCall (2008) highlighted the importance of teaching sexual health education. In their study conducted in California, Constantine, Jerman and Huang (2007) surveyed parents' preferences and beliefs regarding school based sex education policy and Namisi, Aarø, Kaaya, Kilonzo, Onya and Mathews (2015) researched adolescents' communication with parents, other adult family members and teachers on sexuality in South Africa and Tanzania.

Walker (2004) argued that to successfully implement topics on sex education in schools, parents' roles and skills in providing sex education within the family was crucial. She added that parents' involvement in their children's sex education had an impact on their future in terms of sexual health. Similarly, McCall (2008) argued that the involvement of parents in schools' health promotion programmes has the benefit of enhancing communication between parents and their children.

The social and cultural environment of most African communities regards the discussion, teaching and learning of sex related issues a taboo. This means sex-related issues are ethically and culturally not allowed to be talked about to or spoken about by children. For that reason young people would be seen as disrespectful and disobedient as sex-related issues were regarded as topics for adult discussions only (Eko, Osuchukwu, Osonwa, & Offiong, 2013; Fentahun et al., 2012; Olakunmi & Akintomide, 2010; Silas, 2015; Smith & Harrison, 2013).

I have also observed that few studies have been conducted in Namibia regarding the teaching of the topics on human reproduction. In her study conducted in Namibia, Silas (2015) explored teachers' perceptions and experiences of teaching topics on human reproduction. Some of her findings showed that often teachers were not covering these topics and were uncomfortable talking about these topics due to dominant societal discourses because it is ethically not acceptable to talk openly, particularly to children, about sex-related matters in Namibian communities.

Ngalangi (2015) in his PhD study in Namibia focused on the major discourses shaping perspectives, responses and experiences on the accessibility, availability and distribution of condoms in schools. Both studies reported opposition from parents to sex education with some parents complaining of schools offering topics above learners' age level (referring to topics on human reproduction). In fact, it is well known that the attitudes of some parents in our Namibian communities are that they are not comfortable talking to their children about their sexuality and some believe that this could lead to promiscuity.

In her study conducted in Namibia, Shikesho (2016) explored the Grade 7 Natural Science learners' conceptions and dispositions towards learning of topics on sex education. Her study sought to understand learners' views and possible changes in their attitudes towards learning sex education with an intention to surface the feelings, views and attitudes of learners towards these topics.

Having been in the teaching profession for about 13 years as a Life Science teacher, I find it challenging to teach topics related to human reproduction due to its sensitive nature. This is validated by Ngalangi (2015) who concluded that schools remain difficult spaces not only for mediating discussions of sex and sexuality, but also for providing resources to mitigate sexual risk amongst learners. My learners' lack of openness towards discussing concepts surrounding human reproduction (particularly in the vernacular, *Oshiwambo*) and their attitudes towards learning these topics and concepts has always been a concern. They perceive these topics as taboo from traditional, religious and cultural points of view and this leads to poor performance in understanding the topics related to human reproduction. This poor performance has been confirmed by the Namibian Examiners' reports, over a number of years (2010 – 2015), and this will be further unpacked in Chapter Three of this thesis.

Adding weight to the pool of inspiring experiences with regard to attitudes and discussions around sex-related matters in many of our communities, one of my fellow Rhodes MEd science students had this to share:

With the little we knew about sex when we were young, many of us naturally explored our sexuality. Many girls of our age by then, became victims of teenage pregnancy (like it is commonly said, babies are having babies). Very little about sex related matters we learned from parents (Paulus, personal communication, May 4,

2016).

This suggests the importance of this study to better understand rural parents' attitudes and experiences, factors influencing their attitudes and experiences and how these impact learners' learning of the topics of human reproduction/sex education at *home* and at *school*. In our community, children rarely have access to information with regard to sex education. Parents do not talk to their children about sex, even my parents never talked about sex-related issues to me and my siblings. Sex-related vocabularies are known by parents to be shaming, insulting and sinful. Hence, my personal observation is that one is always judged by the vocabulary he or she uses regarding sex-related words and genitals. Such perceptions may result from strong religious and cultural influences or impact on one's learning of the topics on human reproduction as a learner.

It is against this background that I found a gap in studies on human reproduction or sex education conducted in Namibia, namely, with a direct focus on the *parents'* voices and their attitudes on the teaching and learning of human reproduction. Thus, despite the well-known general anecdotal evidence that many parents are opposed to sex education, a more focused and systematic examination still had to be done. My interest in this study was therefore to explore the attitudes and experiences of rural parents regarding topics on human reproduction being taught to their children in Namibian schools.

1.3 Statement of the problem

There are challenges experienced by some teachers in teaching topics on human reproduction/sex education, and these are characterised by teachers feeling uncomfortable about talking openly about sex-related issues during the teaching and learning process (Silas, 2015). Silas's (2015) findings indicated that the teaching of human reproduction topics needs to be remedied by way of addressing its root causes. What we do not know in the Namibian context though are parents' attitudes and experiences on the teaching and learning of these topics. Hence the interest in finding out if cultural and social factors are in fact obstacles to effective teaching and learning of human reproduction/sex education specifically focusing on the perceptions of rural parents.

Parents have a major role to play regarding their children's learning, and as a child's first source of sexual health learning, this could have an impact or influence on their children's

learning of sex-related topics. Thus, the aim of this study was to find out and understand the influence parents have on children's learning with regard to the teaching and learning of these topics. This study thus sought to better understand the overall nature of the problem from the parents' perspectives.

1.4 Significance of the study

The expected findings of this study might help me and my professional colleagues and policy makers in education better understand rural parents' attitudes and experiences, factors influencing their attitudes and experiences and how this impacts upon learners' learning of the topics on human reproduction/sex education at *home* and at *school*. Learners' attitudes during the teaching and learning process of these topics are a concern, leading to poor performance on the topics on human reproduction. Hence, this study sought to assuage conflict between cultural belief and curriculum expectations. In addition, the study may not only inform me as a Life Science teacher, but it may also inform me in my own capacity as a parent as well.

1.5 Research goal and questions

To answer the question of what do we want the research to do, it is important for the researcher to be very clear on what the purpose of the research is and "a useful way of deciding whether to pursue a particular study is the clarity and ease in which research questions can be conceived and answered" (Cohen et al., 2011, p.111).

1.5.1 Research goal

The main goal of this study was to explore rural parents' attitudes and experiences towards teaching and learning of human reproduction in junior secondary school (Grade 8–10, in Namibia).

1.5.2 Research questions

To achieve the goal highlighted above, the study sought to answer the following questions:

1. What are rural parents' attitudes and experiences towards the teaching and learning of human reproduction at junior secondary school level?
2. What factors influence such rural parents' attitudes and experiences?
3. How can rural parents be supported to understand the importance of teaching

and learning of human reproduction in junior secondary school?

4. What enables or constrains rural parents from understanding the importance of teaching and learning of human reproduction in junior secondary school?

1.6 Theoretical framework

The theoretical framework is formulated to explain, predict, guide and help understand phenomena (Swanson, 2013). It is the structure that holds and supports a theory of a research study at the same time, introduces and describes the theory that explains why the research problem under study exists. Since this study explored rural parents' attitudes and experiences on the topics of human reproduction that are taught to their children, thus, the theoretical framework draws from Vygotsky's (1978) socio-cultural theory as a lens for viewing this phenomenon.

The socio-cultural theory is supplemented by the Feminist Standpoint Theory (FST) which advocates for gender equality and sees gender as an important factor in knowledge construction in a specific social position. Furthermore, the FST claims that women's lives are systematically and structurally different from men's lives and that these differences produce different knowledge. The significance and in-depth discussion of the theoretical frameworks employed are unpacked in detail in Chapter Two of this thesis.

1.7 Data gathering techniques

To gather data for this study, the following data gathering techniques were employed:

- An administered questionnaire;
- Semi-structured interviews; and
- Observations (parents' workshop).

In addition to the administered questionnaire, semi-structured interviews and observations, different policy documents were analysed mainly to strengthen the context of the study. These include *Grade 8–10 Life science syllabus* (Namibia. MoE, 2010), Education Sector Policy and Management of Learner Pregnancy (ESPMLP) (Namibia. MoE, 2012), prescribed Life Science textbooks, and examiners reports of 2010–2015, (Namibia. DNEA, MoE, 2010-2015). To add more value to this study, a parents' workshop was conducted (as an intervention) to empower rural parents on how to communicate to their children regarding

sex related matters.

1.8 Definition of key concepts used in this thesis

The following are the key concepts that are frequently used and referred to, in this study:

Attitude

Pickens (2005, p.44) refers to attitude as “a mind-set or a tendency to act in a particular way due to both an individual’s experience and temperament”. In the context of this study, this refers to rural parents’ ways of thinking or feeling about teaching and learning of sex-related issues in schools in Namibia.

Culture

Culture refers to the ideas, beliefs, values, customs and social behaviours of a particular people or society and that are passed along by communication and imitation from one generation to the next (Nieto, 2000). This refers to how rural parents’ ideas, beliefs, values with regards to the teaching of sexuality are transmitted from generation to generation.

Experience

Experience refers to the skill or knowledge that you get by doing something or the length of time that you have spent doing something and of having things happen to you (Silas, 2015). In the context of this study, it refers to how rural parents have gone through the teaching and learning of sex-related issues and how they are teaching or talking to their children about sexual issues.

Feminist standpoint theory

Feminist standpoint theory is a theory that sees gender as an important factor in knowledge construction in a specific social position. It also claims that women’s lives are systematically and structurally different from men’s lives and that these differences produce different knowledge (Wood, 2009). Thus, in the context of this study, feminist standpoint theory helps to explore the different knowledge produced in a specific social community.

Human reproduction

Human reproduction refers to the process by which new organisms are formed as a result of the combination of an egg and a sperm cell (Chikarango, 2007). In the context of this study

and the Namibian context, human reproduction is the theme in the Life science curriculum that deals with education on human sexual anatomy, birth, caring for the baby and contraception methods.

Sex education

Sex education is the acquisition of adequate information about gender, how women and men are alike or different in the way they appear and act, how our bodies differ, changes that we experience when we are growing up, our feelings, our behaviours, our health, how we reproduce and the relationship we have with each other (Silas, 2015). In the absence of literature specifically on human reproduction which is the focus of this study, references will be made to sex education.

Social discourse

Social discourses refer to interchange of ideas and information (usually verbal) among a group of people associated with one another (Ngalangi, 2015). In the context of this study, it refers to how sex-related information is exchanged between members of the rural community.

Sociocultural theory

Sociocultural theory is a theory that looks at the important contributions that society makes to individual development. It stresses the interaction between developing people and the culture in which they live (Vygotsky, 1978). Thus, in the context of this study, sociocultural theory helped to explain, guide and understand how culture shapes and influences teaching and learning of sex-related matters (topics on human reproduction) both at home and at school.

Taboo

A 'taboo' is something that is prohibited or restricted by a social or religious custom (Silas, 2015). In the context of this study, sex-related issues are generally not talked about to or with children in *Oshiwambo* culture.

1.9 Thesis outline

This study was conducted at one of the constituencies in the Omusati region of Namibia and it consists of six chapters. The following is an overview of the chapters:

Chapter One outlines the background/context of the study. The theoretical frameworks informing this study, the significance of the study, the research goal and questions are highlighted. Lastly, the data gathering techniques and the key concepts frequently appearing in this study are listed.

Chapter Two consists of a brief presentation of the Namibian curriculum and the teaching of sex education. The chapter further viewed literature relevant to the study (parent's attitudes and experiences regarding teaching and learning of the topics on human reproduction in schools) with a focus on parents and sex education, parents' attitudes and experiences, cultural perspective and the teaching of sex related matters and influences of parents' views. Lastly, the theoretical frameworks informing this study are unpacked.

Chapter Three focuses on the research methodology adopted in this study. It provides clarity on the research paradigm, research goal and questions, research site and participants and the data gathering techniques used. An overview of the data analysis, validity, and ethical issues is presented.

Chapter Four, presents data collected for this study, the analysis, as well as the discussion of data.

Lastly, **Chapter Five**, summarises the findings of this study. It presents the recommendations, areas for future studies and the conclusion as well.

1.10 Concluding remarks

In this chapter, the context or background of the study, research goal and questions were presented. The theoretical frameworks and the significance of the study are highlighted, followed by the data gathering techniques and definitions of key concepts used in the study. Lastly, the thesis outline was presented to give the reader an insight into the research. The next chapter presents the literature relevant to this study, and the theoretical frameworks informing this study will be unpacked.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

The main goal of this study was to explore Namibian rural parents' attitudes and experiences towards teaching and learning of the topics on human reproduction in junior secondary school (Grade 8–10). In this chapter I review literature relevant to my study and in relation to rural parents' attitudes and experiences; as well as that related to the teaching and learning of sex-related topics in general. Several studies and arguments are presented on the attitudes and experiences of rural parents on the topics of human reproduction being taught to their children in schools.

Firstly, I discuss the Namibian curriculum and the teaching of sex-related matters with the highlight on the concept of human reproduction. Secondly, there follows a discussion on parents and sex education as well as parents' attitudes and experiences towards teaching and learning of the topics on human reproduction. Thirdly, cultural perspectives on the teaching of sex education or human reproduction are discussed. Furthermore, the influences of parents' attitudes and experiences on the teaching and learning of the topics on human reproduction are highlighted.

Lastly, the theoretical frameworks informing this study are explored followed by concluding remarks. To gain insight into how parents view the teaching and learning of the topics on human reproduction in schools, sociocultural theory was employed, and supplemented by feminist standpoint theory.

2.2 The Namibian curriculum and the teaching of sexual topics

The approach to teaching and learning Science in Namibian schools is based on a model of Learner-Centred Education (LCE) as described in the Ministry's policy documents (Namibia. Ministry of Education [MoE], 2008 *National curriculum for basic education*). The policy document includes curriculum guides and the syllabus. The central idea of teaching and learning in LCE is based on the principle that learners come to school with a wealth of knowledge and social experience gained from their families and communities. Nyambe (2008) argues that learners' knowledge and social experiences are culturally shaped, thus they need to be acknowledged. Oloruntegbe and Ikpe (2010) concur that the ability to

effectively educate future scientists and citizens is predicated in part by how learners relate what they learn in school to their daily lives and how teachers help learners establish such connections during Science teaching and learning. Furthermore, the capacity to make connections in turn may be related to how supportive the cultural variables of parents are in enhancing the school performance of learners and how the activities children engage in at home act to consolidate school learning.

However, Chisholm and Leyendecker (2008) caution that the implementation of LCE has not resulted in significant changes in the classroom both in Namibia and South Africa. They further suggest that the failure of implementation could lie in expectations that education would lead to transformation and capacity. Similarly, Schweisfurth (2011) and Nyambe and Wilmot (2012) concur that there have been tensions between the curriculum formulation and implementation. In essence, their study revealed a weighty body of evidence concerning the nature and implementation of LCE such as problems with the nature of reform and its implementation; barriers of material and human resources; interactions of divergent cultures; and the all-important questions of power and agency in the process.

The Namibian National Curriculum for Basic Education (Namibia. MoE, 2008) mandates that the subject of Life Science should be taught in all schools from Grades 8 to 10. One of the themes featured in Life Science is that of Human Biology (human body), covering topics of human reproduction such as: Reproduction, focusing on the male and female reproductive systems, male and female sex hormones and their roles (in the development of sexual secondary characteristics and puberty), and the menstrual cycle; Conception, Pregnancy and Birth, with a focus on the development of the foetus throughout pregnancy and the birth process; caring for the new-born child; family planning and contraception with a focus on methods of contraception and positive and negative implications of abortion; chromosomes and variation and other related topics such as Sexually Transmitted Infections (STIs) (Namibia. MoE, 2010).

The following are some of the curriculum expectations on human reproduction as outlined in the Life Science syllabus Grade 10. Learners should be able to:

- describe the structure of female and male reproductive systems;
- outline the functions of each system (male and female);
- discuss the effects of testosterone, oestrogen and progesterone in the development of

- sexual characteristics and puberty;
- describe the menstrual cycle and the role of oestrogen and progesterone in the menstrual cycle;
- describe conception and the development of a foetus throughout pregnancy;
- discuss the function of the placenta, amniotic fluid and the uterus in the development of a foetus;
- suggest how the development and health of a foetus are affected by the lifestyle of the expectant mother;
- discuss the process of birth;
- list and discuss the requirements for the healthy development of a baby;
- suggest why a mother should breast-feed her baby;
- discuss the advantages of family planning;
- identify and describe the advantages and disadvantages of different methods of contraception; and
- discuss the positive and negative implications of abortion (Namibia. MoE, 2010, p. 30–31)

These topics are included as necessary elements to gain a full picture of life processes and the achievement of the syllabus' outlined competences. But also, to help mitigate the sex-related challenges of developmental events and changes surrounding puberty, the unfamiliar frequency of unpredictable and 'mysterious' subjective feelings, the emerging sense of identity and the hormone-induced increase in sexual drive, fantasies and impulses that accompany the phenomena of the changes faced by the youth, thus creating awareness of the issues of teenage pregnancy and the prevention of STIs (Namibia. MoE, 2010).

The thinking behind the inclusion of these topics in the school curriculum is that as youths become sexually active, they could end up engaging in risky sexual behaviours, therefore, it is important that they have the necessary knowledge and the skills to protect themselves (Fisher, Telljohann, Price, Dake & Glassman, 2015; MoE, 2008). The consequences of engaging in unpredicted sexual behaviours many greatly impact the health and future wellbeing of teens, emphasizing the need to intervene early with sexuality education (Fisher et al., 2015). It is partly for these reasons that the topics on human reproduction were introduced in school curricula not only in Namibia, but worldwide. However, the topics may impinge on the cultural values of particular communities (Silas, 2015).

2.3 Parents and sex education

Shtarkshall, Santelli and Hirsch (2007) assert that education is an intentional, structured process to impart knowledge and skills and to influence an individual's developmental course. They furthermore argue that literacy encompasses the skills needed to combine

knowledge in a meaningful way, allowing one to express ideas, make decisions and solve problems. To this end, research on sex education suggests that effective programmes should promote sexual literacy (Shtarkshall et al., 2007). Sex education is regarded as a taboo by many communities in Namibia and should not be mentioned in public and particularly not to children (Eko, Osuchukwu, Osonwa, & Offiong, 2013; Fentahun et al., 2012; Olakunmi, & Akintomide, 2010; Silas, 2015; Smith & Harrison, 2013). Parents and the communities in general are recognised by many disciplines as most influential in affecting a given child's behaviour including sexual identity (Nambambi & Mufune, 2011). Correspondingly, Blakey and Frankland (1996) argue that parents are potentially an important source of information and support to their children on sexual issues. Thus, parents play an important role in the promotion of adolescent sexual health (Meschke & Peter, 2014).

Martin and Luke (2010) explored what mothers in the USA teach young children about sexuality and reproduction. The study indicated that mothers talk more to daughters than to sons about romantic relationships, reproductive bodies, and morality, but not about sexual abuse or intercourse or pleasure. It also revealed mixed results regarding mothers' comfort in talking with daughters or sons about sexuality.

Interestingly, many parents in practice feel that they lack the skills and confidence to play a direct role in sex-related matters (Nambambi & Mufune, 2011). To this end, Salami (2015) concurs that the little knowledge of sex education that a teenager is to acquire before marriage is expected to be given by the parent. Shtarkshall et al. (2007) argue that sexual socialisation (the process by which adolescents acquire sexual knowledge and values) of adolescents begins at home, where parents are able to emphasise their most deeply held values.

On the other hand, Bleakley, Hennessy, Fishbein and Jordan (2009) who examined how sources of sexual information are associated with adolescents' behaviour and beliefs on sexual socialization, state that although parents and friends are identified by adolescents as the most common sources of sexual information, the mass media is also recognized as an important contributor to sexual knowledge. Similarly, Ngalangi's (2015) study revealed that parents believed that early sexual involvement by learners did not result from lack of vigilance and control on their part, but rather from exposure to modern mores.

Furthermore, Ngalangi (2015) claimed that social and cultural norms and practices shape people's views, thoughts, beliefs and attitudes as well as their responses to particular discourses resulting in their behaviour being shaped in the process. To this end, he posits that discourse helps to establish social and cultural norms and practices by determining what is considered normal, desirable, and expected amongst people in a particular society. He concludes that people's judgments and values within a specific cultural milieu are taken for granted as natural and unbiased facts of life and universally accepted truths.

2.3.1 Parents' attitudes and experiences regarding teaching and learning of human reproduction/sex education

In their study conducted in New Brunswick, Canada, Weaver, Byers, Sears, Cohen and Randall (2001) indicated that 94% of parents agreed that sexual health education (SHE) should be provided in schools. In contrast, 95% of parents felt that it should be a shared responsibility between school and home. Byers, Sears and Weaver (2008) also explored parents' reports of sexual communication with children from kindergarten to Grade 8 and how they provided sexual health education at home. It emerged in their study that parents who were more supportive of school-based sexual health education provided better quality sexual health education to their children at home, demonstrating the synergy between school-based and home-based sexual health education .

In a similar study, McKay, Byers, Voyer, Humphreys and Markham (2014), examined the opinions and attitudes of 1002 Ontario, Canada parents regarding school-based sexual health education. The majority (87%) of parents strongly agreed or agreed that sexual health education should be provided in school and 84% believed that sexual health education should start by middle school.

Ngalangi's (2015) study which was conducted in Namibia revealed that the majority of parents opposed the idea of making condoms available in schools, advocating abstinence instead. The reasons had to do with various competing and hierarchised discourses operating to shape peoples' beliefs, perspectives and the participants' responses in a highly regulated and surveilled social and cultural context.

Sieswerda and Blekkenhorst (2006) indicate that there is some discrepancy between parents about when and with whom to talk to their children about sexuality. In his view, McCall

(2008) felt that the involvement of parents in schools' health promotion programmes does benefit to enhance communication between parents and their children. Lending support, Nambambi and Mufune (2011) concur that engaging parents in sex education matters has a definite impact of the sexual health of the young.

Despite this opposition from some parents, governments and education policy makers argue that human reproduction or sex education in schools is essential. They believe that it plays a vital role to help prevent and control STIs; assists in promoting family planning; and reduces unplanned teenage pregnancy, sexual abuse and sexual harassment (Namibia. MoE, 2008).

Notwithstanding, parents maintain a restrictive attitude towards sex education, grounded in traditional and religious ideas about sexuality, which leads parents to understand it as a morally and physically dangerous activity (Jerves, López, Castro, Ortiz, Palacios, Rober & Enzlin, 2014). Although parents expressed a willingness to make good quality sex education available to their children, they reported having insufficient personal resources to fulfil that objective. Similarly, McKay et al. (2014) concluded that, despite parents' indication of their willingness to do so, many parents indicated that they were providing little or no sexual health education to their children.

Brandenburg (2015) explored the public opinion on sex education in Mississippi, USA, with some parents disagreeing on having their children taught while some agreed, but felt uninformed about the sex education taught to their children. Interestingly, some parents felt that when the time comes for their children to have a sex education class, they would opt out and teach their children themselves.

In their study conducted in Ethiopia, Fentahun et al. (2012) explored perceptions of parents about school sex education and revealed that parents had favourable attitude towards the importance of sex education. They also agreed that the content of sex education should include abstinence-only and abstinence-plus, based on the mental maturity of students. Additionally, Barr, Moore, Johnson, Forrest and Jordan (2014) explored parental support for earlier sexuality education in the US. Their study revealed that parents expressed supportive views about including sexuality education in school instruction. Moreover, the majority (79.3%) of parents would allow their children to participate in age-appropriate sexuality education.

As indicated earlier, in Namibia and some parts of Africa sex is culturally framed and regarded as taboo. This is exacerbated in part by the fact that many parents did not have sex education when they themselves were young and hence this contributed to their own lack of confidence relating to the subject coupled with the fear that sex education could lead to experimentation and corruption (Nambambi & Mufune, 2011). This is largely because of the cultural construction of sexuality as pertaining to adults and as belonging to the realm of the private. As a result, Nambambi and Mufune (2011) explained that there is a need for parental empowerment in participation and involvement in sex education to enhance competent parental skills, knowledge, sex-related information and interpersonal relationships between parents and their adolescents to enhance open communication. Above all, this will enable parent-child discussion of their problems and sharing their experiences openly.

2.3.2 Cultural perspectives on the teaching of sex education or human reproduction

Culture is defined as beliefs, values, perceptions, norms, actions, artefacts and language shared within a group and passed down to a succeeding generation (Nieto, 2000). Nghipondoka-Lukolo and Charles (2016) accentuate that culture, attitudes, beliefs, values and behaviours that are characteristic of a particular social group can be transmitted from generation to generation, thereby shaping and influencing perceptions and behaviours. Culture can, however, be an obstacle to sexuality education and most parents do not provide sexuality education to their children, because it is considered a cultural taboo for parents to talk to their children about sexuality-related issues (Fitzsimons, 1991; Wight & Obasi, 2003). On the other hand, Chu, Kwan, Reynolds, Mellecker, Tam, Lee, Hong and Leung (2015) argue that traditional values limit discussions about healthy sexual behaviours leading to lack of sex education in the home environment.

According to Nambambi and Mufune (2011), while discussions around sex-related matters are culturally and traditionally seen as a taboo, nowadays they do take place (especially with mothers) around menstruation, pregnancy and HIV/AIDS. However, there is resistance to more specific discussions around sexual intercourse and relationships.

Nambambi and Mufune (2011) concluded that the more educated the mother the easier she finds it to discuss sexual matters with her daughter(s). Nghipondoka-Lukolo and Charles (2016) share the same sentiment that if parents are properly informed on sexuality and

increase their self-awareness, that change may occur and parents may begin to participate in the sexuality education of their children.

Parents' lack of knowledge and proper information on sex education due to cultural inhibition, is evident as they use coined words to refer to sex-related issues and genitals in particular (Ekefre, Ekanem, & Esien, 2014). If young people were told about sex, it was often put in a negative context, for example, that penises bite and premarital sex is lethal (La Font, 2010). As a result children's knowledge about the utility of their sex organs is limited to urination. Ekefre, Ekanem and Esien (2014) and LAfont (2010) further claimed that when the adolescent body begins to experience sexual sensations, the adolescent becomes confused and dares to try use it for sexual activities. Salami (2015) points out that due to cultural and traditional norms most parents find it difficult to engage with or involve their children who are of adolescent age in sex and sexuality education. Furthermore, these cultural and traditional norms are so strong that the children may not know the proper names of their reproductive organs.

2.4 Influences of parents' attitudes and experiences regarding teaching and learning of sex-related matters

In their study conducted in Osun State, Nigeria, Olakunmi and Akintomide (2010) found that the 'culture of silence' associated with sexual communication between parents and adolescents created a communication gap because some topics are regarded as taboo in African cultures. Their study further revealed that parental education levels do not significantly influence parent-child sexual communication. Their study concluded that it was parents' ages which significantly influenced parent-child sexual communication, since young parents communicated about sexual issues more easily than did the older parents.

In a similar study conducted in Namibia, Nambambi and Mufune (2011) examined what was talked about when parents discussed sex with children. The study found that parents and children felt that parental participation and involvement in sexuality education was inadequate; the interpersonal relationships between parents and their children were poor; parental attitudes and behaviour concerning sexuality were negative. Additionally, parents lacked knowledge about sexuality-related issues and cultural beliefs could negatively affect parents' participation in their children's sexuality education. Thus, the above factors resulted

in a lack of confidence, fear, insecurity and uncertainty amongst parents.

Nambambi and Mufune (2011) further claimed that the absence of a link between social support (especially family support) and safe sex largely explained why socially isolated young people have poor sexual health and are eager to formally learn about sex-related issues. Consequently, due to factors such as embarrassment, lack of awareness of what to talk about, lack of confidence, poor communication skills and a lack of tradition for parents talk to children on sex-related issues, that there is parental avoidance of sex education with their children. This is largely because of the cultural construction of sexuality as related to adults only and as belonging to the realm of the private.

Brandenburg (2015, p. 6) suggests that one reason for the high teenage pregnancy among communities with high religiosity is the literal interpretation of some Biblical passages, such as 1 Thessalonians 4:3–4 which says, “For this is the will of God, your sanctification: that you abstain from sexual immorality; that each one of you know how to control his/her own body in holiness and honour”.

In his study conducted in Croatia, Bijelić (2008) explored the tensions between secular and religious discourses regarding the introduction into Croatian schools of a sex education program supported by the Catholic Church. The study revealed that the Church’s teaching on human sexuality and reproduction is unambiguous and is part of Church instruction. Similarly, Ngalangi (2015) concluded that “in highly regulated societies, dominant religious discourses are produced and reproduced in and through existing institutions such as family, church, and schools; highlighting how these serve to normalize beliefs and perspectives” (p. 267).

Bijelić (2008) further argued that the Church advocates the protection of human life from conception and is opposed to abortion. To this end, the programmes the church advocates for, seem to ignore scientific facts and only offer the concepts of love, restraint and faithfulness as per the teaching of the values of Christian ethics. Thus, the church approves of sexual activity but only within heterosexual marriages and is against mechanical or chemical contraceptives (Bijelić, 2008).

Both studies by Bijelić (2008) and Brandenburg (2015) revealed public disagreement on not

letting religious affiliations or strict interpretations of the bible dictate sex education, such that the religious kind of thinking may limit the education of students who do not necessarily agree with biblical standards. However, the dominant discourses shaping communities in which schools find themselves remain inconsistent with school discourses that are shaped by modernist conceptions of childhood and youth (Ngalangi, 2015).

2.5 Theoretical framework

This study explored rural parents' attitudes and experiences on the topics of human reproduction that are taught to their children in schools. In light of the above and the context of this study, we know that there are influences and discourses (Ngalangi, 2015) in the society that may impact the learning on topics on human reproduction. Learners come from homes shaped by culture and religion and this may create a conflict between culture and curriculum expectations. This interplay of social factors which then plays out in the classroom in teachers' and learners' behaviours and learning outcomes seems to be an appropriate fit for the use of Vygotsky's (1978) socio-cultural theory and feminist standpoint theory (FST) as lenses for viewing this phenomenon. These are discussed in detail below.

2.5.1 Sociocultural theory

Vygotsky's (1978) socio-cultural theory views a child as a product of social interaction. The theory suggests that human development results from a dynamic interaction between individuals and society. Through this interaction, children learn gradually and continuously from parents and peers and teachers. Socio-cultural theory focuses not only on how adults and peers influence individual learning, but also on how cultural beliefs and attitudes impact how instructions and learning take place.

Culture and beliefs influences the way individuals learn as illustrated by Vygotsky (1978). Vygotsky believes that learning is a social process; and the origination of human intelligence is the society or culture in which individuals interact and live. Thus, the socio-cultural theory referred to in this study, informed the social interaction between the learners (children) and the community (parents and peers); and the knowledge that is gained at home through this interaction with their elders. In addition, socio-cultural theory incorporates the knowledge parents have gained and what they are passing on to their children.

Lemke (2001) suggests the use of a social cultural perspective because it tells us to do research “to discover the best ways to integrate science teaching that is responsive to different needs with teaching that address the challenges of a heterogeneous and diverse classroom” (p.306). The use of socio-cultural theory in this study suggests giving substantial theoretical weight to the role of culture and social interaction in addressing the problem. Culture plays a vital role as it shapes and influences learning. Language also plays an important role in learning, as it is embedded in culture as a mediating tool and can shape people’s thinking (Leach & Scott, 2003). Lending support, Nelson and Fivush (2004) argue that language is a fundamental social cultural tool used in social interactions.

McLoughlin and Oliver (1998, p. 128) comment that, “In socio cultural theory, the learner is regarded as an apprentice in a culturally defined and socially organized world”. Thus, in the context of this study, I opted to elicit parents’ attitudes and experiences towards teaching and learning of topics on human reproduction in secondary school (Grade 8–10) to determine what influence parents have on their children regarding teaching and learning of sex-related matters.

In this study, the socio-cultural theory helped me to better understand parents’ attitudes and experiences towards the teaching of human reproduction in schools. It also helped me to identify different factors that may influence parents’ perceptions and how cultural norms and conventions of their context and individual backgrounds shape how learners learn topics on human reproduction in schools.

2.5.2 Feminist standpoint theory

The Feminist Standpoint Theory (FST) resonates with the socio-cultural theory as it identifies knowledge as a social product developed from a specific social position and that there are cultural values and power dynamics within a specific social position (Sprague-Jones & Sprague, 2011; Wood, 2009).

FST suggests that society is structured by *power* relations that generate unequal social location. It claims that women’s lives are systematically and structurally different from men’s lives and that these differences produce different knowledges (Wood, 2009). It draws on the claims that the work women do, the concrete activity in which women engage in shapes what

women know and how women behave and consciousness and by extension, women's knowledge. Central to the theory is the understanding that knowledge is situated and perspectival and that there are multiple standpoints from which knowledge is produced (Hekman, 1997).

With regard to gender, information and knowledge relating to sexuality, Measor (2004) argues that attitudes to information and knowledge vary significantly with gender. This is because of the sources of information that individuals rely upon and prefer. Measor (2004) is in agreement with Dilorio, Kelley and Hockenberry-Eaton's (1999) study on communication about sexual issues in the USA, which revealed that early adolescence (13–15 years old) is characterised by more sex-based discussions with mothers than with friends or fathers. Daughters and sons discuss different topics with their fathers, although discussion by both genders with fathers is limited.

In light of the above, Sprague-Jones and Sprague (2011) posited that gender is a significant factor in knowledge construction in a specific social position and it creates difference in how people construct understandings. Related to this, Chikunda (2013) argues that gender is also a politically loaded concept as gender perceptions often determine who shall access what resources, from whom, when and how.

Thus, in the context of this study, the Feminist Standpoint Theory helped me to explore the different knowledge systems and standpoints produced from a specific social community (that is, rural parents) in terms of who to say what and when, to whom regarding sex-related information. Furthermore, it allowed me to go beneath the surface to reveal and better understand the reality of concealed social standpoint and relations regarding the teaching and learning of sex-related topics in junior secondary school.

2.6 Concluding remarks

In this chapter, the review of literature on parents' attitudes and experiences towards teaching and learning of the topics on human reproduction or sex education in schools were presented. The discussions covered the Namibian curriculum and the teaching of sex education. The latter encompassed parents and sex education, parents' attitudes and experiences regarding teaching and learning of sexually related matters, cultural perspectives on sex education,

gender and teaching and learning of sex-related matters, influences of parents' attitudes and experiences. Lastly, I discussed the theoretical frameworks informing this study, namely, the sociocultural theory and the feminist standpoint theory. In the next chapter, I describe the methodological framework and research techniques applied to answer questions in this study.

CHAPTER THREE

RESEARCH DESIGN

3.1 Introduction

The main goal of my study was to explore rural parents' attitudes and experiences towards teaching and learning of the topics on human reproduction in junior secondary school. In this chapter, I elaborate on the research methodology employed, and discuss how the research topic and questions were explored.

The research design and orientation is firstly explained. This is followed by a discussion on the research goal and questions; the narrative of the research site and participants as well as a description of the data gathering techniques and how collected data were validated and analysed. Finally, the chapter discusses ethical considerations and the limitation of the study.

3.2 Research paradigm and approach

This study is located within the interpretive paradigm. "Interpretivists aim to understand the social world. Results are created, not found. Interpretations are informed by theory" (Bertram & Christiansen, 2015, p. 26). According to Cohen, Manion and Morrison (2011), an interpretive paradigm helps researchers to understand the subjective nature of human experiences. I thus found an interpretive paradigm an appropriate paradigm for this study, which helped me to identify the factors (influences) from parents which in turn contribute to shaping the views regarding their children being taught.

Within an interpretive paradigm, a case study approach was employed. Bertram and Christiansen (2015) define a case study as a systematic and in-depth study of one particular case in its context. It is a study of a case in a context and it is important to set the case within its context (Cohen et al., 2011). It aims to describe 'what it is like' to be in any particular situation, so a case study is generally descriptive in nature, and can be used to generate claims for further verification (Bertram & Christiansen, 2015). In the context of this study, the case is the rural parents (the participants).

This case study adopted a mixed method approach, that is, both quantitative and qualitative data were gathered using questionnaires, semi-structured interviews and observation

(Cohen et al., 2011). The quantitative data came from the closed-ended questions in the questionnaire whereas qualitative data came from the open-ended questions of the questionnaire, semi-structured interviews, as well as from workshop observation. However, in this particular study I have more qualitative data than quantitative data.

According to Bertram and Christiansen (2015), a qualitative approach involves collecting textual, visual or verbal data, employs methods that helps to lead to an in-depth exploration of views. Thus, qualitative data were used as my unit of analysis in an interpretive way to further explore rural parents' attitudes regarding teaching and learning of sex-related matters and these were analysed to extract rural parents' conceptions, traditional, social, cultural and religious beliefs. It is these beliefs that shape the parents' attitudes, and experiences or conceptions towards the teaching and learning of human reproduction/sex education.

3.3 Research goal and questions

Research goal

The main goal of this study was to explore rural parents' attitudes and experiences towards teaching and learning of human reproduction in junior secondary school. To achieve this goal, the study sought to answer the following research questions:

1. What are rural parents' attitudes and experiences towards the teaching and learning of human reproduction at junior secondary school level?
2. What factors influence such rural parents' attitudes and experiences?
3. How can parents be supported to understand the importance of teaching and learning of human reproduction in junior secondary school?
4. What enables or constrains parents from understanding the importance of teaching and learning of human reproduction in junior secondary school?

3.4 Research site and participants

The selection of the research participants in this study is informed by convenience sampling. According to Cohen et al. (2011), convenience sampling involves choosing individuals close by to serve as participants, and continuing that process until the required sample size of those who happen to be available and accessible at the time is obtained. It is on these bases that the research cohort for this study were selected because they represent relevant examples of

interest to the study and were easily available and accessible.

Parents whose children were attending school at Kacija Combined School (pseudonym) Grades 8–10, of the Ogongo constituency, Omusati region, Namibia, were invited to participate in this study. During an introductory meeting with 102 of these parents, it emerged that 80 parents showed an interest to take part in the study. Thus, 80 rural parents were expected to participate and answer the questionnaire and from this group, four volunteered for the semi-structured interview (preferably two males and two females). I also made an appeal for parents willing to attend a workshop for participating parents on sexual health education as an intervention. As a result, two facilitators (both females) were approached to help run the workshop while I was present observing. One was an adult education facilitator who was selected because she is trained to teach adults and the other facilitator was a community AIDs awareness promoter for a Total Combat of the Epidemic (TCE).

Parents were asked to volunteer based on their age (young parents, middle-aged parents and older parents), and their educational background was also considered. I targeted parents with a minimum level of Grade seven (7) or less than Grade 7 and who I believed could write. For purposes of inclusivity, I made provision to accommodate parents who were illiterate, in case any opted to be interviewed. However, there were no parents in this category. The issue of parents' sex (mixed gender) was also considered in this study.

3.5 Data gathering techniques

The data presented in this thesis were from an analysis of administered questionnaires and semi-structured interviews that I used as my primary data gathering techniques as well as observation during an intervention (parents' workshop). Additionally, document analysis was used mainly to strengthen the context of the study. Each of these is discussed below.

3.5.1 Document analysis

To better understand the curriculum and policy context on teaching and learning of the topics on human reproduction in junior secondary school, selected curriculum and policy documents, textbooks and examiners' reports were examined. These included: The Grade 8–10 Life Science syllabus; Education Sector Policy on the Prevention and Management of Learner Pregnancy; Life Science prescribed textbooks and the 2010 – 2015 JSC examiners'

report. All these documents were analysed to strengthen the context of the study.

3.5.2 Questionnaire

Bertram and Christiansen (2015) define a questionnaire as a sequence of listed questions for the respondent or participant to answer. I adopted and used an administered questionnaire, with a combination of open-ended and closed-ended questions.

Cohen et al. (2011) suggest that open-ended questions enable respondents to answer in their own words, and are more suitable for sensitive topics. The administered questionnaire was therefore used (see Appendix D), and I was available to assist and answer questions for clarification while parents were completing the questionnaire. This was done at school after a parents' meeting. It took about one hour for all parents to complete the questionnaire. The administered questionnaire was designed in such a way that it contained questions that were in the kind of language that respondents understood easily (Bertram & Christiansen, 2015). This was evident in that a few questions were asked for clarity so as to avoid interpretation of questions in more than one way.

Given that the parents who participated in this study were of different educational and linguistic backgrounds, the questionnaire was in both English and Oshiwambo (the local vernacular) which enabled parents to answer the questions in either language. The piloting was done before the actual data gathering exercise with my colleagues (teachers) at school to help identify problem areas in the questionnaire as proposed by Bertram and Christiansen (2015).

I suspected some of the participants might be unable to write when answering the questionnaire, and they might thus prefer to be interviewed. This did not happen, however, as all parents were literate and completed the questionnaire themselves. I expected about 80 parents to participate given the interest shown in one of our meetings, but only 35 parents turned up. I thus decided nonetheless to administer the questionnaire to those 35 parents, of which 10 were males and 25 were females. Due to the sensitive nature of the study or questions, 13 parents submitted incomplete questionnaires. Consequently, this study presents data from only 22 questionnaires.

3.5.3 Semi-structured interviews

An interview is a conversation between two or more people where questions are asked by the interviewer to elicit facts from the interviewee on a topic of mutual interest (Kvale, 1996).

It enables the participants to express their own point of view. Cohen et al. (2011) indicate the benefits of interviews: a flexible tool for collecting data and they provide an opportunity for the interviewer and the interviewee “to discuss their interpretations of the world in which they live, and express how they regard situations from their own points of view” (p. 409). Longhurst (2003), describes a semi-structured interview as a verbal exchange of views, ideas and information, where an interviewer attempt to elicit information from another person by asking prepared questions.

After the interview questions (see Appendix E) were piloted with my teacher colleagues, a similar piloting was carried out with two parents, for them to help identify mistakes and reshape questions. A semi-structured interview was conducted with four of the participating parents (two males and two females). I opted to interview four parents (preferably who attended the workshop) in order to collect a manageable amount of data and to determine the impact of the workshop. The fact that none of the participated males attended the workshop, only two female interviewees participated in the workshop while the two males did not. The interviews took about 48 minutes to 90 minutes. The interviews allowed participants an opportunity to provide their in-depth perceptions of the topics on human reproduction, but also gave me an opportunity to explore further with follow-up questions when it was necessary. All interviews were audio recorded with the interviewees’ consent and very few notes were taken, mainly to remind me and guide follow-up questions.

Both interviews were conducted in the afternoon, and in the vernacular (*Oshiwambo*) with the first ran for about 90 minutes. The first interviewee was very eager to share his views and experiences regarding sex education when he was young, and I tried to steer him back to the focus of the study. Due to the fact that there were children playing near where we sat, the interviewee’s voice was very low, but I managed during the transcribing process by repeatedly listening again and again. The second interview ran for about 55 minutes and everything went well. The third interview was postponed by a day because of the participant’s commitment elsewhere, but took place the next day. It was disturbed due to wind, but this was rectified after we moved indoors.

The fourth interviewee was unavailable for four consecutive days due to herding his cattle, so we agreed on the fifth day to conduct the interview in the veld while his cattle grazed. For voice quality recording, we conducted this interview in the car with closed windows because of the wind. All interviews were conducted at a convenient time and place for the participants. No major problems were encountered during the interview process.

3.5.4 Workshop schedules

To add more value to this study, a parents' workshop was conducted (as an intervention) to answer my research questions 3 and 4.

A workshop can be referred to as a meeting at which a group of people engage in intensive discussion and activities on a particular subject or project. It is an interactive session in which researchers and/or other participants work intensively and share ideas. Andersen and Jæger (1999, p. 331) explain that a workshop entails “a group of citizens interacting with other actors to exchange knowledge and experience, develop common visions and produce a plan of action”. Workshops are also characterised by their ability to create new knowledge. Moreover, Abma (2003, p. 221) posits that workshops are organizational learning which are a collective and relational process in which groups of persons are gaining knowledge and appreciation of issues through stories and an ongoing dialogue between stories.

Initially, the purpose of this study was not to run a workshop for rural parents. Instead, I wanted to explore their attitudes and experiences regarding teaching and learning of the topics on human reproduction/sex education in junior secondary school (Grade 8–10) through questionnaires and interviews, but I was triggered to organize a workshop as a form of an intervention based on their responses that they gave.

Talking about sexuality has never been easy in most Namibians' cultures and it seems that most parents feel uncomfortable and embarrassed to talk openly with their children about sexuality (Lukolo & van Dyk, 2015). That is, parents do not participate in the sexuality education of their children, because they believe they are unable to provide quality, adequate information due to their lack of knowledge about human sexuality or their perceived inability to explain what they do know. One of the questions in the questionnaire was: “Would you be interested in attending a sex-related workshop for parents if it was offered at our school or

elsewhere?” It emerged from the data collected from the questionnaire that most of the parents indicated their willingness to attend a sex-related workshop for parents. On the other hand, parents indicated being uncomfortable talking to their children about sex-related matters due to the lack of proper information as well as the know-how to do so. It is against this backdrop that I decided to organise a workshop for this parents.

The workshop was not only aimed at supporting, assisting, enabling and empowering parents to openly talk to their children about sex-related matters, but instead it was intended to shift their perceptions from their existing cultural, religious perspective and beliefs to what happens in real life. In hindsight, it also eased parents’ availability to assist their children in doing sex-related school activities and homework. Hence, the workshop aimed to address the following two research questions:

- How can parents be supported to understand the importance of teaching and learning of human reproduction in junior secondary school?
- What enables or constrains parents from understanding the importance of teaching and learning of human reproduction in junior secondary school?

Two facilitators (both females) helped to run the workshop while I observed. One was an adult education facilitator who was chosen because she is trained to teach adults and the other facilitator was a community AIDs awareness promoter for a Total Combat of the Epidemic (TCE). During the workshop, the following mediational tools or artefacts (Vygotsky, 1978) were used to mediate discussion: Grade 10 Life Science textbooks; newspapers reporting high teenage pregnancies; education policy on pregnancies and Grade 8–10 Life Science syllabus. Although both genders indicated their willingness to attend a workshop, it happened that only 10 female parents could attend the workshop. Like Measor (2004) argues that attitudes to information and knowledge related to sexuality vary significantly with gender, it happened that no male parent participated in the workshop. Chikunda (2013) argued that gender is also a politically loaded concept as gender perceptions often determine who shall access what resources, from whom, when and how. However, new knowledge is important for both dimensions of change (Collins, 1993).

The workshop ran for three days and all 10 parents attended all workshops. Phase one was an

introduction and orientation phase, which incorporated a storytelling session, where parents shared their stories as informed by socio-cultural theory. Roney (2008) defines storytelling as a unique art form and medium of communication. It is a social and cultural activity of sharing stories. Stories have been shared in every culture as a means of entertainment, education, cultural preservation and instilling moral values. This was an important session in which parents had an opportunity to share their experiences and views. At the same time it helped to identify parents' needs and thus lead to a need based workshop. Parents were very open during this phase, sharing their experiences, loud and clear as they were pointing out what they expected from the workshop, highlighting their area of difficulty. Lack of proper information on sexuality, confidence, how to approach a child, poor interpersonal relationships between parents and their children were the major areas of difficulty.

Phase two was a working phase which incorporated worksheet activities and role play. Lane, Hood and Rollnick (2008) argue that a role play as a rehearsal practice which is often beneficial in helping practitioners to acquire communication skills and gain confidence. Parents had an opportunity to learn naming different parts of the body including sex organs, in words (both in English and *Oshiwambo*) and did an activity to point to the picture that matched each word. Lastly, in phase two, parents did a role play, portraying a mother and a daughter talking about sex-related matters. This was indeed an exciting exercise, parents were a bit shy, but as the first pair started, all went well. In the absence of male parents, we could not witness communication between father and daughter or mother and son in the role play.

At the start of session two, parents had difficulty saying actual names of genitals in vernacular. This was relieved as the facilitators tried to bring in a number of ice breaker activities, boosting parents' participation. Phase three was a sum-up phase, where the participants had an opportunity to reflect on the workshop and the consolidation on all activities was done. Particular focus was on proper information on sexuality; self-awareness and confidence; interpersonal relationships between parents and their children and lastly, the highlights on motivation and encouraging parents' positive attitudes and behaviours towards teaching and learning of sex-related matters.

During the last phase, parents had more questions to ask. Facilitators tried their best to provide answers, however, most of the questions were more individual experiences. For instance, one wanted to know how to cut an umbilical cord during the birth process, another

asked why menstruation had stopped. The facilitators concluded the workshop, and I had an opportunity to come in to provide subjects' content based knowledge as per most questions posed that were not properly answered. This was like an informal discussion.

Table 1: Summary of phases and stages in the data gathering process

Stage/Phase	Technique used	Data collected	Purpose
Phase 1 Stage 1	Document analysis	<p>Contents of: Life Science Syllabus Grade 8-10</p> <ul style="list-style-type: none"> - Life Science prescribed textbooks - Examiners' reports (2009 - 2015) - Education Sector Policy on the Prevention and Management of Learner Pregnancy 	<p>To get clear insight on the aims of the curriculum regarding the teaching of the topics on human reproduction.</p> <p>To get some insight into the syllabus outlined outcome or competencies on the topics of human reproduction.</p> <p>To analyse how topics of human reproduction are presented, the presentation of the illustrations and language used.</p> <p>To find out on how learners have been performing the topics of human reproduction in the JSC examinations.</p> <p>To elicit the policy provision regarding aspects of cultural and family values as well as parental roles and involvement.</p>
Stage 2	Pilot study of the questionnaire and interview questions	Colleagues' and rural parents' views and experiences	To assess the suitability, clarity, quality, reliability and validity of the instruments.
Stage 3	Questionnaire	Rural parents' views and experiences on the topics of human reproduction.	To get some insight into rural parents' views regarding the topics of human reproduction being taught to their children.
Phase 2	Data technique used	Data collected	Purpose
Stage 4	Workshops and observation (an intervention)	Rural parents' views and experiences	<p>To elicit existing stories on sex related matters from rural parents.</p> <p>To support and empower rural parents' communicate to their children regarding sex related matters. To answer research questions 3&4.</p>
Stage 5	Semi-structured interview	Factors (influences) on the topics of human reproduction.	To elicit information from participating parents and to get some insight into the factors (influences) that seem to be shaping parents views on teaching and learning of sex-related matters. Thus, both questionnaire and interviews seek to answer the research questions 1 & 2.
Stage 6	Transcribing interviews	The extent to which the interview questions were answered.	To find areas for follow up interviews as well as to identifying need for an interventions.

3.6 Data analysis

Data analysis refers to making sense of data by organising, categorising and explaining it based on themes and noted patterns (Cohen et al., 2011). Qualitative data were analysed inductively, statements that provide answers to the research questions were colour coded and sorted into categories, and then themes were organised according to what emerged from the questionnaire, semi-structured interviews and workshop as informed by the research questions and theoretical frameworks. Categories included parents' school and family based attitudes and experiences, factors influencing parents' perceptions; and ways in which parents' perceptions shape the teaching and learning of human reproduction in schools as indicated by socio-cultural theory and feminist standpoint theory.

The data relevant to the themes mentioned earlier were colour-coded and placed into the themes, and then translated into analytical statements. These data were then interpreted and discussed as per socio-cultural theory, feminist standpoint theory and according to the curriculum; and traditional and cultural beliefs (that seem to shape parents' attitudes towards the teaching and learning of human reproduction/sex education). Using the socio-cultural approach, analysing the discourse and the feminist standpoint was also pertinent to this study.

Discourse analysis assumes from the outset that language is not a neutral tool for transmitting a message, but rather that all communicative events, whether these are reports, interviews or arguments constitute a particular way of talking about and understanding the world or an aspect of the world (Griffin, 2007; van Dijk, 2001). In other words, I used discourse analysis to reveal the hidden motivations behind what is said and this helped me to surface discontinuities between cultural beliefs and curriculum mediation.

During the workshop observation I employed an unstructured observation. An unstructured observation means that researchers do not go through a check list ticking off boxes or rating particular activities they see occurring, but rather they write a free description of what they observed (Bertram & Christiansen, 2015).

Since it was not possible to capture everything that happened, I asked for the participants' consent to use a voice recorder that I listened to while studying the written free description. I managed to add some more descriptions and this became part of data analysis.

3.7 Validity

Cohen et al. (2011) refer to validity as an extent of the honesty, depth, richness and scope of data collected and the extent of triangulation. To answer the question of how we know that the data collected is honest, accurate and believable, a tape recorder was used and field notes were taken while interviewing the participants. Participants had access to the notes taken. After I had transcribed the interviews, participants were allowed to read through them, in order to correct any mistakes. It was very interesting that during this process one of the interviewees wished to add to his responses, and he was allowed to do so. The others read through and acknowledged the content.

Should there have been cases where the participants could not write, they could dictate to me and I would write down their answers. However, all participants could write. The study employed triangulation to enhance validity of the data. Cohen et al. (2011) define triangulation as the use of two or more methods of data collection in the study of some aspect of human behaviour. This was achieved through the evidence that emerged from the data on the questionnaire, semi-structured interviews and observations during the workshops.

Data obtained from the questionnaires did not just help to inform the interview questions, but revealed a need to enhance parents' understanding of the importance of, and their participation in the teaching and learning of sex education both at *home* and *school*. This resulted in a parents' workshop as an intervention to answer the research questions 3 and 4. The interviews featured questions that extracted data that could not be obtained through the questionnaires. The interview did not only help to provide the participants with an opportunity to provide in-depth explanations, but helped also with the process of triangulation of data.

3.8 Ethical considerations

As I interacted with people during my research, I adhered to the ethical principles of conducting research, to ensure the research participants' freedom and to avoid tensions. I thus sought permission to conduct my research from Omusati Chief Regional Officer (CRO) (see Appendix A) as well as from the parents themselves.

Liamputtong (2007) indicates the importance of explaining and informing the research

participants of what would be expected of them so that their participation and availability is voluntary. Parents' rights to withdraw from the study at any point were guaranteed. Consent letters were sought from participating parents (see Appendix C), to accept or not accept to participate in the research after thorough transparency of any impact on their participation was explained (Cohen et al., 2011). To ensure that no harm occurred to the research participants, anonymity and confidentiality were also guaranteed.

3.9 Concluding remarks

In this chapter, the research methodology employed was described. I described the research design and orientation with a highlight on the paradigm underpinning this study. The chapter further outlined the research goal and questions and the research site and sampling (participants). Data gathering techniques and analysis was explained as well as issues of validity and ethics. Lastly, the chapter concluded by discussing the highlights on the limitations of this study.

In the next chapter, data presentation, analysis, discussion and findings are presented.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND DISCUSSION

4.1 Introduction

The main goal of this study was to explore rural parents' attitudes and experiences towards teaching and learning of the topics of human reproduction in junior secondary school (Grade 8–10). In this chapter, I present, analyse and discuss data generated using questionnaires (quantitative and qualitative data), semi-structured interviews, as well parents' workshop observations to answer the following research sub-questions:

1. What are rural parents' attitudes and experiences towards the teaching and learning of human reproduction at junior secondary school level?
2. What factors influence such rural parents' attitudes and experiences?
3. How can parents be supported to understand the importance of teaching and learning of human reproduction in junior secondary school?
4. What enables or constrains parents from understanding the importance of teaching and learning of human reproduction in junior secondary school?

I start by discussing the quantitative data from the questionnaires.

4.2 Quantitative results and discussion

As explained in Chapter 3, Section 3. 2, quantitative data were generated and analysed based on data from the closed-ended questions of the questionnaire using frequency tables and percentages as advised by Bertram and Christiansen (2015). The trend in parents' responses is shown on bar charts derived from the frequency table. These were mainly from Part A of the questionnaire (i.e. parents' demographic information, including the grade at which the child (learner) is respectively); Part B, questions 1, 2, and 4 which required parents to indicate the topics taught to them at school and the grades at which they were taught; if parents were comfortable or not when the topics on human reproduction had been taught to them.

Part C had the questions 1, 3, 4, 5, 6, and 8, which sought parents' sources of information on sexually related matters; whether parents would talk or not, to their child about sex; whether

parents found it easy talking about sex or not; how often they talked to their children on different sex related topics; whose responsibility it was for talking about sex to their children, and lastly, if they would be interested in attending a sexually related workshop. Basically, these attempts to partly answer the research questions 1 and 3. I now present the demographic information of the participants.

4.2.1 Parents' profile

This study was conducted in Ogongo constituency, Omusati region. Twenty-two (22) rural parents participated in this study and were all *Oshiwambo* speakers. Table 2 below shows parents' demographic information.

Table 2: Demographic information of the parents who participated in this study

Demography of parents	Category	Total
Gender	Male	6
	Female	16
	Parent	13
	Guardian	9
Age Group	30-39	5
	40-49	8
	50-59	4
	60-69	2
	70 and above	3
Grade level (Level of education)	1-7	4
	8-10	5
	11-12	9
	Others	4
Grade level (parent's child)	8	6
	9	6
	10	10

Table 2 reveals that out of the 22 parents that participated in this study, six parents (27%) were males while 16 (73%) were females. 13 parents (59%) were biological parents of the learners while nine (41%) indicated they were guardians to the Grade 8-10 learners. In the context of this study, the term 'guardian' refers to adults who were not the biological parents of learners but who looked after learners. This did not in any way affect the findings of this study.

The participants' ages ranged from 30 to 70 years and above, with 14 parents (64%) aged

between 40 and 69 years. Five parents (23%) were in the range of 30–39 years while three (13%) parents were in the range of 70 years and above. The experiences and attitudes explored in this study came from all parents. Table 2 further shows that nine parents’ (41%) level of education ranged from Grade 1–10. Equally, nine parents’ (41%) level of education ranged from Grade 11–12, with only four parents (18%) either having a university level or they did not attend school. This indicates that 82% of the parents who participated attended school. All parents who participated in this study truly represented learners at junior secondary school (Grade 8-10) as revealed in Table 2 above, with ten parents’ (46%) children doing Grade 10, with both Grades 8 and 9 represented by six parents each, making it 12 (54%) of the parents who participated.

4.2.2 Parents’ experiences towards the teaching and learning of sex education

Parents were asked if the following sexually related topics were taught to them when they were at school and at what grade to determine their experiences and knowledge of the topics of human reproduction: Abstinence, Decision-making, Family planning, Love and relationships, Sexual intercourse, Reproductive system, Reproduction, Reproductive health, STI including HIV/AIDS, Pregnancies, Puberty, and None of these topics taught. Their responses are shown in figures 1, 2, 3 and 4 below.

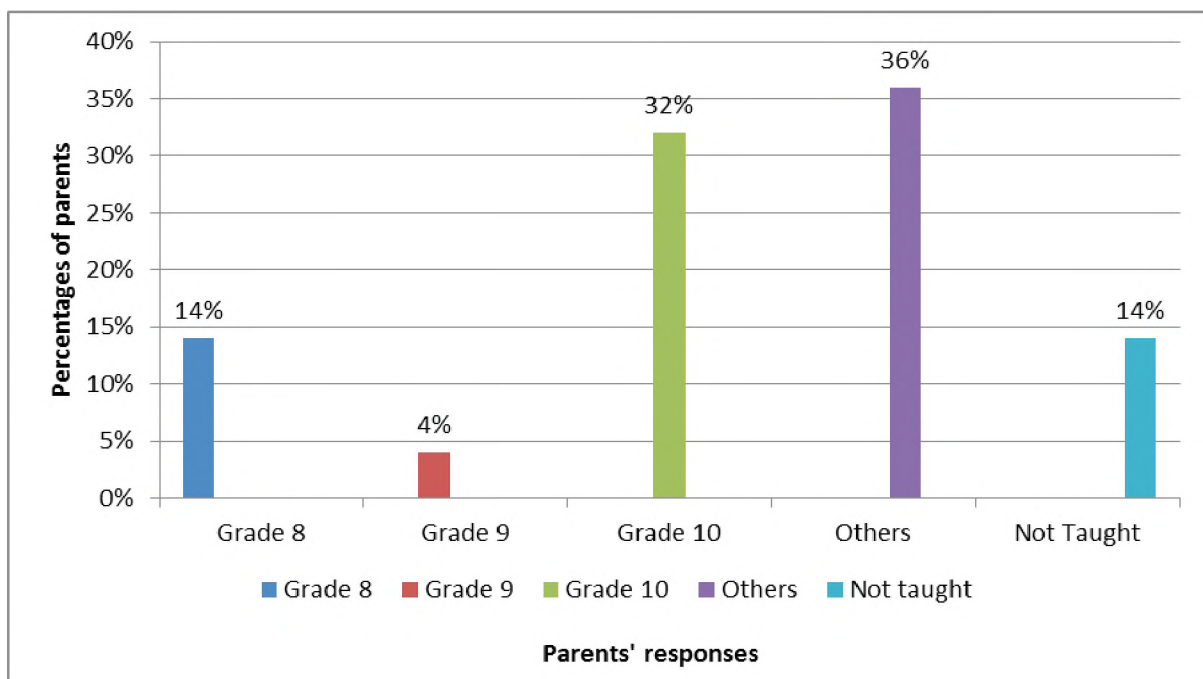


Figure 1: Grades where parents were taught topics of human reproduction

Note: Grade 8 = 3, Grade 9 = 1, Grade 10 = 7, others = 8, and not taught = 3. These are out of 22 parents

Figure 1 reveals that out of 22 parents who completed the questionnaire, nineteen (86%) were taught sexually related topics either in Grade 8, 9, 10, Grade 11–12 or university level (Others) while three (14%) were not taught. Parents' comfortability when these topics were taught to them, were also explored and their responses are shown in Figure 2 below.

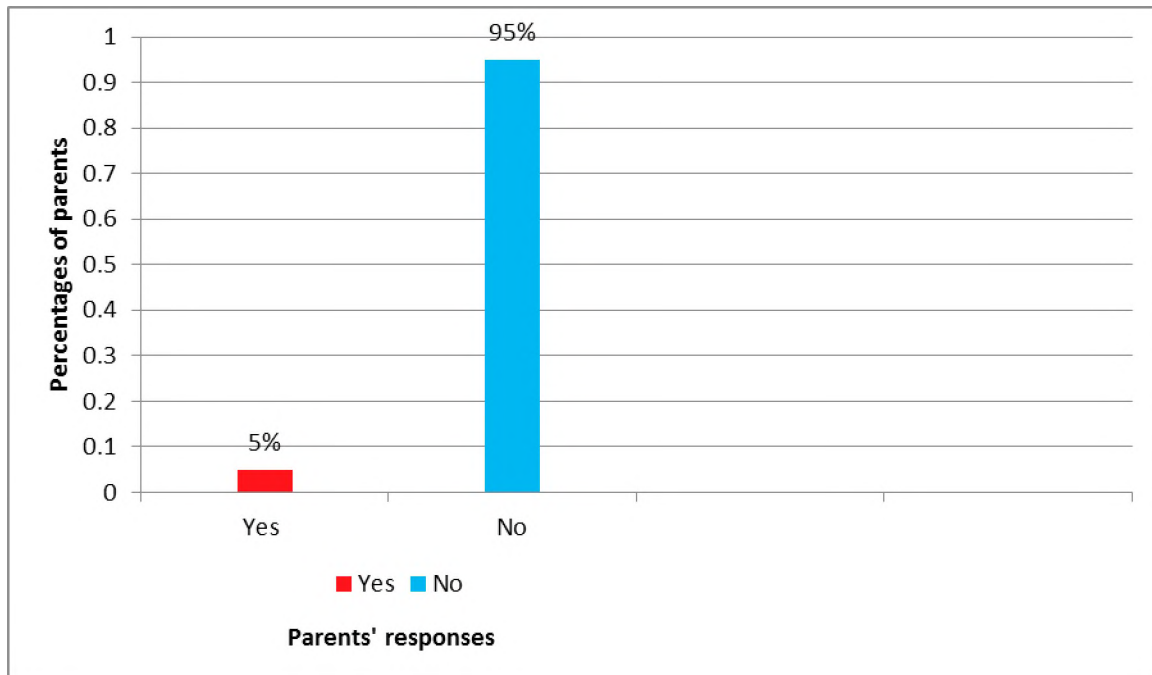


Figure 2: Parents' responses to the question on whether they were comfortable or not when topics of human reproduction were taught to them

Figure 2 shows that out of twenty-two parents, only one parent (5%) felt at ease while twenty-one (95%) indicated that they were not comfortable when the topics of human reproduction were taught to them. Parents were also asked about their main source(s) of information about sexually related issues. Their responses are shown in Figure 3 below.

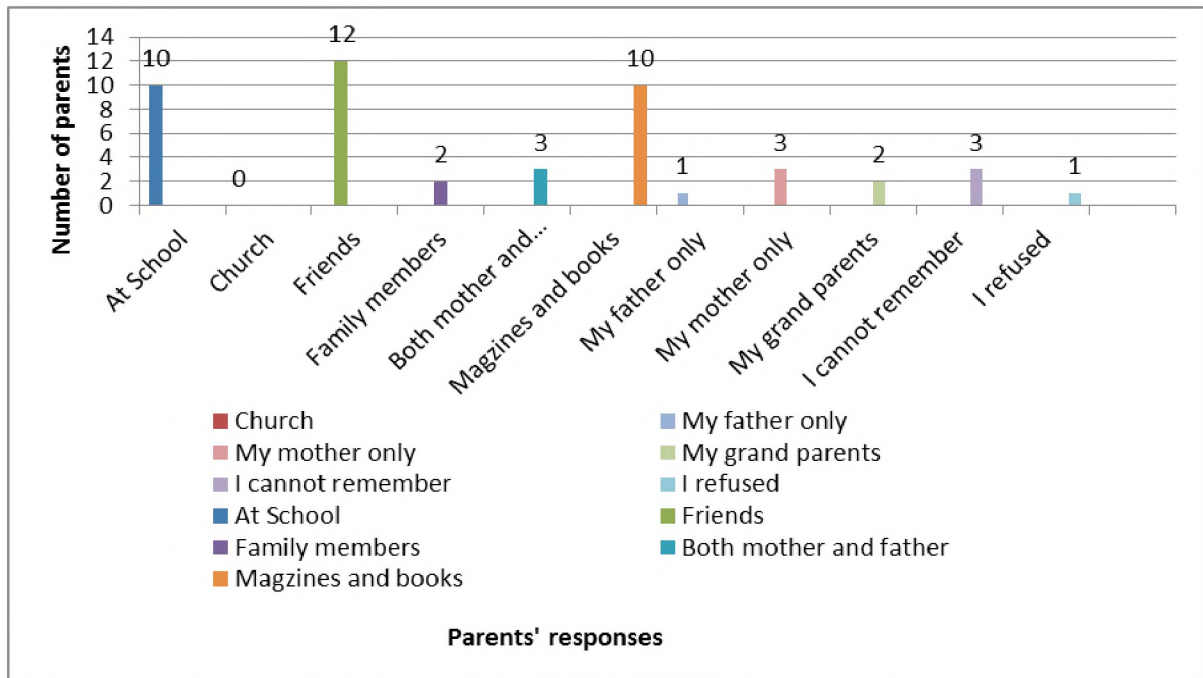


Figure 3: Parents' main source(s) of information about sexually related issues during childhood

Figure 3 shows that of the sources of information about sexually related issues, out of 22 parents, 12 (55%) indicated that friends were their main source of sexually related information while out of 22 parents, ten (46%) indicated that the school and magazines and books were their main sources of information about these issues. It further reveals that out of 22 parents, two (9%) equally indicated for both family members and grandparents, three (14%) equally indicated both father and mother, mother only, and or, could not remember respectively, while one (5%) indicated 'my father only' and 'I refused'. No parent indicated the church as their sources of sexually related information. This reveals that most parents did not get their information on sexually related issues from their parents, family members or church.

Whether parents find it easy talking to their children was also explored. Their responses are shown in Figure 4 below.

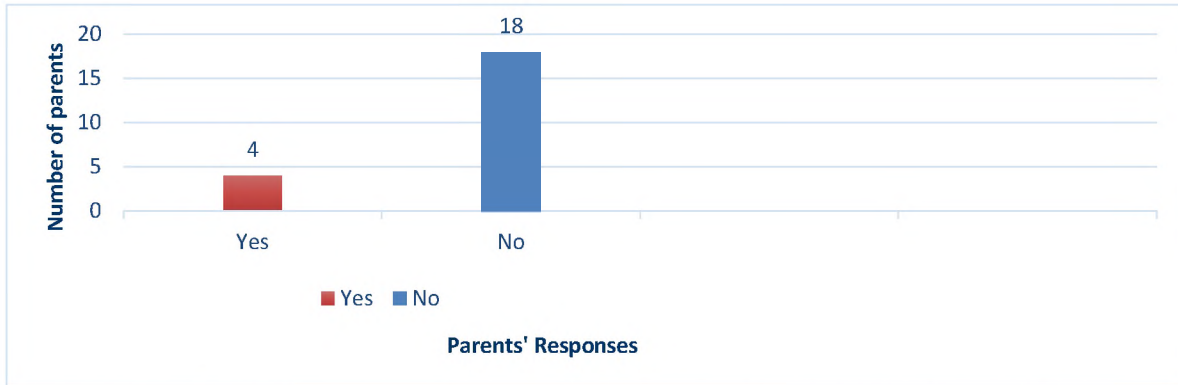


Figure 4: Parents' response to the question of whether they find it easy talking about sex their own children or not?

Figure 4 shows that out of 22 parents, only four (18%) found it easy talking to their children while 18 (82%) did not find it easy to talk to their children about sex.

The results revealed in Figures 1 and 2 on sexually related topics taught to parents and their degree of comfort when these topics were taught, shows that the majority of parents (86%) were taught sexually related topics in schools, thus many parents seems to have a school-based sex education experience with 95% indicating that they were not comfortable.

On parents' main source of information about sex related issues, it is evident that friends, school and magazines and books were the main sources of information about sex related issues. This is similar to the findings of Bleakley, Hennessy, Fishbein and Jordan (2009) who argued that although parents and friends are identified by adolescents as the most common sources of sexual information, the mass media is also recognized as an important contributor to sexual knowledge. However, the result shown in Figure 3 shows very little contribution by parents.

Interestingly, although 86% (Figure 1) were taught these topics in school, Figure 4 shows that 82% of parents found it difficult to talk about sex to the children. This is in agreement with Salami (2015) who said that, due to cultural and traditional norms, most parents find it difficult to engage or involve their children who are of adolescent age in sex and sexuality education.

4.2.3 Rural parents' attitudes towards teaching and learning of the topics on human reproduction

Rural parents' (Figure 4), attitudes on whether they would rather talk to their children about sex were also explored. Figure 5 below, shows their responses.

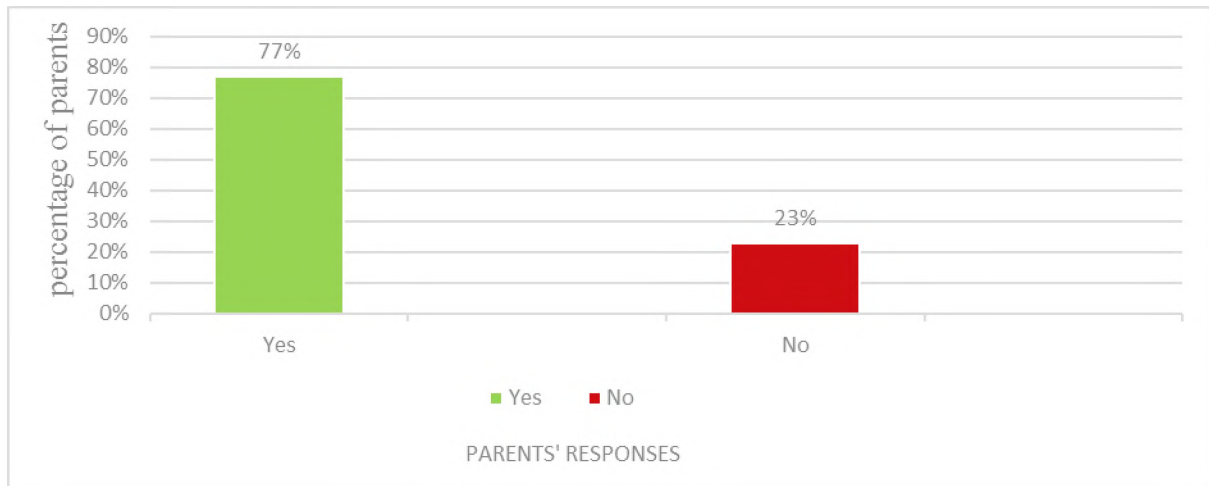


Figure 5: Would you rather talk to your child about sex at home or not?

Although parents indicated they did not find it easy talking to their children about sex, Figure 5 reveals that most of the participants 17 (77%) indicated a willingness to talk to their children about sex at home, while five (23%) were not willing to talk to their children about sex. Parents were asked what kind of sexually related topics they talked about to their children at home. The figure below shows their responses.

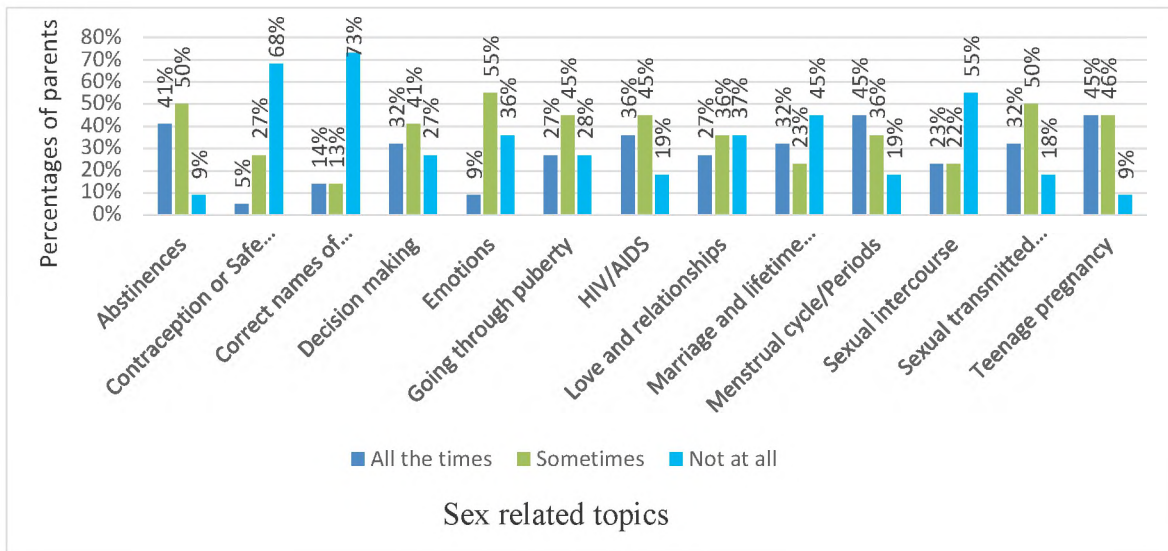


Figure 6: Percentage of parents’ talk of sexual related topics to their children at home level

Figure 6 reveals that most of the parents who participated in this study indicated only talking about some sexually related topics to their children at home. It is evident that topics like the biological names of genitals, contraception or safe sex, sexual intercourse and marriage and lifetime commitments did not receive parents’ favour, thus, most parents do not talk to their children at all. Interestingly, the figure shows that for each topic, there are a number of parents who do not talk about such topics. Equally important, the figure also reveals that each topic has several parents who talk to their children sometimes or all the time.

The figure below shows parents’ views on whose responsibility it is for talking on sex related issues to children. Parents opted for more than one (i.e. church or school).

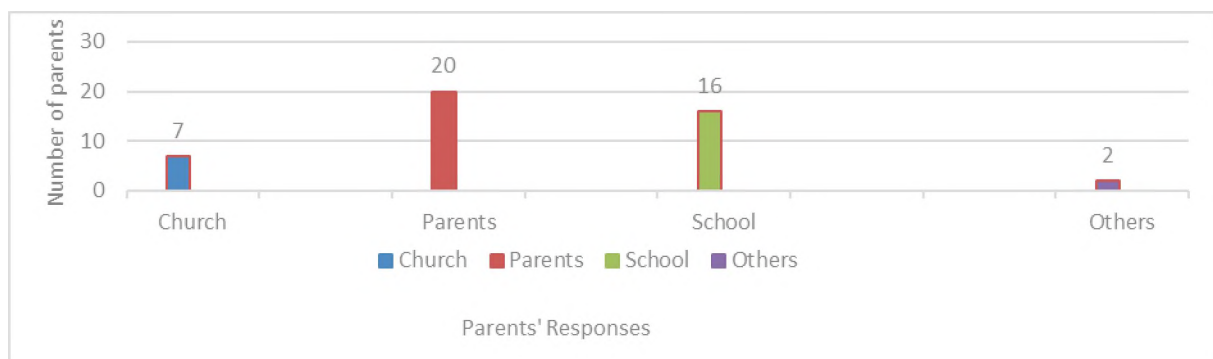


Figure 7: If sex education is to be talked about, in your view whose responsibility should this be?

Figure 7 shows that out of 22 parents, seven parents (32%) felt that it was the Church's responsibility to talk about sex education. The majority of parents, that is, 20 out of 22 (91%) felt that it is their responsibility to talk about sex education. On the other hand, 16 parents (73%) felt that it should be the schools' responsibility while two out of 22 (9%) felt that it is the responsibility of others, such as the media, government or non-governmental organisations.

Parents were asked to indicate their interest in attending a sexually related workshop for parents if it was to be offered. Below are their responses.

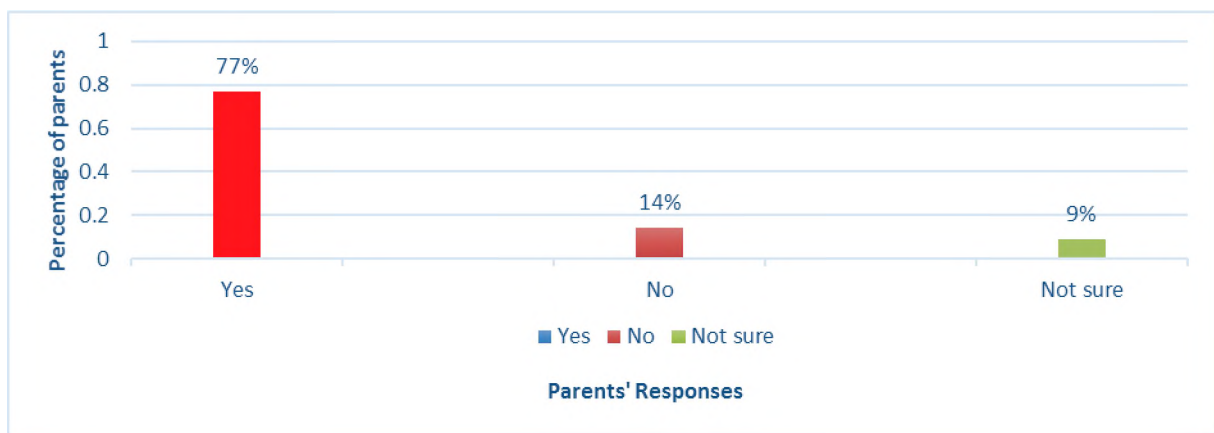


Figure 8: Parents' interests in attending a sexually related workshop for parents

Figure 8 reveals that out of the 22 parents who participated, 17 (77%) had a desire for knowledge. Three parents (14%) had no interest in attending a sexually related workshop while two parents (9%) were undecided. This shows that the majority of the parents who participated in this study were willing to gain knowledge regarding sex education.

Based on parents' responses on whether they would rather talk to their children about sex, (77%) of parents indicated their willingness to do so, while 23% were not willingness (Figure 5). However, parents did very little regarding talking to their children about sex. This is shown by their responses in Figure 6, where most parents indicated they did not talk to their children on some sex-related topics at all. Similar findings were reported by McKay et al. (2014) that despite parents' indication of their willingness to do so, many parents indicated that they provided little or no sexual health education to their children.

With regards to the question on whose responsibility it was to talk to children about sex, the results shown in Figure 7 indicate that twenty parents (91%) felt that it was their responsibility to talk to their children, while sixteen (73%) felt that it should be the responsibility of the school with few parents feeling that it should be the church (32%), and 9% felt it should be the responsibility of others such as the media or youth forums. Studies on parents' views regarding sex education (McKay et al., 2014; Weaver, et al., 2001) reported that about 87% of parents agreed that sex education should be provided in school and 95% of parents felt that it should be a shared responsibility between school and home respectively.

Most parents (77%) indicated interest in attending a sexually related workshop for parents. This shows that many parents in this study had a desire for knowledge which may help to make teaching and learning the topics of human reproduction in junior secondary school much easier, as indicated by McCall (2008) that the involvement of parents in schools' health promotion programmes has the benefit of enhancing communication between parents and their children.

4.3 Qualitative results and discussion

As explained in Section 3.6, qualitative data were analysed inductively, statements that provide answers to the research questions were colour coded to easily categorise them, sorted into sub-themes/categories and then organized into themes. This was done according to what emerged from the collated qualitative data from questionnaires (open-ended questions), semi-structured interview transcripts as well as from the transcripts of the workshop observations. Table 3 below shows eight preliminary themes that emerged from the grouping of similar sub-themes.

Table 3: Generated preliminary sub-themes

Evidence/Descriptions	Sub-themes	Sub-questions	Data Sources
Was very shy/ it is humiliating/ not taught/ not to play with girls/not comfortable/comfortable	School and family based experiences	1	Questionnaire Interviews Workshop observation
It was a law / god's ten commandments/ paganism/ I am like guilty	Religious beliefs	2	Questionnaire Interviews Workshop observation
Sex education for parents/ want to be educated/ want to know how to	Desire for knowledge and need for training	3&4	Questionnaire Interviews

guide/ programme to educate parents			Workshop observations
Not easy to discuss/ not comfortable/comfortable/ not with a school kid/ not important/ reason not provided	Parent-child sexual discussions	1	Questionnaire Interviews Workshop observations
In support/ not supporting/ good idea/not age appropriate/ not important/it is important/ not at all	School and family based attitudes	1	Questionnaire Interviews Workshop observation
It is a taboo/ it is forbidden/ cattle can get lost/ it suppose to be a secret/ a taboo especially for girls to talk about sex	Cultural beliefs	2	Questionnaire Interviews Workshop observation
Have little knowledge/ how to guide/ I use to find it hard/ they will practice it.	Lack of knowledge, and fear of promiscuity	2	Questionnaire Interviews Workshop observation
Tell the mother/ exposing myself/ teach to engage	Views regarding gender and sexual discussions	1	Questionnaire Interviews Workshop observation

Preliminary themes were reviewed and grouped according to similarities. As a result, three main themes emerged. These are:

- parents' experiences towards sex education;
- parents' attitudes towards sex education; and
- Factors influencing parents' attitudes and experiences towards sex education.

These themes were then presented, and discussed with the supporting literature or theory as shown in Table 4 below.

Table 4: Themes and supporting literature/theory

Themes	Literature/Theory
Theme 1: Parents' experiences towards sex education	
Family and school-based experiences Parent-Child sexual communication	Chu, et al. (2015); Nambambi and Mufune (2011); Nghipondoka-Lukolo and Charles (2016); Olakunmi an Akintomide (2010); Silas (2015); Wight and Obasi (2003); Fitzsimons (1991); Vygotsky's sociocultural theory (1978)
Theme 2: Parents' attitudes towards sex education	

Family and school based attitudes Gender and sexual communications/discussions Desire for knowledge and need for training	Barr et al. (2014); Ekefre, Ekanem, and Esien, (2014); Nambambi and Mufune (2011); Martin and Luke (2010); Measor (2004); Dilorio, Kelly and Hockenberry-Eaton's (1999); La Font (2010); Leach and Scott (2003); McKay et al. (2014); Weaver et al. (2001)
Theme 3: Factors influencing rural parents' attitudes and experiences towards sex education	
Cultural beliefs Religious beliefs Lack of knowledge, and fear of promiscuity	Chu et al. (2015); Nghipondoka-Lukolo and Charles (2016); Jerves et al. (2014); Bijelić, (2008); Brandenburg (2015); Ngalangi (2015); Silas (2015)

4.3.1 Parents' experiences towards sex education

The questions posed in both the questionnaires and semi-structured interviews were the same, making triangulation of data much easier. Parents were asked to share their experiences towards teaching and learning of sex-related topics during their childhood. The study found that many parents had pools of exciting experiences towards teaching and learning of sex education, ranging from home to school-based experiences as well as parents' experiences towards sexual communication with their parents as well as their children.

Family based experiences

Parents were asked to share their experiences regarding teaching and learning of sex-related topics at home. This was aimed at getting parents' background information on how they experienced sex education from their parents. Many participants indicated that they did not come across discussions of sex-related issues during their childhood (at home). The following quotes are evidence to the claim stated above:

“Ame inandi yi longwa, inandi yi putuvilwa, andi putuva nyi inandi putuvilwa? Ondi wete ike nokuKalunga ndi na ondjo shaashi ihayi putuva nhyi osho nda putuvwa.” (Interview P1) [Freely translated: My parents did not raise me with that teaching. How can I raise someone the way I was not raised? I just feel guilty even to God because I am not raising my children the way I was raised].

“I was never used to discussing such things at home. They were regarded as insult” (P22Q4B).

Other parents responded:

“Manga ndali okanona inandi longwa sha nando, ngame onda ka uva iinima ya pamba

iihulo nda koka lela kandi li mosikola nande” (P6Q2C). [Freely translated: When I was a child, I learned nothing regarding sex-related issues. I came to hear sex-related issues when I was grown up already, when I finished schooling].

“I never heard of such at home, to me it was a taboo as my parents always refers it.” (P8Q4B).

“Aeee, kegumbo inandi yi tsakaneka oshili aaye. Ngaashi lela meme shi twa putuka, aae agh meme ke ku lombwela iinima ya fa mpoo aae.” (Interviews P2). [Freely translated: No, I did not come across it at home at all, particularly my mother never talk of sexual issues].

“Tse nghi twa putuka mbele akuti neke yi moneneko yemwene nenge ongeepi walye, osho twa putuka nasho, osho tu shi” (P7Q4C). [Freely translated: We were raised to explore things by ourselves that is how we were raised, so it is what we know].

“Aakuluntu yetu thimbo ndiya ka kwa li ya manguluka okupopya nase kombinga yiinima mbika, oya li ye wete sha fa oshiholekwa. Ngeno ka kwa li twa longwa mosikola ngeno ina tu tseye sha” (P15Q3B). [Freely translated: I think it was important to be taught topics of human reproduction at school because our parents were not comfortable talking to us about these things, they perceive it a secret].

“Shi twa kala mosekondele, omu na yakwetu mba ya zi ngiika komagumbo ku na aakadhona mbaa aanene, opuna nee omambo go “silikende”, ogo nee twa kala ha tu leshe. Yakwetu taye ga yaka nduno komagumbo, taye ya nago kosikola, omo nee twa kala tatu leshe, ta tu ningi nee eeshungi, omo nduno twa ka tsakaneka iinima mbyo, komagumbo, aae agh” (Interview P2). [Freely translated: I was never told of any sex-related from my parents. There were some girls with “silikende” books in secondary school that I believe they stole from home. So, I came to learn sex-related issues through discussions in the hostel as we go through these books].

Very few parents indicated that they were not comfortable when heard of sex-related issues:

“I was not comfort but very shy because my parents and most of the elders told us that it is forbidden to talk about sex” (P9Q4B).

“Ondali nde shi uvako sha fa oshikumithi noshi sithihoni. Ethimbo ndiya naakuluntu yetu kaya li ya manguluka okupopya nase iinima ya pamba iihulo. Ngame wo kanda li nda yeledwa kutya iihulo okwa dhilaadhilwa shike” (P15Q2C). [Freely translated: I found it was terrible and shaming, because our parents were not comfortable talking about sex-related issues. It was not clear to me as to what is really meant when talking of sex-related activities].

Another parent responded:

“Kanda li nda manguluka sho te lombwelwa, unene ngaa sho kuku a lombwele ndje tango kutya, shaa andi keya methimbo lyokukopola, andi ka opaleka. Oku “opaleka” oshali sha tilithandje lela shaashi kanda li ndi shi uvite ko nawa, onde ke shi uva ko ike

sho nde ke shi longwa kosikola, ndele tango onda li ngaa nda sa ohoni” (P18Q2C). [Freely translated: I was not comfortable particularly when my grandmother told me for the first time that once at puberty, I will “clean”. Cleaning was a terrible word to me, I never understood what is it all about, I came to understand it when taught at school, but at first it was very shameful].

“Parents were hiding proper information” (P9Q2C).

One participant explained:

“Molwashoka omwa li ta mu longithwa iitya mbi ihayi popiwa paakuluntu, aniwa oto popi uusatana tashi vulika udhengwe nokuli” (P19Q4B). [Freely translated: I was not comfortable because the words used were not acceptable if parents are around and if heard, you would be beaten because the words are said to be satanic].

Adding to this, one participant recalled how he experienced being beaten by his parents:

“Yaa, shaa nee mwa kala nganghi twa kala omutumba nghi, (ndishi otwa zala oukafa wuupundja) tuli’no poukavona, atu tala nee show a kuutumba ogh, aaye, tala tala tala... ..ogh. Omukalo nee mbo, mbo otau ke ku vengifa nokeumbo, shaa to popi kutya okakavona owe kamona epenge ndyo”. (Interviews P4). [Freely translated: As we use to play out there, (by then we use to dress animal’s skin, no under wear), if you happen to see the private parts particularly that of a girl and you happen to talk about it, once heard you will be beaten at home].

With regard to talking of sex-related issues at home when once young, other respondents stated that it was not allowed to openly talk about sex-related issues. The following quote is one sample of a parent’s response:

“Eeeno ogh, atu popi ka tu li paakulunhu, ndele aakulunhu nawo otaa popi ike ya manguluka shaa pe na aakulunhu ya kwawo. Shaa pu na okanona, aakulunhu inaa manguluka, shoosho akuti kaanaye zapo u tale mpo, u li nopaakulunhu, zapo” (Interview P1). [Freely translated: Previously we do, but not when parents are around. So do parents talk to each other openly, but if children are around, parents are not comfortable and it is for that reason you find children are told to move far from parents].

The insights from the above quotes reveal that most rural parents who participated in this study came from a cultural background that viewed sex-related matters as taboo, that it cannot be said to children and openly in public. Hence, the majority of the participants (85%) indicated that they never heard of such things at home. Likewise, some studies (Nambambi & Mufune, 2011; Olakunmi & Akintomide, 2010; Silas, 2015) indicated that sex education is regarded as taboo by many communities and that it should not be mentioned in public and particularly not to children.

On the other hand, it appears that some parents experienced talking about sexuality, yet they indicated that it was not easy and that they were not comfortable talking about and hearing of sex-related issues. These results are in agreement with Chu et al.'s (2015) study who argue that traditional values limit discussions about healthy sexual behaviours leading to lack of sex education in the home environment.

School-based experiences

As indicated earlier in Section 4.3, some parents were taught while some were not taught sex-related topics. The following quotes reveal how parents experienced teaching and learning of the topics of human reproduction in schools:

“Ina tuyi longwa, iipalanyole yi na sha nolualo opo ike ye ya ko paife. Kayali ko konalenale” (P2Q3B). [Freely translated: These topics were not part of the curriculum during our time, so, they were not taught to us].

“Ina tu longwa kombinga yolualo” (P7Q3B). [Freely translated: We were not taught topics of human reproduction].

“Aaaye, aaaye, nando esiku limwe” (Interview P1) [Freely translated: No, no, not at all].

Some parents indicated that sex-related topics were taught to them. However, they further indicated that it was not made clear, neither was it explained for them to clearly understand. The following statements support this:

“It was not made clear to us, teachers failed to explain in more details and why we should be taught these topics” (P14Q3B).

“We were not really taught to understand everything and we were not comfortable to participate” (P22Q3B).

“Eee, opo ike nghaa nde shi lombwelwa nee, ame andi ka tsakaneka nee embo kosikola ta tu longwa nee, ndele pwatya nghaa nomulongi’no noho naye ngu ta longo, agh, okwa li no’omukulukavi efimbo linya, ota longo nghaa ndele oinima, yimwe nghaa uwete kutya ota fatulula ndele yimwe iha fatulula lela ngiika nyi osho shi na kukala.” (Interview P3). [Freely translated: Yees, I just got a tip of sex-related issues home, then I came across it at school, yes she was teaching but could not explain that we understand].

“It was not made clear why learning those topics, at the same time I was very shy because I did not hear it before” (P9Q3B).

“Not so sure why? Because teachers were not comfortable teaching and could not make things clear, not even explaining the importance of learning it” (P8Q3B).

“Katwa li naana tuu vite ko nondo omunhu, ngahi, unenenene opwa tya ngashi iinima shi ayi longwa, nando oshilyo shomunhu ashitumbulwa, aalongi ihaa kambadhala, iha hala naana kushipopya moshiwambo. Apeya’ike eshitaakume” (interview P2). [Freely translated: We had a poor understanding. Teachers used to teach in English and have to translate, but in this case, teachers tried by all means to say things in English only, and never wanted to translate].

“Otwali’ike tu wete omunhu twa fa tatu longwa uupagani. Nanghi atuyi kohostele, otwaadha twe shi tula ko nghaa ongalo tatu shi yolopo. Uwete ike lela kutya ano omulongi okwa dhilaadhila nghaa? (Interview P2). [Freely translated: We regarded it the teaching of paganism. And it used to be a laughing topic in the hostel, asking ourselves if the teacher thought about it before the lesson].

Two parents responded:

“Ogh... aaye, kasha li oshipu kaa, shaashi umwe oshinima ino shi uva nee nale owa hala okupwaikina, maar nge ashikeya kepulo, aae kupula kaa” (Interview P3). [Freely translated: Ogh..., no, it was not an easy thing, it happened that I never heard about it, but than I always wanted to listen attentively but I was never free to ask questions].

“Olundji otu li monghaa noshoni shaashi thimbo limwe omulongi sha a pita mo uunona uumati awu tameke kumusipoela nando kuli, unenenene nghaa ngashi uunona wuukadhona iinima mbi ya nika eemenstruation, ngo’oto tala hayendji yaza komagumbo yeshi kutya kuuyuni okuna iinima yafa mpoka’aye. Yamwe opo’ike ya ka patulukila hwii.” (Interview P2). [Freely translated: We always use to be very ashamed, and many times after the lesson the boys start spoiling us, particuraly the issues of menstruation, by the look of things, few had no knowledge of sex-related issues and only came to learn it at school].

Some of the respondents recalled why these topics were taught to them.

“I think it was mainly for us to know and understand human sex organs and their functions and to know reproductive health” (P5Q3B).

“I think it was meant for us to know the human body systems e.g. reproductive system and how it function” (P17Q3B).

“Otwa longelwe omakwatathano paihulo kutya inatu dhana pamwe naakadhona, yo aakadhona inaya dhana pamwe naamati. Inatu ninga uukuume naakadhona unene pamukalo gomumati nomukadhona” (P20Q1B). [Freely translated: We were taught love and relationship matters that we must not play together with girls, and that girls must not play together with boys. We must avoid close relationship with girls’ particuraly that of a girl and a boy].

The majority of parents indicated that it was humiliating and that they were not free and comfortable when sex related topics were taught to them:

“I felt it is humiliating to expose what is meant to be known by females or males only. I felt teachers were exposing us and it was so shameful” (P14Q4B).

“I was not free and was very shy because boys were present during the lessons too. Traditionally, these topics are not discussed while the other sex is present, it suppose to be a secret” (P17Q4B).

“Kanda li nda manguluka, oshoka iipalanyolo mbika oya nika ohoni, na ondali ndu uvite sha puka kupopya iitya yi thike mpo ndi li mepipi eshona na ohandi kala nda hala osikola ya pita mo” (P21Q4B). [Freely translated: I was not comfortable because these topics are shaming, and I found it not proper to talk of sex-related vocabularies because I was young and always wish the school to knock off].

Another participant shared their classroom experiences during lessons as well as during group activities:

“Ngeenge otwa pewa nande “eeactivity”, nge a tu ningi mogroupa a tu ningi’ike yaakavona puwo” [Freely translated: If we are given an activity to do at a group, it only used to be a one-sex group, just for girls and boys have theirs]. “Atu longwa, kwaa kutumbulwa “testis”, opu na ngu ta vulu oku shi tu lombwela mOshiwambo? Ogh aae, omunhu ou shi shii ndele owa mwena ike. Shaa nghaa ndele umwe te shi popi, ‘omatondo’, meme, omunhu ota kala asiikwa ounye lela kutya ogh ota popi oishi mbi mokati kaanhu? (Interview P3). [Freely translated: Let’s say the teacher happen to ask what “testis” in Oshiwambo, ogh, no...., you know the word but you have to remain quiet. If one happen to say it “Omatondo”, mum, that will be an embarrassment that everybody will be in shock that you can openly talk of it in public].

“Ogh, aae, omwenyo owafa nghaa wali, nditye owa fa nghaa wali ino hala okushipulakena. Owete nghaa aanhu yafa aapopi uulunde lela. Uwete ike lela kutya aanhu mba aapopi lela iinima ya nika uulunde mba. Noku kutha ombinga ku kuthombinga shili aae. Ngaashi kosikola, ou shi kutya naalongi yamwe aakalukwa nomadhina giilyo mbyo yosexual reproduction. Shi ta longo oshilongwa sho Biology” (Interview P2). [Freely translated: I was not willing to listen to the teacher, to me she was talking of evil, thus it was not easy to participate into evil discussions. Because of its nature, some teachers were even named after sexual reproductive organs as they teach them in biology].

Parent-child sexual discussions

The results revealed that many parents found it difficult, and not easy talking to their parents as well as to their children about sex-related issues. The following statements illustrate this point:

“I was not comfortable and I could not participate in the discussion even by asking questions” (P22Q2C).

“Oshali oshidhigu shomeme a li a lombwele ndje kombinga yiuhulo, na ondali nda tameke noku kala awike ihandi ka dhana we nayakwetu ngashi handi shi ningi shito,

oshoka opwa li woo naamati” (P12Q2C). [Freely translated: It was not easy when my mother first talked to me about sex-related issues, I even stopped playing with friends as usual because there use to be boys].

“Oto lombwelwa’ike owe auke, ndele opo ka kololo nokuli ihapu ende nomunhu gumwe a pwa ikine’aaye” (interviews P3). [Freely translated: You always to be told alone and secretive].

“I was so shy. I could not even ask a question about sex-related issues. It is not allowed, not a good thing” (P14Q2C).

“Iha shi kala oshipu. Okanona a ke ku pula omapulo ogendji go omadhigu. Kamwe ita ke ku pulakene nenge kayamukule nayi” (P20Q4C). [Freely translated: It never be easy. A child asks a lot and difficult questions while some may not listen or may respond badly to you].

“My child use to ask me critical questions that are difficult to answer” (P9Q4C).

“Children give you that look, which makes you feel uncomfortable, thinking they would probably be asking themselves if I do such things” (P22Q4C).

“As a parent, it is not easy to discuss this issue openly to our children” (P17Q3C).

Very few parents indicated finding it easy talking to their children about sex. The following comment justifies the statement:

“Oshipu shaashoka omayelele paife otaga gandjwa kosikola, momambo, mooradio mookuume, ambala kehe pamwe tapu hokololwa omilele” (P19Q4C). [Freely translated: It is an easy thing now because children have access to sex-related information at school, in books, from the Radio, from their friends and almost everywhere sex-related issues are a headline].

With regard to what exactly parents can talk about to their children, some parents explained:

“I can talk about early/teenage pregnancy” (P9Q3C).

“Andi vulu okupopya kombinga yuuwinayi tayu zilile momilele, nokwiigamena komikithi dhohoni” (P19Q3C). [Freely translated: I can talk about the danger of being engaged in sexual intercourse and also protection against STIs].

“Tala ko omukadhona gwandje, sho watya ngeyi owa koka. Ino dhana we naanona yaamati, ikaleka kokule nayo. Omwele ihagu kalele onyama” (P13Q3C). [Freely translated: Look my girl, it means you are grown up now that you are like that. So stop playing with the boys and keep a distance. *The knife never be closer to the fresh*].

One parent explained:

“Yina ta ti nee, paife owa koka nee, nyi uli nhyo, nge owe i yefela aalumenhu to ningi epunda. Ndele ihati nge otoy nolumenhu ouninga ongandi, outya ongandi nongandi

aaye, nenge nge ouli komafimbo, inoya nomulumenhu, ke shi popya aae, nge owe shi ningi, nena, okaana owe kamangulula, we ka mangulula ike lela kutya nakaye moipala” (interview P1). [Freely translated: The mother would say, now that you are like that, it means you are grown up. If you allow a man, you will become pregnant. But could not say, if you go with a man do like this or so, no, or if you are on your periods do not go with a man, no, can't say that. If she said that, it is like you give permission to engage in sexual activities].

Another parent responded:

“Shaashi olundji nge oto tala aanona nge otaa longekidhwa shi na sha niinima ya nika iipala, uuna omunhu uuka mondjokana” (interview P2). [Freely translated: In most cases, you only talk sex-related issues once a person is being prepared and ready for marriage].

The insight from all the above quotes reflect Vygotsky's (1978) socio-cultural theory that views a child as a product of social interaction and that human development results from a dynamic interaction between individuals and society. Concurring, Nghipondoka-Lukolo and Charles (2016) argue that culture, attitudes, beliefs, values and behaviours that are characteristic of a particular social group that can be transmitted from generation to generation, shape and influence such generations' perceptions and behaviours. The knowledge and experiences gained through social interactions between parents and their children, peers and the society at large will thus be passed on to the next generation.

Furthermore, the findings revealed that rural parents have a wide range of experiences, ranging from home to school based experiences as well as their experiences regarding parent-child sexual discussions. That is, how they experienced teaching of sex-related matters at home and school level and the society at large through social interaction. The results further showed that rural parents came from strong cultural backgrounds, where they gained those experiences. Hence, the majority (85%) of parents in this study held strong cultural and traditional values and beliefs that sex-related matters are not discussed to children (as indicated by many rural parents).

Although few parents (5%) indicated that they were not taught sex-related topics at school, the majority (95%) who happened to be taught found it was not comfortable for them and could also tell that their teachers were not comfortable teaching sex-related topics. This is revealed by some parents that sex-related topics were not made clear and that they were so

shy to even ask questions on sex. The findings further revealed that some parents even found it humiliating talking about sex education to their children. This argument concurs with Wight and Obasi (2003) and Fitzsimons (1991) who point out that culture is an obstacle to sexuality education and most parents do not provide sexuality education to their children because it is cultural taboo for parents to talk to their children about sex-related issues.

Furthermore, besides the fact that the majority of the participating parents indicated they covered most of the sex-related topics in school, the results showed a communication gap between parents and their children due to the fact that sex-related topics are regarded as taboo. A study by Olakunmi and Akintomide (2010) revealed that parental educational attainment does not significantly influence parent-child sexual communication.

4.3.2 Parents' attitudes towards sex education

Parents were asked to share their attitudes regarding teaching and learning of the topics of human reproduction in junior secondary school. The findings revealed that parents had different attitudes ranging from the inclusion of sex-related topics in the curriculum, responsibility of talking sex-related issues to child, parental involvement in the teaching of sex-related issues as well as gender based views.

Attitudes on the inclusion of the topics of sex-related topics in the curriculum

It emerged that the majority of parents (78%) have favourable attitudes towards teaching and learning of sexuality. The following quotes validate this statement:

“The topics on human reproduction should be taught in schools so that children get a thorough understanding to be responsible in decision making, and to reduce teenage pregnancies.” (P8Q8C).

“Sex education is very important subject to the entire society, I therefore recommend sex education to be part of the curriculum and must be taught from Grade 5 upward” (P14Q11C).

“I would feel good and consider my child lucky because my female Life Science teacher did not teach me much, maybe she was not comfortable and that results in me not being comfortable talking about these issues to my son and daughter” (P17Q6B).

“Time has changed. In today's world it is a good thing for our children to be taught such topics” (P8Q6B).

“Oshili nawa iipalanyolo otayi ka gunu okulongitha omilalo mepipi eshona” (P11Q6B). [Freely translated: It is good because these topics help learners to be aware of the danger of sex-related activities while they are young].

“Sex education is right to be taught since children at these grades are roughly 13-16 years and are sexually active. It is important that they are taught the right things to practice safe sex.” (P5Q6B).

“Topics on human reproduction must be taught from lower grades so that children grow up with the necessary information about sex issues” (P14Q8C).

“Uunona ngele otau longwa nee kombinga yiuhulo, melongo namugwedhwe oshilongwa shehungomwenyo noshowo ombimbeli yi galulwe ongo shi longwa” (P4Q11C). [Freely translated: If children are to be taught sex education in schools, then counselling and biblical studies be introduced in our curriculum as subjects].

In contrast, some parents indicated negative attitudes toward teaching and learning of sex-related topics:

“Omufiululwakalo oweshi keelela, inatu shi pumbwa shoku lombwela okaana ngaanhyo, paife okaana oka shuyifwa nale oinima oyindji moskola, okaana ku za mpo, oinima ngha mbi ka longwa mbi, ake keyi yelekela, ake keyi lola, omanga omufiululwakalo ta u ti shaa we shi ningi ino pumbiwa we megumbo” (interviews P4). [Freely translated: Culturally sex-related issues cannot be said to children. The cultural teaching is that once engaged, we don't need you in our home, yet schools are exposing children to sexuality, which leads to practicing it].

“Sho shene inashi simana ngele aanona oye li mosikola taya longwa omilalo. Elongo ewanawa ina li longa iihulo” (P13Q8C). [Freely translated: It is not important for children to be taught sex issues while still in school. The best education should not teach sex issues].

“Ngame mwene inandi longwa iipalanyolo mbyoka, itandi tiko sha kuyo. Elongo ndyoka sho lyeya poosikola, olye egululila unene aanona okuya miuhulo nopomahala goosikola sigo osha eta nokuli esimhapalo lyaanona aashona poosikola.” (P13Q3B). [Freely translated: I was not taught those topics, so I have nothing to say. It was after the introduction of those topics in schools that it provoked and lead school kids into sexual activities resulting into teenage pregnancy].

“Kandi uvite lela eyele ndika lya yela. Okanona ota ka longwa osikola ndele ha ku longwa okulalathana paihulo.” (P6Q6B). [Freely translated: I don't understand the idea of teaching sex-related topics. Schooling should not involve sexual activities].

Some parents' attitudes regarding the inclusion of sex-related topics in the curriculum reflects that not enough consultation was done prior to the introduction of sex-related topics in the

school curriculum. This is supported by one parent who said:

“Epangelo nenge aavuti yelongo oya li ye na okupula aavali kutya okaana naka longwe shike nashike kombinga yoihulo. Ngenho ihatu shi popile aye, kashishi’oshiwa. Shaashi osha kuna mounona omamito nganyi tau mitaamita nghyo” (interview P4). [Freely translated: The government and curriculum developers suppose to seek parents’ audience regarding the inclusion of sex-related issues in the school curriculum. We are against it, it is the root cause of increased teenage pregnancies].

Another parent commented:

“Omayiyuvo yetu patatu oya pumbiwa. Kutya nge osha simana elongo ndyo li ningwe, Noku yandjwe nghaa kutya nge a li yandjwa nali tameke peni. Shipi osho shili mondjila osho shi longwe tango. Nge ashiya pombuto yo HIV, necontraception, epangelo ali ti naku longifwe eecondoma, inghu ongeleka otayi ti ino. Nge omunhu okwa longifa ocondoma, kongeleka okwa pogola nale. Wee nghu omunhu oto mu lombwele a longife ocondoma yo ongeleka otayiti ike ino” (Interview P3). [Freely translated: We need a combined voice i.e. parents, school and church on what to be taught and at what grade level. There are contradictions, for example on the issues of HIV and contraception. The government is in support of condoms while on the other hand the church stand on the the principle that “don’t”].

Other parent elaborated:

“Uunona otawu kala ihawu miti ngeepi, wo tawu longwa kaalongi meesikola oipala, oinima mbi a mu longo meesikola mbyo, onye a mu eta omeya mondunda.” (Interview P1). [Freely translated: Kids are falling pregnant because they are taught sex-related topics in schools, you are the root cause of teenage pregnancies].

“Pamadhilaadhilo gandje kandi wete iinima mbyoka hayi longwa nande olye” (P1Q3C). [Freely translated: In my views, I don’t think one can be taught these issues].

“Itandi hala aanona ya longwe iinima yafa mpoka, oonona itatu kewu vula sho tawu longwa iinima mbyo” (P2Q6B). [Freely translated: I will not support children to be taught things like that, once kids learn those things we will not manage to raise them].

“Ondi wete ka shi shi oshiwanaawa, otashi yonagula po aanona mbala” (P7Q6B). [Freely translated: It is not a good thing, it leads young ones into early sexual activities].

Some parents felt kids are young to be taught sex-related topics and that these topics are not age appropriate:

“I feel they are young to be exposed to all this sex stories” (P14Q4C).

“These topics are not age appropriate, so they are not important, particularly contraceptives/safe sex, marriage and lifetime commitments” (P9Q6C).

“Ngame kandi uvite nawa, oshoka uunona uushona natango. Oshivanawa ngele uunona otawu longwa okuza po 11--12” (P13Q6B). [Freely translated: I am not happy with that, because at Grade 8–10 children are still young. It would be nice if children are taught these topics from Grade 11–12].

“Topics that I think are important: sexually transmitted infections, teenage pregnancy and decision-making. Other topics are not of any importance to our children but to spoil their lives.” (P8Q6C).

Parents were also asked to share their views regarding the responsibility for sex education. Findings revealed that some parents felt that it should be the school’s responsibility to do so whereas some felt that it is their responsibility. None of the participants indicated that it should be the Church’s responsibility. However, some parents felt that it should be a joint responsibility of both the church, parents and schools. The following quotes are evidence to the statement above:

“It is a good thing that it is taught in schools. Teachers should take it seriously because they might be the only hope for the learners, as parents at home do not have enough courage to discuss these matters to their children due to what culture and tradition dictates” (P17Q8C).

“Omuna nghaa shili yamwe mbaa ye li pamuthika gu li nawa, ndele omuna yamwe ye na omapulo, ndele kena’ike mpa te li pula aae. Maar nge okwa yi kosikola kuna oshilongwa shili nghano, opuna ompito yimwe aka mone po’eyamukulo” (Interview P2). [Freely translated: Some children have sex-related questions not answered, there are no answers home, if taught in schools, the possible answers will be provided].

“Teachers should explain these topics fully. Learners are exposed to technology and are more curious, therefore they need to be made aware of the danger of STI and know how to take care of themselves” (P14Q6B).

“Uunona otawu yelithilwa ashike mpo inau yelelwa, oshoka owuna iifo, ooTV, eengodhi, facebook nshowo omambo. Ethimbo sho tali lunduluka, ota li etelele omalunduluko wa hala ino hala” (P4Q6B). [Freely translated: At school these topics are just explained to the learners where it is not clear to them, because they have newspapers, TV, cell phones Facebook and books. When the time changes it brings about changes that we have to accept].

“I think the teachers should do their job properly and teach the learners about sex matters” (P17Q3C).

These results showed that parents had supportive views for sex education in schools because teachers are trained to teach and they have the know-how on to handle it better than parents whose culture prohibits discussions around sexuality.

On the other hand, many rural parents were of the view that it should be a shared responsibility, and the following quotes support that statement:

“Both parents, school and church must have one voice. What we are seeing is an indication that there is no relationship between members of the society at understanding the importance of teaching and learning of sex-related matters in schools, home and society at large” (P9Q7C).

“Elongo li na sha neetopo lyaantu, oshili oshinakugwanithwa shaayehe. Aanona oya pumbwa omayelele gomondjila pethimbo lyoopala” (P17Q7C). [Freely translated: It is the responsibility of all to educate children about sex-related matters. And, to ensure that children are given the right information at the right time].

“Parents, teachers and everybody need to talk more about sex education issues for our children to eager learning sex related matters so that they will be able to make informed decisions” (P8Q11C).

“It is the responsibility of everybody and every organization to take part in educating our children about sex-related issues. In so doing, children will take it serious since the support is by everybody” (P14Q7C).

“Omuvali omugandji gwomukanka gwiihwapo komunona. Ongerka oshinakugwanithwa shawo okulonga omunona kutya ombimbeli otayi ti ngiini. Osikola otayi thindilemo elongo lyaavali nongerka nomifango notseyo yawo yomuule kiipambe yihulo” (P11Q7C). [Freely translated: Parents are the main sources of information about sex. It is the Church’s responsibility to advocate for biblical studies while the school sums up by consolidating children’s sex-related information and expertise from both home and church].

Few parents felt it should be their responsibility:

“Home education is very important and this will help kids to do well at school. Parents need also to be open in helping kids in home works” (P8Q7C).

“Parents are the first teachers of a child. School should supplement since this is where subjects’ specialists are” (P5Q7C).

The results revealed that the majority of rural parents favoured the teaching and learning of sex-related topics in schools. Interestingly, they also suggested and felt that parental involvement in sex education is crucial. This indicates that parents’ views are in support of a shared responsibility regarding teaching and learning of sexuality. According to Weaver et al. (2001), their study in Canada revealed that 95% of parents who participated felt that sex education should be a shared responsibility between school and home.

Attitudes regarding gender and sexual discussions

The majority of parents (73%) expressed that they do not discuss sex-related issues with their children. It is not an easy thing to do. On the other hand, culture restricts discussion about sex to children. However, few parents (mothers) (27%) indicated that they only find it a bit easy talking to their girl children.

“Owino ondiyina lela hundred percent, maar pamufiululwakalo efimbo limwe owa fa wuvite kutya nge andi lombwele omumati iinima mbi yange ondafa andi iyaneke pomutenya natate okuwete kutya nge ota popi iinima yaye pomukavona okuwete kutya oteyi yaneke” (Interviews P3). [Freely translated: I have the knowledge about sexuality 100% but due to my culture, it is embarrassing and like exposing myself to talk to my boy child about female sex-related issues, so too my husband cannot do it to his female child].

Interviewees were asked if they could not even talk to their girl adolescents about the menstrual cycle. The following were the responses from the interviewees:

“Aaye, kashiko aee, ka kuna oshinima shili nghaa nghyo. Okaana naka tye ike ondi na oshipute, ndele noho ka kaya kuhe, akayi kuyina. Eshito kalunga nyi e ka shita ike okushiike kutya oshiima nyi, andiyi kumeme” (interviews P1). [Freely translated: No..., there is nothing like that. Let a child say I have a wound, but will never say that to the father, will always tell the mother and it is by nature as she observe, it is obvious she know that she should talk to the mother].

“Okuza konale okanona oke wete nale kutya okashitwa kafa yina, shoosho a ka lombwele ike yina. Omunikavi oku na oumbanda oku lombwela omulumenhu, oinima oyo honi” (interview P4). [Freely translated: Naturally a child can see she is like the mother, so, she will always tell the mother. Women are fearful of talking to a man about sexual issues. Sex related issues are shameful].

Some parents were of the view that talking to children particularly about puberty, menstruation and contraceptives was of much importance:

“It is actually important to discuss such matters for example going through puberty, periods etcetera, because I think children need to be informed about sexual matters by their parents and not only at school or radio and magazines” (P17Q6C).

“It is very important to talk about contraceptives or safe sex because they will eventually reach the stage of being sexual active” (P22Q6C).

This is in agreement with Nambambi and Mufune (2011) that discussions around sex-related

matters are culturally and traditionally seen as taboo but nowadays they do take place especially with mothers around menstruation, pregnancy and HIV/AIDS. Another parent responded:

“Kungame ayihe oya simana, oshoka ayihe otayi popi kombinga yonkalamwenyo yokanona, Na, osha simana oku kundathana nokanona, opo ka kale monkalo ombwaanawa yo yi na uundjolowele” (P21Q6C). [Freely translated: To me, all are important because they have to do with the future and health of the child].

“It is a very sensitive subject to discuss especially to children. And because it is sensitive, I don’t think I will provide the child with all the necessary information. I may opt to omit some information because I can be uncomfortable discussing it or I will feel that I am teaching the child to engage in such activities. The lesser the child know, the better it is for him or her” (P17Q4C).

Some parents held strong cultural beliefs regarding sex education that sex-related matters cannot be said to children particularly a man to a girl:

“Aae, se moshiwambo, kapu na omulumenhu, ta popi nomukavona iinima mbyo. Omukavona ota popi nayina, ye, omulumenhu oto popi nomumati, ndele oto popi ike iinima mbi yokukeelela omaukolokohi, kutya to etele ezimo lyeni, nosho tuu” (Interview P1). [Freely translated: No, in our culture a man does not talk to a girl about sex-related issues. The mother talk to a girl while the man talk to the boys. But only to advise the boy not to cause trouble in the family].

Another parent also responded:

“Okaana ngha andi vulu okupukulula, omunhu ngu ndi wete kutya okwa koka. Haunona wetu mbu mu li nayo posikola mpa aaye. Kandi na esiku ndi shi ninge aae” (interview P4). [Freely translated: I can only talk to a mature person, not school children. I will never do that].

Another parent indicated that if they were to discuss sex-related matters with children particularly boys, it could only be either because they were misbehaving out there, or they were ready to get married:

“Aaye, shaa andi ku lombwele, ourwete ondaka yoye nghji tayi shendje, owa koka. Onge to ningi iinima yafa youlayi nghaa nghu uli koshana. Omumati nokuli mela akuti ike inda, omulumentu ombwa, iho lombwelwa aae” (Interviews P1). [Freely translated: No... once you heard parents asking if you noticed that your voice has changed, it is only when you are heard of being misbehaving out there. Parents’ have a say, “a man is a dog,” so you will be told nothing].

Desire for knowledge and need for training

Most of the parents who participated in this study indicated their willingness to gain knowledge on how to talk to their children about sex-related issues:

“I want to be educated more on matters related to sexual issues so that I can be able to help my children in their home works. I will also be open up to talk such issues to my children at home once trained. I will be able to familiarize myself with their subject matters” (P8Q9C).

“I want to know how to guide my teenage boys to go through puberty and teenage ages safely” (P5Q9C).

“Nkene ndina okupukulula aanona yandje shinasha nuwanawa muwinayi kombinga yokutseya iihulo” (P19Q9C). [Freely translated: I want to know how to advise my children on the advantages and disadvantages of practicing sex].

Parents were also asked if they would be interested in attending a sex-related workshop for parents. The majority indicated the interest in attending such a workshop. Thus, they provided suggestions regarding programmes for parents about sex-related issues:

“If there be a programme to educate parents on the importance of the teaching of sex-related matters so that it can be tackled both at school and home” (P7Q11C).

“The ministry of education should prepare topics on sex education for parents and start running workshops for interested parents’ throughout the country” (P17Q11C).

“I believe parents should be advised and trained on how to talk to their children about sex-related matters” (P22Q11C).

“Ando ku ningwe ngaa eetundi wo dhaakuluntu, nkene tu na okukala nokupopya aanona yetu, pamwe ihatu popi nawo nawa. Yo ishewe aanona aadhigu noonkondo yethimbo lyopaije” (P12Q11C). [Freely translated: It would be wise if there be lessons for parents on how to talk to our children, possibly we use not to do it right. But nowadays kids are difficult people to deal with].

In contrast, some parents had different views regarding a parent’s workshop, thus some indicated unwillingness and uncertainty about attending such a workshop:

“Molwashoka iinima ayihe ondi yishi nale” (P3Q9C). [Freely translated: No, because I know all already].

While another parent indicated uncertainty about attending:

“Not sure, on one hand I think I would like to attend such a workshop that maybe I will gain confidence and ways how to discuss sex-related matters to my child. But, I am not so sure I will be comfortable with the subject being discussed in the open. It is just a

sensitive matter for me since I did not have that exposure. It also makes it very difficult for me to pass on the information to the child” (P17Q9C).

The study ran a parents’ workshop for interested parents as an intervention to support and help parents understand the importance of teaching and learning of topics of human reproduction in junior secondary school. During the reflection section, one parent indicated that although she understood the importance now, she would still find it difficult to talk to her children.

“Kandi wete andika vula okupopya nokanona shinasha niipalanyolo mbyo. Shapo andi popi kombinga yinakugwanithwa yawo onga omumati nenge omukadhona” (WO). [Freely translated: It will still be difficult for me to be open up with my child about such topics. Instead, I will talk to them about their roles as girls or boys].

Another parent responded that she does not think she will be able to openly talk to her children particularly on the genital organs by mentioning their exact names:

“Meeme, yimwe po nghaa ndele yimwe po aaye ogh.” (WO) [Freely translated: Mum, just some but not all organs].

“Kumanguluka aaye. Shapo oto mu pe ike shafa efano shila. Ndele sigo opaiife nghaa kandi shi wete aae. (Laughing). Kandi shi wete aae... wu mu lombwele lela to ti shika onhumba? Oh, aae. Ngaashi yimwe mbyono niilonga yawo ku’yeeta aaye. Shila oto ti oshilyo shi li komumeme.” (Interview P2, after the workshop). [Freely translated: I will not, unless I will show the diagram of it, but not to say this is what or their functions no, unless you refer to it as a “women’s organ”].

Interestingly, some parents found that the workshop was useful and that they felt things differently:

“Moshigongilonga ondi ilonga mo sha, shono inandi kala nda tala ko onga sha simana oku gandja kuunona wandje, andi ka vula okushi ninga lela” (WO). [Freely translated: This was very educative, it taught me of something I will be able to teach my kids that I never see as important].

Another parent commented:

“Omunhu paiife ouwete nghaa kutya osha pumbiwa okupopya nokanona koye shaashi ethimbo ali’ende tali lunduluka” (WO). [Freely translated: At least, now I understand that it is necessary to talk to my child because things are changing with time].

The majority of the rural parents showed a shift in attitudes and hence supportive views towards teaching and learning of sexuality. Similar studies from Canada (Mckay et al., 2014; Weaver et al., 2001) also revealed that the majority of parents agreed that sex education

should be provided in schools. However, the findings here revealed that there were mixed views and attitudes among rural parents regarding the inclusion of sex-related topics in the school curriculum as well as with regard to the responsibility of talking to children about sexuality. There appears to be a cultural difference between Namibia and Western countries such as Canada regarding social attitudes towards adolescent sexuality, parent-child communication about sexuality.

As illustrated, some parents in this study held the view that the reasons why there is a high drop-out rate due to teenage pregnancies is because children are taught about sexuality in schools: *“Uunona otawu kala ihawu miti ngeepi, wo tawu longwa kaalongi meesikola oipala, oinima mbi amu longo meesikola mbyo, onye amu eta omeya mondunda.”* (Interview P1). [Freely translated: Kids are falling pregnant because they are taught sex-related topics in schools, you are the root cause of teenage pregnancies] and *“Culturally sex-related issues can not be said to children. The cultural teaching is that once engaged, we don’t need you in our home, yet schools are exposing children to sexuality, which leads to practicing it”* (Interview P4).

While some parents felt that sex-related topics should be taught from Grade 5, few parents were of the view that children in Grade 8–10 are too young for sex education, thus advocating for an age-appropriate sexuality education. This is similar to the findings of Barr et al. (2014) which revealed that although parents expressed supportive views about the inclusion of sex education in the school curriculum, some parents would allow their children to participate in age-appropriate sexuality education. There appears to be a common perception among Namibian parents that sex education in schools leads to earlier sexual activities and experimentation whereas in North America and Western Europe very few parents believe this to be true.

According to Nambambi and Mafune (2011), there is a need for parental empowerment in participation and involvement in sex education to enhance parental competence, skills, knowledge, sex-related information and interpersonal relationship between parents and their adolescents to enhance open communication. It is revealed that parent-child communication is more gender based. Many parents indicated talking more to girls, particularly mothers, and nothing much for boys. Furthermore, the results showed that mothers only talk to girls while boys only talk to the fathers due to the cultural belief that a man cannot talk sex-related issues

to a daughter. These results revealed similar findings to Dilorio, Kelley and Hockenberry-Eaton's (1999)'s study which found out that early adolescents (13–15 years old) is characterized by more sex-based discussions with mothers than friends or fathers. Similarly, Martin and Luke (2010) indicated that mothers talk more to daughters than sons about romantic relationships, reproductive bodies and morality but not about sexual abuse, intercourse or pleasure. To this end, Measor (2004) argues that attitudes to information and knowledge vary significantly with gender because of the sources of information that individuals rely upon and prefer. However, one thing to be similar across cultures is that mother-child communication about sexuality seems to be more common and preferred than father-child communication.

Although parents were willing to gain knowledge, it was observed during the workshop that the usage, shyness and self-confidence constrained parents from understanding the importance of sex education. About eight out of ten parents who participated in the workshop were very shy and had difficulties using sex-related vocabularies openly throughout the workshop. Some parents could not refer to a penis in vernacular. One parent said '*Okapipi*', while others said '*okashila*' during the labelling activity. "*Inyii..... Oooo, ogh aaye ogh, okapipi. Oshinima oshiviwu u tale hahaaha...*" (WO). [Freely translated: This one is... oooo, ogh, no... *Okapipi*, ogh, it is not easy laughing...]. This finding corresponds with the findings of Ekefre, Ekanem and Esien (2014) who explained that a parent's lack of knowledge and proper information on sex education due to cultural inhibition, is evident as parents use coined words to refer to sex-related issues and genitals in particular.

In the same vein, parents indicated that they would only find it easy to refer to a diagram than the real names of genitals particularly on the function part of some sex organs. These results concur with La Font's (2010) findings that children's knowledge about the utility of their sex organs is limited to urination.

4.3.3 Factors influencing parents' attitudes and experiences towards sex education

The study revealed that the value attached to culture and, religion hinders parental involvement in teaching and learning of the topics of human reproduction in schools, resulting in a lack of knowledge and the fear of promiscuity. Culture and religion were identified as the major factors influencing parents' attitudes and experiences towards sex

education of their children.

Cultural beliefs

Findings revealed how parents' cultural beliefs shape their behaviours towards sex education:

“It is a taboo in our culture for an adult to talk about sex-related matters to children” (P5Q4B).

“Ondi wete ike okaana andi ka teya po, shaashi onda putuvwa kutya okaana shaa toka putuva ka shiwe oipala, oto ka teya po” (Interview P1). [Freely translated: I was raised that teaching a child about sexuality is the destruction of the Childs' future].

“Such topics are very sensitive to talk to children. It was regarded a taboo believing that cattle can get lost if talking about sex” (P8Q3C).

“It is a subject that people only whispered about. In my culture it is considered a taboo especially for a girl to talk about sex-related matters” (P17Q2C).

Another parent explained:

“Pamufiululwakalo wetu osho shi li kutya iitya mbyo ihayi tumbulwa, nenge iinima ya fa mpo ihayi popiwa ngaanhyo mo public” (Interview P3). [Freely translated: As per our culture, it is not allowed to openly talk of sex-related words in public].

Another parent responded:

“Omufiululwakalo, noukelesiti oyo leela yi na ouzio mu se. Omufiululwakalo ouna oitya tayi kwelengendja nayi, ngashi, omusimbakavona. Oinima tayi sifa ohoni”. (Interview P1). [Freely translated: Our culture and Christianity are the main influences (they have poisoned us: direct translation) the vocabularies in our culture doesn't sound well, words such as *“Omusimbakavona”* are shaming].

Religious beliefs

Findings revealed that some rural parents' attitudes and experiences were shaped and influenced by religious beliefs. This statement is supported by the following quotes:

“Se otwa longwa kaalongi aakelesiti, oshipango oto longwa ombimbeli oto longwa. Ndele omunhu oinima oweyitila shaashi oto longwa ongoshivila” (interview P1). [Freely translated: Our teachers were Christians, we feared talking about sex because the teaching prohibited that, but the emphasis was more on the Bible and God's commandments].

“Aakulunhu yetu oya putuka pongeleka. Iinima mbi ihayi popiwa aae” (interview P3). [Freely translated: Our parents were Christians and sex-related issues were not talked about openly].

One parent commented during the workshop that:

“Omukelesiti keku longa oinima mbyo, ota longo ike shinasha noipango, oku na ike otundi yombimbeli, ndji tayi kumayiva, ino, ino” (WO). [Freely translated: Christians do not teach sexuality, all they do is quote the Bible and advice not to engage in sexual activities].

At the same time, some parents felt it was not important to teach sex-related topics in schools, but they advocated for religious teaching instead:

“Aanona naa longwe otundimbimbeli oku za moondondo dhopevi sigo opombanda (Grade 0-10)” (P20Q11C). [Freely translated: Children must be taught Biblical studies from Grade 0–10].

“Inima yihulo uulunde mokati komaluvalo getu” (P3Q7C). [Freely translated: Sex-related issues are evils among our children].

“Omuntu ngele te ya po i te yapo melongo, ote ya po ashike molweshito lyaKalunga” (P3Q8C). [Freely translated: Reproduction is naturally occurring, not throughout education, but by the power of God].

“Omulongi ohwindji oku na “discipline and order”, aalongi oyendji aakwangerka, taa ningi role model kaalongwa” (P11Q10C). [Freely translated: Most teachers are well disciplined and all are Christians, so they can mould learners].

On the contrary, some parents felt that the Church instilled negative attitudes towards sex education among members of the society:

“Ongeleka nee shii ye ya, yo ayi ti nee anuwa aanhu otaapopi oshipagani, otaatameke nee taya tula iinima pamuthika ngu gwawo gongeleka, Sho osho wu wete iitya yetu oyindji paife yoshiwambo yimwe oya kana mo lela, nande to shi popi puunona kauvite lela kutya owa hala kutya shike” (interview P2). [Freely translated: People have been referred to being pagan whenever they openly talk of sex-related issues, thus tarnishing the use of sex-related vocabularies and this resulted in some of Oshiwambo words becoming extinct]. For example words like *ova*, (penis) is now referred to as *okapipi* (small pipe) or *okashila* (small tail).

Another parent commented:

“Ongeleka oya etifa oshiponga shevundakano, siyo opemito mpo ongeleka oyo ya vundakanifapo. Enanafano ike, ongeleka tai ti ino, osikola tayi longo oyihulo, omufiululwakalo wa latelwa pohi” (interviews P4). [Freely translated: The increase of teenage pregnancies is the result of the Church’s teaching, “don’t”; on the other hand schools are teaching sexuality, while our culture is oppressed. Just the contradiction in the society].

The results showed that all the rural parents who participated in this study strongly believe that sex-related issues are not issues to be discussed with children and in public because such

topics are very sensitive and it is a cultural taboo. They all admitted and expressed that talking sex-related issues to children is not an easy thing to do. Many studies (Chu et al., 2015; Ngalangi, 2015; Nghipondoka-Lukolo & Charles, 2016; Silas, 2015) revealed similar findings that sex-related issues are regarded as taboo in many communities and parents' involvement in sexuality education of their children is very poor due to their cultural, traditional and religious beliefs.

Some parents in this study were of the view that children should be taught the Bible instead of the topics of human reproduction being taught in schools. The results showed that some parents regarded teaching and learning of the topics of human reproduction as paganism. One of the reasons why parents are not comfortable talking to their children about sexuality is because it is perceived as breaking of moral and religious law. This is evident that religion is one of the factors influencing rural parents' attitudes towards sex education.

It also emerged that some parents found it hard to talk about sex-related issues due to the sex-related language used: *"Our culture and Christianity are the main influences (they have poisoned us: direct translation) the vocabularies in our culture doesn't sound well, words such as "Omusimba kavona" are shaming"* (Interview P1). This shows that language also plays an important role in learning. According to Leach and Scott (2003), language is embedded in culture as a mediating tool and can shape people's thinking.

On the contrary, it appears that there are mixed views regarding Christianity's teachings. Some parents shifted the blame to the Church that people have been referred to being pagan whenever they openly talk of sex-related issues and thus tarnished the use of sex-related vocabularies and this resulted in some of the Oshiwambo words becoming extinct. Some rural parents felt that the Church's voice regarding sexuality education is not in agreement with the governments' policies, thus, advocating for the notion of *"ino"* (don't) while government advocates for the use of condoms and sex education in schools. According to Bijelić (2008), the Church's teachings on human sexuality and reproduction is unambiguous and is a part of Church instruction. Lending support, Ngalangi (2015) concluded that in highly regulated societies, dominant religious discourses are produced and reproduced in and through existing institutions such as Church, school and family. The results therefore indicated that some rural parents were of the view of not letting religious affiliations or strict interpretations of the Bible dictate sex education, since religious thinking may limit the

education of learners who do not necessarily agree with biblical standards (Brandenburg, 2015).

Lack of Knowledge and Fear of Promiscuity

The results revealed that there are factors that constrain parents from understanding the importance of teaching and learning of human reproduction in junior secondary schools. Among others, parents indicated a lack of a know-how regarding approaching and talking to their children; a lack of confidence, and believing that talking to children about sexuality encourages and leads them to engage in and practice sex-related activities. The following quotes are evidence of the above statements:

“Thandi vulu okushi longa okanona oshoka kandi na otsewo yoshilongwa shoka” (P7Q7C). [Freely translated: I cannot teach my child because I do not have the expertise of that subject].

“Ohandi kala ngaa nda nyengwa kutya andi tameke lela ngiini opo ndika lombwele. Shi twa putuka inatu yi longwa.” (WO). [Freely translated: I used to find it difficult how and where to start talking about sex-related issues to my child. We were not raised with that teaching].

“Osikola nayi dhane onkandangala, oshoka aavali yamwe katuna ethimbo nowino minima ya pamba iihulo” (WO). [Freely translated: Let school be responsible for sex education because some of us do not have time and know-how on sex-related issues].

“Sho sheneee... euvoko lyetu aakulunhu, olya fa nghaa ngenho li li poshi, shotango, kuwete kutya andi tamekele peni, okanona andi ka lombwele nduno andi ti shike? Shikwawo, uuwanawa weenghundathana owo kuna” (Interview P2). [Freely translated: In fact, it is hard to initiate for the discussion and what to talk about, just because our understanding as parents is poor that I am not aware of the benefit of such discussions].

“I am not sure of the right age at which I should start doing it” (P5Q4C).

Parents who perceived that talking to children about sex-related issues leads to practicing it, had this to say:

“Itandi vulu oku kundathana nokanona kandje kombinga yokulongitha iikelelitho yohvalo aawe. Okanona otaka kaya miihulo noonkondo, oshoka oke shishi kutya itaka simbapala nande kaye miihulo ethimbo nethimbo” (P12Q6C). [Freely translated: I cannot talk to my child on the use of contraceptives. The child will feel free to engage in sexual activities from time to time because she knows she cannot fall pregnant].

“Some topics are good but some are not important to discuss about to children. Discussing contraceptives to children is like telling them to have it practiced” (P7Q6C).

Another parent responded:

“Okaana shaa ike wai na ko meengundafana uka fatululile, nena owafa ike to ka lombwele nomukalo gumwe kutya naka ye moihulo” (interview P1). [Freely Translated: Talking to children about sexual issues, is an indirect instruction for them practice it].

“Ina shi simana okupopya nokanona elongitho lyiikelelitho yohuvalo, ashi manguhula okanona okuya miihulo kamanguluka shaashi ihaka ningi etegelelo” (P6Q6C). [Freely translated: It is not important to talk to children about the use of contraceptives, it makes children feel free and engage in sexual activities because they know there will be no pregnancy].

“Okupahuka ngenho oku li mondjila, oshinima oshina ike eembinga mbali, okupahuka nghu pamwe okuli mondjila ndee ta kala ike lela euvite ko, shaashi nomunhu to ende mpo okuwete kutya ooo, mpa a apu endwa impa ihapu endwa. Fimbo limwe nee oupyakavi wokukala eshi lela, otaka yelekela, nokoku yelekela aku kaza omapuko” (Interviews P3). [Freely translated: Talking to children about sexuality has the advantages and disadvantages. One may understand it and behave accordingly, but on the other hand it may lead to problems of practicing it].

Another parent presented signs of fear and lack of confidence talking to the child due to the fact that a child might ask her questions:

“Oupyakavi otawu keya mpo naana shaashi epulo limwe oteke li ku pula weemwene kutya, eee, wee meme nooye osho wali? Nenge.... Laughing.... Eee, opo ike pena oupyakavi mpo kutya, ogh, aiti, okaana oka hala’ali kutukange nghaa? Laughing” (Interviews P3). [Freely translated: The main problem is that it may happen that a child asks if I was or am also like that. That will be like an insult to me].

The results showed that some parents are willing to provide sex education to their children at home. However, it was observed that among others, lack of knowledge on sex education, fear of promiscuity is what constrains rural parents from understanding the importance of teaching and learning of the topics in junior secondary schools. Parents indicated that their understanding is poor that they are not aware of the benefits of such discussions. These findings are similar to the findings of Jerves et al. (2014) who discovered that although some parents express willingness to make good quality sex education available to their children, they reported having insufficient personal resources to fulfil that objective. In an event like this, Nghipondoka-Lukolo and Charles (2016), suggested that if parents have proper information on sexuality can increase their self-awareness, change may occur and parents may begin to participate in the sexuality education of their children.

It appears that some parents in this study had the view that talking to children about sexuality promotes sexual activities among adolescents because it leads to learners practicing what was taught: *“Talking to children about sexual issues, is an indirect instruction for them to have it practiced”* (Interview P3). It also emerged that some parents had mixed feelings that talking to children about sex might help to positively inform them. On the other hand, parents were fearful that they might expose their children to sexual activities. This reflects the attitudes of parents who are against teaching and learning of sex-related topics in schools. Similar studies (Ngalangi, 2015; Silas, 2015) revealed that the attitudes of some parents in our Namibian communities are that they are not comfortable talking to their children about their sexuality and some believe that it could lead to promiscuity.

4.4 Concluding remarks

In this chapter, I presented, analysed and discussed data as it emerged from the data gathering tools I employed in this study. That is, quantitative data from the questionnaires, qualitative data from the questionnaires, interviews and workshop observations were presented, analysed and discussed. Quantitative data were presented in tables and graphs. On the other hand, qualitative data were presented and discussed according to the main themes that emerged. Three themes emerged: parents’ family and school based experiences; parents’ attitudes towards sex education; and factors influencing parents’ attitudes and experiences. These themes were then discussed supported with references to literature.

In summary of what is presented in this chapter, lack of knowledge on sex education, fear of promiscuity, and lack of confidence emerged as the main factors influencing rural parents’ attitudes and experiences towards sex education. It is evident that the emerged factors influencing rural parents’ attitudes are due to cultural and religious beliefs. Equally important, results showed rural parents’ supportive attitudes for the inclusion of sex-related topics in the curriculum. Interestingly, the majority of rural parents who participated showed an interest in gaining knowledge regarding sex education. In the next chapter, the summary of findings, some recommendations and conclusion of this study are presented.

CHAPTER FIVE

SUMMARY OF FINDINGS, RECOMMENDATIONS AND CONCLUSION

5.1 Introduction

The main of this study was to explore rural parents' attitudes and experiences towards teaching and learning of the topics of human reproduction in junior secondary school (Grade 8–10). In this chapter, I summarise the findings from the analysis of data. Recommendations for future research in the field of sex education as well as limitations of the study are also presented. The chapter ends with a conclusion.

The study employed Vygotsky's (1978) socio-cultural theory as a theoretical frame work supplemented by the Feminist Standpoint Theory. These theories were used as lenses to analyse and to make sense of data in this study. A mixed method approach was used to explore rural parents' attitudes and experiences towards sex education with more qualitative data than quantitative data.

5.2 Summary of findings

As earlier explained, in Section 4.2.1, twenty-two rural parents participated in this study, six (27%) were males while sixteen (73%) were females. Participants' ages ranged from 30 to 70 years and above, with 14 parents (64%) aged between 40 and 69 years, five parents (23%) were in the range of 30–39 years while three (13%) parents were in the range of 70 years and above. Nine parents' (41%) level of education ranged between Grades 1–10. Equally, nine parents' (41%) level of education range between Grade 11–12, with only four parents (18%) either having a university level or had not attended school. Rural parents' age and level of education was necessary in determining their attitudes and experiences towards sex education. The collected data were analysed to answer the following four research questions.

Research question 1

What are rural parents' attitudes and experiences towards the teaching and learning of human reproduction at junior secondary school level?

In response to my first research question, the majority (95%) of rural parents displayed pools of experiences regarding teaching and learning of sex-related topics from school and home level. Many parents indicated that they never heard of sex-related issues at home by their

parents. It has been clearly stated elsewhere that some parents regard talks on sex-related issues as taboo (Silas, 2015). Most parents in this study did not get sex-related information from their own parents, family members and the community at large. However, friends, books and magazines were identified as the main sources of sex-related information for the parents. The results revealed that parents who knew about sex-related issues were very shy and not comfortable about the subject. In summary, the rural parents in this study had a strong cultural background that upheld the view that discussion around sexuality was a taboo.

Another finding was that, despite the fact that 86% of the participants were taught topics on human reproduction, the results showed that their teachers did not make it clear, or they failed to clearly explain sex-related topics for them to understand. The majority (95%) of parents were not comfortable and found it humiliating when hearing about sex because traditionally, sex-related issues are not discussed while the other sex is present. 82% of the participants indicated finding it difficult to talk to their children about sex. This was due to the influence of cultural and traditional norms. Overall, many parents indicated that they do not discuss sex-related matters with their children. However, the study found that many parents indicated that mothers talk only to girls about sex-related information particularly relating to menstruation. The reason for this was that parents were not comfortable talking sex-related information to children of a different sex. Interestingly, fathers only talked to boys but not about sex-related matters. Measor (2004) argued that attitudes to information and knowledge vary significantly with gender because of the sources of information that individuals rely upon and prefer. This justified the use of feminist standpoint theory in this study as a lens to view this phenomenon.

Besides participants' experiences towards sexuality, the majority of rural parents who participated in this study showed a shift in attitude and hence supportive views towards teaching and learning of sex-related topics. Few parents showed negative attitudes due to their cultural beliefs. They felt teaching sex-related topics leads school children to practicing and engaging in sexual activities which would result in teenage pregnancies. Some parents felt that school children were still young to be taught sex-related topics, thus advocating for their children to rather participate in age-appropriate sexuality education as indicated by Barr et al. (2014). Parents' education attainment does not significantly influence their attitudes regarding parent-child sexual communication as alluded to by Olakunmi and Akintomide (2010). However, parents strongly supported the teaching and learning of sex-related topics

in schools because they felt that teachers might be the only hope for the learners since the parents themselves did not have the skills, courage and knowledge to discuss sex-related matters with their children due to what culture dictates. By contrast, some parents felt it should be a shared responsibility between home, school, church and the community at large.

Some parents were undecided about the teaching and learning of sex-related topics in schools. They felt not enough consultation was done regarding parents' views towards sex education. That is to say, if this study was meant to seeking parents' views to introduce sex-related topics, some parents indicated that they would not allow it be introduced. The fact that sex education is already offered in schools while rural parents were not consulted, it is against their culture to support it, but they would let it go.

The study found that rural parents' attitudes and experiences are informed by their ages as well. Parents in the age range between 60 and 70 and above, showed total disagreement towards the idea of teaching and learning of sex-related topics. They indicated that culture has influenced them already, or even if parents' awareness was conducted, they would never talk to their children about sex nor would they help them in doing sex-related activities or home works. The literature clearly revealed that discussions around sex-related matters with children is culturally regarded a taboo. On the other hand, literature also made it clear that most parents have supportive views toward sex education.

Research question 2:

What factors influence such rural parents' attitudes and experiences?

The results showed that rural parents' attitudes and experiences towards teaching and learning of the topics of human reproduction in junior secondary school (Grade 8–10) are influenced by cultural and religious beliefs. These beliefs seem to discourage parents' curiosity to understand the importance of sex education and to develop skills and know-how to talk to their children about sex-related issues leading to a lack of knowledge, shyness, discomfort and fear of promiscuity.

All rural parents (100%) who participated in this study held strong cultural beliefs and values. The results showed that parents' attitudes, behaviour, and views towards sex education were shaped by their cultural beliefs. This shows that through social interaction between parents and their children, peers and society at large, knowledge and experiences are passed on from

generation to generation. Children gain this knowledge and experience from their parents and peers. Consequently, this is what children will take along with to school, and as alluded to by Vygotsky (1978), a child is a product of social interaction. For that reason, teaching and learning of sex-related topics is not an easy process since children hold the views that discussion of sex-related issues is taboo. The study showed that conflict between culture and the curriculum expectation might only be eliminated if parents, schools, church and all stakeholders in education contribute equally to awareness creation of the importance of sex education. This may not only encourage and change children's attitudes towards teaching and learning of sex-related topics, but it may also help to increase self-awareness through sexual health education and reduce the school drop-out rate due to teenage pregnancies.

Some rural parents were of the view that schools should introduce and teach Biblical studies instead of sex-related topics. The reason for this is simply because teaching and learning of sex-related issues is regarded as pagan. Participants' religious beliefs are evident in that they shape parents' attitudes, experiences, and behaviours towards sex education. They felt teaching and talking to children about sexuality breaks their moral and religious law.

It appeared that culturally, certain words such as *oshikumbu* (whore), proper genital names have been used to discourage people from practicing sex-related activities. However, rural parents indicated that the Church played a major role in discouraging their members not to use sex-related vocabulary openly as it reflects paganism. They felt that some words such as *ova* (penis) are becoming extinct due to the Church's reaction towards sex education. This, according to some rural parents, was the root cause of high teenage pregnancies because many parents are Christian and the Church's teachings are not in line with the current global changes. Some rural parents appealed, however, for the Church to support government institutions such as schools and hospitals and other non-governmental organisations in educating societies about the importance of sex education.

Research question 3:

How can rural parents be supported to understand the importance of teaching and learning of human reproduction in junior secondary school?

In response to the research question 3, most rural parents (86%) participated demonstrated their desire for knowledge and the need for training. They indicated the willingness to get support to understand the importance of teaching and learning of human reproduction in

junior secondary schools. Their interest was shown when asked if they would be willing to attend a sex-related workshop for parents if it were offered. Only three parents (14%) indicated they were not interested, and their reasons were related to age, previous knowledge or they were not sure if the workshop would have an impact on their cultural beliefs, behaviours, views and attitudes towards sex education. Most rural parents indicated their eagerness to: know how to guide teens through puberty; know how to advise children on the advantages and disadvantages of practicing early sex; be trained and advised on how to talk to their children; be familiar with the subject matter to be able to assist their children in doing homework. Parents suggested that sex-related programmes and workshops be made available to educate parents on the importance of sex education.

This study ran a parents' workshop in response to the participants' interest. It appeared that mothers were more eager to learn and understand the importance of sex education. This was evident that only ten female parents attended a workshop. However, data collected using a questionnaire revealed both sexes interested to attend a sex-related workshop. It was observed that parents participated in the workshop were very shy about talking of sex-related issues, particularly sex-related vocabulary in vernacular (as alluded to by Ekefre, Ekanem and Esien, 2014), they lacked self-confidence, and there was a lack of sex-related information. This shows that more workshops on sex-related issues for rural parents are needed in order to support parents' understanding of the importance of sex education. Through the workshop conducted, it was evident that the more the society talks about sex-related issues the more such issues and talking about it would become socially acceptable.

Research question 4:

What enables or constrains rural parents from understanding the importance of teaching and learning of human reproduction in junior secondary school?

In response to the fourth research question, the majority (80%) of rural parents attended a workshop indicated their willingness to talk to their children about sexuality. Despite their willingness to talk to their children, they indicated that they lacked knowledge on the subject matter. Many held the view that talking to their children about sex-related matters led to promiscuity. Thus, many rural parents preferred not to talk to their children about sex-related matters.

This study confirms that lack of knowledge, fear of promiscuity, lack of self-confidence,

cultural beliefs and religious beliefs are what constrain rural parents from understanding the importance of the teaching and learning of human reproduction in junior secondary school. It is also revealed that another reason why rural parents are not comfortable talking about sex-related issues to their children is because they felt that children would speak openly elsewhere, that their homes might then be labelled as the homes of pagans.

5.3 Recommendations

Based on the findings of this study, the following future research possibilities arose. It would be useful to explore rural parents' attitudes towards teaching and learning of sex-related topics at junior primary school (Grade 4–7). Secondly, learners' views and attitudes towards teaching and learning of the topics of human reproduction in junior secondary school (Grade 8–10) is also another possibility. Thirdly, it emerged that sex-related topics are very sensitive, and thus one could investigate how the Grade 8–10 Life Science teachers mediate learning of the topics of human reproduction. This study did not look in-depth at the issue of gender roles and perspectives regarding sex education, and for that reason, future studies are urged to have their focus on this area of study as well.

It is recommended that curriculum developers need to increase parental consultations when selecting topics regarding sex education for specific grade levels. It emerged that all parents (100%) who participated in this study felt that they were not consulted regarding the inclusion of sex-related topics in the curriculum. Thus, a need to incorporate parents' views and perspectives into the curriculum guidelines regarding sex education in particular is essential so that their voices could be heard.

Equally important, schools are urged to implement the policy on prevention and management of learner pregnancy. The policy advocates for strategies for involvement of families and community. It also encourage families and community members to discuss sexual relationships with their children. The study further recommends the inclusion of sex-related topics in the adult education programmes. Lastly, the findings also necessitated for the study to recommend for schools, community, churches and all stakeholders in education to play an equal role regarding sexuality education of our children.

5.4 Limitations of the study

Given the sensitive nature of the topic under investigation and the context in which the study

was conducted, sex education is regarded as taboo in most cultures in the Namibian society. In the context of Aawambo where this study was conducted, it is taboo to talk about sex particularly to children. People do not talk openly about sex or genitals. Hence, participants might have been culturally compromised and uncomfortable in providing reliable data.

Furthermore, the study was limited to rural parents whose children were doing Grade 8–10 at Kacija Combined School (pseudonym) in Ogongo constituency, Omusati region. Due to the small sample size, therefore, the findings of this study cannot be regionally or nationally generalised. However, some insights particularly relating to culture and the teaching and learning of sex education could help to generalise the findings of the study across all rural parents.

5.5 Conclusion

This study adds to a growing body of literature documenting parents' attitudes and experiences of a small sample size of rural parents in Namibia, towards teaching and learning of the topics of human reproduction. The study confirmed that teaching and learning of the topics of human reproduction is proven to be a sensitive topic to talk about to children and that it is culturally and traditionally seen as taboo. The study showed how parents' culture and religious perceptions may impact teaching and learning of sex-related topics, leading to poor performance by scholars on the topics of human reproduction as revealed by the examiners' reports. However, it should be noted that children need to learn, know their bodies and understand how the body functions. The ability to effectively educate future scientists and citizens is predicated in part upon how children are able to relate what they learn in school to their daily lives and how teachers help learners to establish such connections during teaching and learning. Thus, there is a need for corroboration between parents and schools.

It would also be interesting and encouraging to see both parents' (fathers and mothers) involvement in the teaching and learning of sexuality education of their children. In my own view and personal experiences, I believe that the more elders communicate to children about sex-related issues, the better children would develop positive self-efficacy and negotiation skills with their sexual partners. This might help mitigate the challenges of teenage pregnancies facing society nowadays. At the same time, it may help learners handle sexual

pressure and emotions. It may also enhance learners' curiosity and positive attitudes toward teaching and learning of sex-related issues in schools.

In summary, a lot needs to be done regarding teaching and learning of the topics of human reproduction in junior secondary schools in Namibia. It is evident that there are no talks about sex taking place between (rural) parents and their children in the society. The speculation is that learners will be influenced by their parents' cultural and religious beliefs with regards to sex education. As a result, there might be conflict between the curriculum expectations and learners' cultural and religious beliefs. This may lead to poor performances on the topics of human reproduction.

Lastly, the study suggests that schools should implement strategies suggested in the policy on the prevention and management of learner pregnancy. That is, a need to invite families and community members to workshops on pertinent issues such as encouraging families and community members to discuss sexual relationships with their children. This might empower and support parents' understanding on the importance of talking, teaching and learning sex-related topics.

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APPENDICES

APPENDIX A: REQUEST FOR THE PERMISSION TO CONDUCT AN EDUCATION RESEARCH IN OMUSATI REGION

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EDUCATION DEPARTMENT
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To: The Chief Regional Officer
Omusati region
P O Box 523
Outapi

30 March 2016

Dear Mr. AP. Andowa

**RE: REQUEST FOR THE PERMISSION TO CONDUCT AN EDUCATION RESEARCH IN
OMUSATI REGION.**

I, **Kornelius Embumbulu Kavila**, ID No: **77060300309**, Employee code: **K0306197700472**, Teacher at Ongolo Combined School, Ogongo circuit, currently is doing my second year of Masters in Science Education with Rhodes University (**student number 15K7790**). I am hereby sincerely seeking for the permission to conduct an educational research in your region.

My research interest is to explore rural parents' views and experiences towards the teaching and learning of the topics on human reproduction (sex education) in junior secondary schools (grade 8-10). The research participant will therefore be parents whose learners are doing grade 8-10 at Ongolo combined school, in Ogongo circuit and constituency. (These learners might be from other constituencies as well).

The interest was driven by the fact that the school is located in *Oshiwambo* speaking communities, whose culture does not allow parents and elders to openly talk to children about sex or sexual related issues, while the syllabus require it done (by teachers). The research is therefore expected to provide an insight on how parents view the topics of human reproduction to their children as to how culture may influence teaching and learning of sex education in schools.

Should you need further clarity, please do not hesitate to contact me at the above mentioned cell phone number. I do hope that my request receives your favourable considerations and I am looking forward to hearing from you soon.

Yours Sincerely

.....
Kornelius Kavila
Rhodes University student

APPENDIX B: PERMISSION TO CONDUCT THE RESEARCH



REPUBLIC OF NAMIBIA



OMUSATI REGIONAL COUNCIL

OFFICE OF THE CHIEF REGIONAL OFFICER

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19 April 2016

Mr Kornelius Kavila E.
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Cell: 0813734401

Dear Mr Kavila

RE: REQUEST FOR THE PERMISSION TO CONDUCT AN EDUCATION RESEARCH IN OMUSATI REGION

1. The Council has acknowledged receipt of your letter dated 30 March 2016, regarding the above mentioned subject.
2. The Council has accepted your request, hence you can go ahead with your research.
3. However, you are requested to share your findings with the Office of the Chief Regional Officer.
4. We hope you will find all in order and wishing you all the best in your study.

Yours faithfully

AP Andowa
CHIEF REGIONAL OFFICER



All official correspondence must be addressed to the Chief Regional Officer

APPENDIX C: CONSENT LETTER FOR THE PARTICIPATED PARENTS

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22 February 2016

Dear Research Participant

Re: Participation in research on rural parents’ views and experiences towards teaching and learning of human reproduction in junior secondary school (grade 8-10).

Thank you for agreeing to be a research participant in my study. As per our discussion, my study focuses on “rural parents’ views and experiences towards teaching and learning of the topics on human reproduction in junior secondary school level (grade 8-10).

The study will be conducted in **three** phases. The first phase requires participants to complete a questionnaire. The **second phase** of the study involves an interview to allow participants an opportunity to provide their in-depth views and experiences of the topics on human reproduction, but also give me an opportunity to explore further with follow-up questions when needs be. All interviews will be tape recorded and notes will be taken. The third phase will be a workshop to support and empower participants to talk to their children about sex-related issues.

Your participation in this research study is completely voluntary and you can withdraw at any time. The data collected in this study will be published as a Rhodes University half thesis. The identity of each participant and their views or contributions will be treated with a high degree of confidentiality and anonymity.

Sincerely

Embumbulu Kornelius Kavila
Rhodes University
MEd in Science Education Student

Dr Charles Chikunda and Dr K. Ngcoza (Supervisors)
Rhodes University

I agree to participate in the research on condition that I can withdraw at any time.

Name.....

Signature.....

Contact number.....

The consent letter is also available in Oshiwambo.

PART B: Parents' views and experiences (school and sex education)

1. If you remember back during your schooling days, which of the following topics were taught to you at school in Life/Natural/General Science?

- | | | | | | |
|------------------------|-----------------------|---------------------|-----------------------|------------------------|-----------------------|
| Abstinences | <input type="radio"/> | Decision making | <input type="radio"/> | Family planning | <input type="radio"/> |
| Love and relationships | <input type="radio"/> | Sexual intercourses | <input type="radio"/> | Reproductive system | <input type="radio"/> |
| Reproduction | <input type="radio"/> | Reproductive health | <input type="radio"/> | STI including HIV/AIDS | <input type="radio"/> |
| Pregnancies | <input type="radio"/> | Puberty | <input type="radio"/> | none of these topics | <input type="radio"/> |

Briefly, could you please explain what you remember about those topics?

.....
.....
.....

2. At what grade were you when these topics were taught to you?

- | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|
| Grade 8 | Grade 9 | Grade 10 | Others |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

3. What are your views and experiences on why these topics on human reproduction were taught to you while you were a learner at school?

.....
.....
.....

4. Were you comfortable or not when the topics on human reproduction were taught to you?

- Yes No

Explain your answer

.....
.....
.....

5. In what grade is your child? Grade 8 Grade 9 Grade 10

6. If the topics above are to be taught, what are your views on these topics being taught to your child at grade 8-10?

.....
.....
.....
.....

PART C: Home level and sex education

1. Please, if you are to remember back during your childhood, what was your **main source(s)** of information about sexual related issues?

- At school
- Both mother and father
- Church
- Family member
- Friends
- Magazines and books
- My father only
- My Grand parents
- My mother only
- I cannot remember
- I refused

2. What was your experience or reaction when you first heard about sexual related matters being talked to you during your childhood?

.....
.....
.....

3. Would you rather talk with your child about sex at home or not? Yes No
If **yes**, what do you think would you talk about and how?

.....
.....
.....

If **no**, why do you think you would not talk about sex with your child?

.....
.....
.....

4. Do you find it easy talking about sex to your own children or not?

Yes No

Explain your answer

.....
.....
.....

5. Do you talk about the following topics to your child?

	All the times	Sometimes	Not at all
Abstinences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Contraception or Safe sex	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Correct names of genitals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Decision making	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Going through puberty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HIV/AIDS	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Love and relationships	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marriage and lifetime commitments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Periods/menstrual cycle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual intercourse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexually transmitted infections	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teenage pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Explain why you think it is important or not important discussing or not discussing those topics to your child? **(Point out one or two topics you think is important or not important).**

.....

6. If sex education is to be talked about, in your views whose responsibility should this be?

Parents/guardians Church School Others

Explain your choice(s)

.....

7. Please provide any comments you have regarding the topics of human reproduction in schools.

.....

8. Would you be interested in attending a sexual related workshop for parents if it was offered at our school or elsewhere?

Yes No Not sure

If **yes**, what topics especially interest you?

.....
.....
.....

If **no or not sure**, explain why?

.....
.....
.....

9. General comments:

.....
.....
.....
.....

Thank you very much for your input, time and effort!!!!!!!!!!!!!!

The questionnaire is also available in Oshiwambo.

APPENDIX E: INTERVIEW SCHEDULE

Research topic: Exploring rural parents' attitudes and experiences towards teaching and learning of the topics on human reproduction in junior secondary school (grade 8-10).

Questions

1. Could you please share with me your experiences of being taught Life Science at school, in particular, the topics on human reproduction?
2. Could you please share with me how your parents or guardians were talking to you about sex or sexual related matters?
3. How does it feel hearing or listening to someone talking about sex or sexual related matters? – When do you think is the right time to talk to your child/children about sexual related matters? (age)
4. How does it feel talking to your child or children about sex or sexual related matters?
5. Is there anything you would like to share with me with regard to the topics on human reproduction being taught to your child/children?

The Interview schedule is also available in Oshiwambo.

APPENDIX F: AN UNSTRUCTURED WORKSHOP OBSERVATION SCHEDULE

WORKSHOP OBSERVATION

Name of the observer..... Date.....
Number of Participants..... Workshop type

Day one: Topics	Notes