

NAVIGATING TABOOS AND TENSION:
SOUTH AFRICAN MEDICAL PROFESSIONALS'
CONSTRUCTION OF SEX EDUCATION
ON TIKTOK

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Abstract

This thesis explores how discourses surrounding sexual health and education are negotiated and disseminated by South African TikTok influencers within the context of Comprehensive Sexuality Education (CSE). It specifically examines the work of two prominent creators, Dr Mpume Zenda (@dr.gynae) and Khumo Masege (@kmhealingagain), who engage audiences on topics such as consent, LGBTQ+ issues, and reproductive health. Using a constructivist theoretical framework, grounded in the works of Foucault, Hall, and Connell, this research employs textual and multimodal analyses to unpack how these influencers construct and communicate meanings through their content.

South Africa's CSE framework provides a progressive foundation for addressing sexual health, yet structural inequalities, cultural taboos, and gaps in traditional education persist. TikTok, as an emerging digital platform, offers a unique site for interaction, accessibility, and community building, allowing influencers to challenge or reinforce dominant discourses on sexuality and gender.

This study applies thematic and narrative analyses to the content of the selected influencers, examining how their personal and professional narratives intersect with broader cultural and social discourses. Additionally, audience engagement, including comments, QandA sessions, and live videos, is analysed to evaluate the impact of this digital education on users' knowledge, attitudes, and behaviours.

This thesis argues that while TikTok provides an inclusive and dynamic platform for sexual health education, it also presents significant challenges, including risks of misinformation, privacy concerns, and the perpetuation of certain normative frameworks. The findings highlight the potential of TikTok to complement traditional education systems, fostering dialogue and accessibility while underscoring the necessity for critical digital literacy and ethical content moderation. Ultimately, this research contributes to a deeper understanding of the role of digital platforms in reshaping public health communication in South Africa's evolving socio-cultural landscape.

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List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome
CSE	Comprehensive Sexuality Education
DBE	Department of Basic Education
HIV	Human Immunodeficiency Viruses
KFF	Kaiser Family Foundation
LGBTQ	Lesbian, Gay, Bisexual, Transsexuals, Queer
MTA	Multimodal Thematic Analysis
PCOS	Polycystic Ovary Syndrome
PEP	Post-Exposure Prophylaxis
PrEP	Pre-Exposure Prophylaxis
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infection
WHO	World Health Organization

Chapter 1: Background and context

1.1 Introduction

Sex education covers a range of topics, including human sexual anatomy, sexual reproduction, sexual intercourse, and reproductive health. Sex education has been a dynamic facet of educational and social life within South Africa, mostly being influenced by social, political, and cultural factors that change with time (Fentahun et al. 2012:1). The transition from an apartheid regime into a democratic South Africa, devastating features of the HIV/AIDS pandemic, and emphasis on comprehensive sexuality education, have all informed and shaped the formulation and implementation of programs of sex education (Francis, 2010:314). However, sex education in South Africa has not gone unopposed, and the provision of essential skills and knowledge which are used in making appropriate decisions about one's sexuality have also met with resistance. The country's high rates of gender-based violence, HIV/AIDS and teenage pregnancies point to the need for comprehensive sex education. But its implementation has been rocked by controversies, the latest being about the Comprehensive Sexuality Education (CSE) curriculum, which, among other things, has garnered its share of criticisms and disapprovals from parents and teachers regarding what it teaches and how (Francis, 2010:316). Of course, some challenges must be acknowledged: precisely how to ensure accurate education is provided to all remains one of the challenges the country's health and education authorities must grapple with even to this day.

In this study, "sex education" refers broadly to the content and aims of teaching about sex, relationships, bodies, identities, and sexual health. In contrast, Comprehensive Sexuality Education (CSE) is understood as the educational framework through which this information is delivered. While the two are closely related, they are not synonymous. Both terms will be used throughout this research, with sex education denoting the subject matter, and CSE referring to the method and approach used to deliver it.

In this context, digital platforms such as TikTok have emerged as alternative avenues for disseminating sexual health information, especially to younger audiences. This thesis explores the intersection of professional medical knowledge and digital influence by focusing on South African medical professionals who operate as social media influencers on TikTok. Specifically,

it examines the work of Dr Mpume Zenda (@dr.gynae), a practising gynaecologist, and Khumo Masege (@kmhealingagain), a trauma counsellor with formal training in mental health. While both are influencers, they are also medical professionals with qualifications that give their content a particular authority and credibility within the digital landscape.

This emphasis on medical professionals is key to the study. Unlike lay content creators, these individuals bring clinical expertise into their online presence, blending evidence-based medical information with accessible, relatable narratives. Their dual roles—as practitioners and content creators—position them uniquely within public discourse. They do not merely share personal views or lived experiences; they translate medical knowledge into engaging, socially relevant content that aims to educate, empower, and challenge dominant norms around sex, sexuality, and gender.

This study explores how South African medical professionals who function as influencers on TikTok use the platform to deliver inclusive, accessible, and medically grounded sex education. Rather than focusing on everyday users or the broader TikTok landscape, this research hones in on two specific influencer-educators (Dr Mpume Zenda and Khumo Masege) whose content combines professional health expertise with the informal, interactive qualities of social media. In doing so, the study seeks to understand how this distinct category of digital content creators navigates both their clinical authority and the affordances of TikTok to engage publics on issues of sex, sexuality, and health.

1.2 The importance of sex education

Sex education is concerned with healthy sexuality and well-being. It should provide the individual with appropriate and factually correct information about sexuality, relationships, and reproductive health. Ideally, sex education equips individuals with ways whereby they might make appropriate decisions regarding their sexual behaviour and its various consequences. Sex education is essential because it helps to prevent sexual infections and unwanted pregnancies. A pretty good understanding of contraceptive methods would shield young people from some of the undesired consequences of sexual activity. It would also teach them about consent,

boundaries, and relationships, which is very important in terms of avoiding sexual violence or abuse.

Education that advances equality between women and men and challenges harmful gender stereotypes and social norms is likely, in turn, to facilitate open discussions on issues of consent, pleasure, and body image that help break down societal barriers related to sexuality. Such discussions go a long way towards breaking down the barriers that prevent us from addressing issues about sexuality (Casale and Hannass-Hancock, 2011). By addressing these issues early on through comprehensive sex education programs, we can foster a more inclusive society that values diversity and respects individual choices. Moreover, it would help to dispel harmful gender stereotypes and advance equality (Francis, 2010:318). Comprehensive sex education programs should, therefore, feature on the agenda of educational institutions so that young people are well-informed when they commence their sexual lives (Fields, 2008:140).

Such a programme would fill in the gaps in knowledge and understanding of sexual health and relationships: South Africa's myriad cultural and religious backgrounds makes this all the more imperative (Casale and Hannass-Hancock, 2011). Comprehensive sex education enables wide, non-judgmental communication, and in the best case scenario helps to create an increasingly more accepting and well-informed society to live in. It goes well beyond the articulation of human anatomy and processes of reproduction. Instead, it is one of the cardinal tools that will go a long way in managing public health, promoting gender equality and personal rights in making decisions concerning one's own body and personal relationships (and Hannass-Hancock, 2011). As the country continues to grapple with issues related to HIV/AIDS, teenage pregnancies, gender-based violence, and the remnants of apartheid social engineering, comprehensive sex education remains an imperative investment in building a healthier, safer, and more equitable future for all South Africans (DePalma and Francis, 2014.)

1.3 Key dimensions of sexuality and sexual health in South Africa

Sex education aims to address a wide range of topics and issues faced by learners. These topics aim to equip adolescents and young adults with the knowledge and skills necessary to make informed decisions about their sexual behaviour, relationships, and overall well-being (Mkhwanazi, 2023). To accurately assess the effectiveness of sex education in South Africa, it

is important to examine key aspects of what is taught alongside statistical data, such as rates of teenage pregnancy, HIV prevalence, and instances of gender-based violence, which remain significant challenges in the country. Understanding the alignment—or lack thereof—between educational content and these outcomes provides critical insight into the success and areas for improvement in South Africa’s Comprehensive Sexuality Education (CSE) programme.

The average age of sexual debut in South Africa varies across studies but is often reported to be around 16 years (Jewkes et al., 2009). Early sexual initiation is frequently linked to inadequate access to sexual health education, peer pressure, and socio-economic challenges (Mchunu et al., 2012). Research indicates that early sexual activity significantly increases the risk of unintended pregnancies and sexually transmitted infections (STIs) (DePalma and Francis, 2014). South Africa grapples with high rates of teenage pregnancies, which account for approximately 13% of all pregnancies in the country (StatsSA, 2023). Additionally, the nation faces one of the highest HIV/AIDS prevalence rates globally, with an estimated 7.8 million people living with HIV as of 2022 (UNAIDS, 2022).

A teen pregnancy may be unwanted, which means a young girl may seek an abortion. Abortion is legal in South Africa under the Choice on Termination of Pregnancy Act (1996), yet access remains a challenge. A 2018 study revealed that 42% of abortions in South Africa were unsafe, disproportionately affecting women in rural areas (Macleod and Hansjee, 2013).

Moreover, age-unequal relationships, characterised by significant age disparities between partners, pose substantial risks of exploitation and increased vulnerability to HIV transmission (Jewkes and Morrell, 2012). Intergenerational relationships, commonly referred to as “sugar daddy” relationships, remain prevalent in South Africa. Studies reveal that 33% of adolescent girls report having engaged in relationships with significantly older men, often driven by financial dependency or social pressures (Jewkes and Morrell, 2012). This further puts these young men and women at risk of intimate partner violence due to the unbalanced power dynamic that can be present in these relationships. Informed consent and the prevention of sexual violence remain pressing issues, with studies indicating that 42% of South African women have experienced intimate partner violence in their lifetime (Moffett, 2006).

1.4 Apartheid era and its impact on sex education

Apartheid is the system of racial segregation and discrimination enforced by the government in South Africa from 1948 until 1994 (Neocosmos, 2010:20). The term ‘apartheid’ itself was coined from Afrikaans, meaning ‘separateness’. In this system of apartheid, racial groups were separated and the political and social systems were kept in the hands of the white minority. Black, Coloured, and Indian populations became victims of systemic oppression, limited civil rights, and severe racial inequalities. Apartheid laws imposed racial segregation upon virtually all spheres of life: education, housing, health, and work. Fearful of racial miscegenation, apartheid legislation also criminalised interracial sex and marriage, and discrimination crept into the arena of sex education. This history goes some way to explain why South Africans continue to grapple today with taboos, shame, and a lack of access to information concerning sex education (Macleod, 2009).

Apartheid sex education was part of a broader system of oppression in which apartheid worked to keep racial groups under control and segregated from each other (Macleod, 2009). Apartheid-era sex education contained limited information, and, in most cases, it was non-existent within black, coloured and Indian schools (Francis, 2010). The government rather imposed a fixed racial hierarchy and prioritised education which propagated racial stereotypes that kept the status quo intact (Casale and Hannass-Hancock, 2011). Even for the white schools, the government barred complete access to sexual education information, which affected the attitude towards sex by further building up the stigma surrounding it (Bhana et al., 2019:363). White students also received sex education that was primarily concentrated on human anatomy and the process of reproduction. Sexuality, relationships, and contraception were seldom discussed, and when discussed, it was in a very conservative and restrictive manner (DePalma and Francis, 2014). Generally, approaches by the apartheid government to sex education were shaped by conservative Christian ideologies (Francis, 2010). In keeping with the conservatism of Calvinist religious doctrine, topics of sex and sexuality were considered taboo and unfit for any form of public discussion. Any existing sex education materials reinforced male and female sex stereotypes and continued to support abstinence until marriage (Moletsane, 2010).

The more significant implications of disparities in economics and systemic racism became tangible in deficiencies in access to educational opportunities and reduced capacity among black learners searching for information on sexual health (Moletsane, 2010). It was here that

the state was trying to preserve a system in which it could retain racial segregation and domination within the country (DePalma and Francis, 2014). Information on sexual health and reproductive rights was thus being suppressed or distorted.

The rigid policies of apartheid regarding racial segregation were enthroned in law, flowing naturally into the education system through curriculum issues. Matters relating to sexuality and reproductive health were thus shut out or distorted in schools, with the result that young people had little or no knowledge of the use of contraceptives, sexually transmitted diseases and safe sexual behaviours (DePalma and Francis, 2014:83). It also contributed to economic marginalisation, such as when young women were forced to leave school due to becoming pregnant (Bhana et al., 2019:367).

However, with the collapse of apartheid in 1994 and the institution of a more representative and democratic government, significant changes have been realised in policies and approaches to sex education. In this way, South Africa has sought to overcome the apartheid legacy on education generally and on sex education in particular, which continues to be a challenge (DePalma and Francis, 2014:83).

1.5 The current state of sex education in South Africa

This history shows that sex education in South Africa is enmeshed in a complicated configuration of cultural, social, and political concerns. In the last decade, the state has remarkably improved the material and program resources assigned to complete sex education (Bhana et al., 2019). The most pertinent modification is that, responding to the rights enshrined in the South African Constitution, the Department of Basic Education (DBE) developed a curriculum known as Life Orientation, which includes sex education. The curriculum teaches pupils at the appropriate stages of their lives about their sexual health, relations, consent, and contraception (DePalma and Francis, 2014). Nevertheless, it has been argued that sex education in South Africa still does not meet the needs of the complex, heterogeneous nature of young people's sexual lives. Sex education, for example, is criticised for being highly constrained, with a focus on disease, sexual danger, and fixed categorisations of gender, which preclude any understanding and elaboration of gender and sexual identities (Shefer and Macleod, 2015:8).

Robert Morrell (2003) provides a foundational perspective for comprehending the gendered aspects of sexuality education, particularly in relation to masculinity. His research on South African education highlights how hegemonic masculinities are frequently reinforced within the school setting, through both hidden and formal curricula. Morrell warns that sexuality education, if presented without a critical examination of power and gender dynamics, may inadvertently support the very inequalities it aims to combat. He promotes a transformative educational approach that encourages boys and young men to question prevailing narratives of masculinity, while emphasising care, equality, and consent.

Building on this, Elaine Unterhalter (2005) situates sexuality education within the broader framework of educational justice and systemic inequality. Her analysis points to how gender and class inequalities are structurally embedded in the South African education system, and how these inequalities materially shape learners' engagement with CSE. Unterhalter argues that to be effective, sexuality education must move beyond curriculum reform and address deeper questions of access, teacher training, and institutional culture. According to her, CSE should be understood not merely as a set of lessons, but as a site of possibility for democratic participation and gender transformation, where learners are enabled to think critically about power, identity, and justice.

Liesel Moletsane (2011) brings a further layer of insight by centering the lived realities of young women in rural and peri-urban contexts, whose experiences are often overlooked in policy discourse. Her work underscores the limitations of a one-size-fits-all approach to sexuality education, particularly when it relies on biomedical or risk-averse narratives that fail to resonate with the everyday struggles of young people. Moletsane calls for participatory, contextually grounded approaches to CSE that include youth voices and acknowledge their embodied, affective experiences. She positions learners not simply as recipients of knowledge but as co-constructors of meaning, capable of articulating their own concerns, values, and aspirations.

To date, CSE has not been successfully implemented nationwide (DePalma and Francis, 2014). For numerous reasons such as educators are sometimes not adequately trained, there may be cultural sensitivities regarding dialogue about sex and societal stigmas contributing to the lack of development concerning this topic; progress is difficult (Leclerc-Madlala, 2008). For example, an abstinence-only approach has been weighed against an abstinence-plus-comprehensive sex education that includes information about contraceptives and safe sex

practices, with each approach relevant in theory and application (DePalma and Francis, 2014). In many cases, debates and challenges arise regarding how to effectively implement this education due to opposition and controversy against sex education from groups, including parents and educators, each having different views and opinions regarding the content and approach of the curriculum (DePalma and Francis, 2014).

1.5.1 Introduction and reception of the 2000 South African CSE curriculum

Experts and researchers widely regard Comprehensive Sexuality Education (CSE) as the most effective approach to sex education in South Africa, praised for its emphasis on equipping young people with accurate information and practical skills to navigate sexual health and relationships (Francis, 2010; Shefer and Macleod, 2015). Despite this consensus, CSE is not without flaws. Critics highlight challenges such as inconsistent implementation, cultural sensitivities, and a lack of inclusivity in addressing the realities of LGBTQ+ youth and intersectional gender dynamics in our context (DePalma and Francis, 2014). Nevertheless, CSE's structured, evidence-based approach makes it the most suitable framework to assess the quality and scope of sex education content delivered through TikTok.

CSE was introduced in South Africa in 2000. It was first promoted starting in the late 1990s as part of efforts to address the escalating HIV/AIDS crisis and rising teenage pregnancy rates. Promulgation with formalised guidelines came much later in 2015. The CSE curriculum aims to equip young people with information regarding matters of sexuality and relationships, and about their health, and to equip them with appropriate information and skills that would enable them to make rational decisions about their bodies and relationships in order to lead more informed lives. It improves health outcomes by providing learners with accurate information about sexual and reproductive health, thereby reducing rates of sexually transmitted infections (STIs), including HIV/AIDS, and unplanned teenage pregnancies. It promotes safer behaviours by equipping young people with the skills to practice safe sex, understand consent, and communicate effectively in relationships. Additionally, it fosters greater inclusivity and social cohesion by challenging gender stereotypes, promoting respect for diversity, and encouraging equality across sexual orientations and identities. These combined efforts aim to empower young people to make informed decisions that contribute to their overall well-being, autonomy, and ability to navigate their lives with confidence and responsibility (L'Engle et al., 2016).

However, CSE has proved to be a contentious and controversial issue in South Africa, facing significant pushback from parents, educators, and religious groups who argue that certain topics, such as sexual orientation, contraception, and consent, conflict with cultural and moral values (Leclerc-Madlala, 2008; Mkhwanazi, 2023). This resistance has often led to misinformation about the curriculum's aims, with critics claiming it encourages promiscuity despite evidence to the contrary. While some parents and teachers in South Africa were happy with the introduction of CSE, significant concerns raised by others involve cultural and religious sensibilities. They assert that some CSE subjects may conflict with their beliefs or cultural values. By these measures, CSE appears to promote undesirable or even deviant behaviours based on what a given culture deems inappropriate (Koch and Wehmeyer, 2021). The other area of concern is age-applicability. Some parents and teachers have opposed some of the programs offered by CSE, while others opine that there is a need to have it introduced at a young age so that young people can make informed choices (L'Engle et al., 2016). However, misinformation and misunderstanding about what CSE is have abetted anti-CSE critics. Critics argue that CSE promotes early sexual activity; proponents assert that it equips a person with information and abilities that the individual will behave responsibly and will not engage in risky behaviours. Proponents of CSE make a case that complete sex education is a necessity that will reduce the prevalence and incidence of HIV/AIDS and help to prevent adolescent pregnancies (Francis, 2010; Mayeza and Vincent, 2019; Shefer and Macleod, 2015).

1.6 The need for inclusive sex education

Sex education would fall under a holistic curriculum, where the youth is not only educated but also encouraged to make appropriate choices about sex. However, for South Africa, one of the recommendations on education concerning sexual health is introducing inclusive sex education that can build mutual power-sharing opportunities between genders (Casale and Hannass-Hancock, 2011).

Gender inequality is pervasive in South Africa, where the cases of violence, discriminative tendencies, and unavailability of necessary facilities and resources victimise girls and women (Bhana et al., 2019). The same appears in sexual relations, where large numbers of women suffer coercion and sexual abuse (Ahmed et al., 2009). South African sex education programs must therefore consider such dynamics. Sex education must include the meanings of respect and consent, and should promote gender equality and confront harmful attitudes and social

norms regarding our understanding of gender, sex and sexuality (Bhana et al., 2019). A sex-education curriculum would arm young people with information on healthy sexual relationships and challenge hostile gender relations so that we create a society which gives rights and opportunities alike irrespective of gender, race, or sexual orientation (DePalma and Francis, 2014).

1.6.1 Sex education programs at schools in South Africa

The poorly implemented and monitored sex education programs in schools in South Africa are one of the reasons for the failure of sex education programs. A significant challenge is a lack of trained instructors who can effectively deliver the content of sex education. Research suggests that some instructors are not at ease discussing matters related to contraception and sexually transmitted diseases (DePalma and Francis, 2014). This gap is deepened by a lack of standard guidelines provided for implementing the sex education curriculum in schools or communities which contest the curriculum content. Thus what is taught is not uniform. Some schools, for example, will give complete information while still promoting abstinence-only approaches and excluding essential issues such as safe sexual practices (Francis, 2010). Little oversight and monitoring of these programs take place. This explains why it is challenging to determine any gains achieved in sex education projects and programs. Poor implementation is occasioned by a lack of accountability (Francis, 2010).

Resistance from conservative groups and lack of support from some of the stakeholders present a significant challenge in the promotion of the comprehensive sex education curriculum. These objections arise on the basis of culture, religion, or morality that make some issues about sexuality appear inappropriate, morally repulsive, or opposite to the norms of that community. Conservative social groups are given the constitutional right to maintain their customary beliefs. However, a tension arises when customary understandings about sexuality, gender roles, and family structures contradict other constitutional provisions, such as rights to sexuality, which is promoted by the curriculum. They may believe that such comprehensive sex education goes against such beliefs or encourages immoral practices. They may also express resistance in the utterance of such issues as the use of contraception, sexual orientation, and gender, which is viewed to contravene the aboriginal or religious prescription of that culture (Leclerc-Madlala, 2008). South African society, like many societies, has such strong sexual taboos, which may be used as avenues for conservative groups to promote their objections to all-inclusive sex education, and they may define this education as something that

would stand in opposition to what is typical for society or even what a family upholds (DePalma and Francis, 2014:45). They might gather support from politicians who are not interested in comprehensive sex education owing to political expediency or under pressure from conservative elements (Mturi and Bechuke, 2019).

Lack of support from the stakeholders might prove to be a stumbling block to the optimistic attempts to set up comprehensive sex education programs, as such resistance is difficult to overcome. There has to be an open debate concerning the aims and concerns of sexual education. Working in collaboration with more liberal partners, including educators, health providers, youth groups, and nongovernmental organisations (Wood and Rolleri, 2014), will counterbalance opposition based on misinformation, and create a fact-based, inclusive sex education. I would like to note here the potential role of knowledgeable social media influencers who can speak to young people in ways that make issues of sex, gender and sexuality, and sexual and reproductive health accessible and transformative.

1.7 Cultural diversity

South Africa is a culturally diverse country, with many religious, cultural and ethnic groups. This cultural diversity forms the very social fabric of South Africa. However, when issues of sexual health are at stake, cultural taboos may hinder open dialogue and easy access to vital information. It is essential, however, to respect this pluralism and cultural diversity. Respecting cultural diversity calls for recognising diverse beliefs, practices, and values embraced by different communities. Discussions of sexual health should be treated on an equal footing as the discussion of any other topic since the issues involved may be sensitive and culture-bound (DePalma and Francis, 2014). Only when learning about specific cultures will one be able to engage in such sensitive discussions, basically understanding the positions of other cultures.

On the other hand, though, sensitivity towards cultural diversity should not be a licence for muteness or ignorance about sexual health matters. As one of the countries with the most severe cases of HIV/AIDS levels worldwide, open dialogue about sexual health is essential. This would imply breaking barriers of stigma and shame and the prevalence of misinformation (Bhana et al., 2019). There is a sensitive balance between respect for culture and practice that will provide open discussion on sexual health, as pointed out by Ahmed et al. (2009). That is why comprehensive sex education programs should be implemented in schools to resonate with

the diversity of cultural backgrounds of a group of students. Such programs should hence be equipping students with honest information on modes of contraception, STIs, consent, healthy relationships, and issues related to LGBTQ+.

It is through the mainstreaming of respect for cultural diversity with more open dialogue on sexual health that the burning issues of South Africans are resolved (DePalma and Francis, 2014). It satisfies the relation between understanding the divergent cultures' views on sexuality and ensuring access to complete information through comprehensive sex education programs (Ahmed et al., 2009). This will give us the ability to build a culture of respect for diversity and, at the same time, provide people with the knowledge to make informed decisions regarding their sexual health.

1.8 Social media/TikTok use in South Africa

1.8.1 The prevalence of social media use among young people

Social media are a constituent aspect of contemporary society, and in South Africa, young people under 25 years old make up 30.9 % of all social media users (Cowling, 2024). Platforms such as TikTok, Instagram, and Snapchat dominate this demographic, offering spaces where young people engage in content creation, communication, and social interaction. These platforms have transcended their original function as tools for connection, becoming central to the lives of young people as sites of identity exploration and expression.

Social media has become part of everyday life among younger age groups, and staying connected with peers through such apps is now a way of life for many. Social media plays a pivotal role in the identity formation of young people, serving as a digital stage where individuals craft and curate their public personas. Drawing on constructivist and cultural theories, scholars such as Buckingham (2008), Livingstone (2009), and Castells (2011) have emphasised how digital media offers a space for self-representation and social experimentation. Digital media provides a new form of cultural participation where young people can negotiate, challenge, and reproduce social norms (Buckingham, 2008). Social media enables young users to form connections, share experiences, and develop a sense of belonging in a globalised digital world.

Social media does not merely reflect identity; it actively constructs it. Young people use these platforms to navigate complex social landscapes, exploring themes such as gender, sexuality, and cultural affiliation. Digital networks allow individuals to build fluid and multifaceted identities that challenge traditional, fixed notions of self (Castells, 2011). This is particularly relevant in contexts such as South Africa, where cultural diversity and historical inequities shape the identities of young people in unique ways.

1.9 TikTok

TikTok is a social media platform launched by the Chinese technology company ByteDance in 2016. Known for its short-form video format, typically ranging from 15 seconds to three minutes, the platform allows users to create and share content set to music, voiceovers, and special effects. TikTok's algorithm, powered by artificial intelligence, curates a personalised "For You" page for each user, recommending videos based on past interactions, preferences, and trending content (Yeung et al., 2022).

This unique feature has contributed to TikTok's global popularity, especially among younger users who are drawn to its accessibility, interactivity, and the opportunity to engage with creative and diverse content. During the COVID-19 pandemic, TikTok downloads surged, becoming a critical tool for social interaction amidst global isolation (Feldkamp, 2021). However, alongside its benefits, TikTok's rapid growth has raised concerns, including the spread of misinformation, privacy issues, and the potential for cyberbullying (Meliawati et al., 2023).

1.9.1 The use of TikTok by South African youth

TikTok is available in 150 countries, and users are reaching 800 million monthly active users across the globe and over 2 billion downloads (Ceci, 2023). In 2023, South Africa had 25.8 million social media users (Kemp, 2023), whereas, as of January 2022, TikTok had 11.83 million active South African users aged 18 years and older (Ceci, 2023). The company has not provided a figure for users aged 18 and under in South Africa, but more than 25% of its international users are within the age group of 10-19 (Kemp, 2023). Since 33.6% of the online users of South Africa fall below 18 years of age, the country is likely no exception (Ceci, 2023). ByteDance's database indicates that 80.8% of those with an online presence worldwide and aged below 35 years reported using TikTok. This explains the high prevalence rate in South

Africa. A study by Highhouse (2022) indicates that 78.4% of these users used the app daily, which means that TikTok is a popular platform for many of them. Users share videos several times a week, or even a day, according to the survey (Highhouse, 2022). Most respondents indicated that TikTok was their primary platform for sharing videos, with 71% sharing via text messages, 65% directly through TikTok, and 56% through Snapchat. By contrast, only 17% of individuals shared via Instagram, and just 1% used Twitter (Highhouse, 2022). This data underscores TikTok's dominance among South African youth as a preferred platform for video sharing, reflecting its widespread popularity and integration into daily communication practices.

1.9.2 Socio-economic backgrounds of users

Research on TikTok in South Africa is limited, and scattered in focus. Studies include checking the usage of social media websites such as TikTok among the youth from diverse socio-economic backgrounds in South Africa (Zhao and Wagner, 2022). Ling et al. (2022) examines the possibility of using TikTok as a starting point for identifying social media addiction, from the nature of the type of information presented on TikTok (Highhouse, 2022). It has also been examined for its applicability to teaching and learning (Zhao and Wagner, 2022). The netnography approach has also been used to establish the representation of the prophetic churches in southern Africa on TikTok (Fernando et al., 2023). Another study by Mbinjama (2021) examined whether TikTok could influence the consumption behaviours of South African individuals, while the #VoetsekANC movement was investigated for insight into how social media platforms are leveraged for political activism (Mbinjama, 2021). From a medical perspective, there has been research into the social media iconography of cochlear implants, too (Rossi et al., 2023), and Hoi and Yin (2023) delve into how users express physical sensations and emotions on social media.

The high use of TikTok among South Africa's younger population aligns with global trends in social media usage. According to Chou et al. (2009), young adults aged 18–34 engage with social media significantly more than older demographics, particularly in activities such as research, self-expression, and community participation. Studies confirm that the 25–44 age group is three to five times more likely to use support groups than those aged 65 and above, indicating that younger populations are the primary users of platforms such as TikTok (Zannettou, 2023; Bányai et al., 2017).

Consequently, activities on TikTok in South Africa, including those tied to education, activism, and personal expression, reflect broader global patterns of youth engagement with digital platforms. This intersection of media, culture, and technology positions TikTok as a significant site for studying evolving social practices within the South African context (Mbinjama, 2021).

1.9.3 TikTok's role in South Africa

In South Africa, TikTok has become a key platform for youth engagement, reflecting the broader trend of high social media usage among young people (Bányai et al., 2017; Chou et al., 2009). Its popularity lies in its ability to offer an inclusive space for creativity, discussion, and connection, which aligns with the cultural and social realities of South Africa's diverse population. TikTok creators in South Africa, including educators and health professionals, have recognised the platform's potential to address critical issues such as sexual health and identity (Feldkamp, 2021; Olivares García, 2022).

For instance, inclusivity makes it a powerful medium for Comprehensive Sexuality Education (CSE). TikTok provides an avenue for marginalised voices, including LGBTQ+ communities, to share experiences and advocate for social change (Olivares García, 2022; Yeung et al., 2022). The platform's transition from pure entertainment to a tool for social and educational impact has normalised discussions about identity.

1.10 Conclusion

To conclude this chapter, the research aims and objectives are succinctly outlined. This study seeks to explore how TikTok, as a digital platform, contributes to comprehensive sexuality education (CSE) in South Africa by examining its role in shaping and disseminating knowledge on sexual health and identity. Specifically, the research focuses on the work of two TikTok influencers: Khumo Masege (@kmhealingagain) and Dr Mpume Zenda (@dr.gynae), whose content and perspectives provide a lens through which the platform's potential and limitations can be analysed. The study adopts a qualitative approach, incorporating interviews with these influencers and a detailed analysis of their most viewed TikTok videos.

The following chapters provide a systematic exploration of this inquiry. Chapter 2 reviews the existing literature on digital media, CSE, and TikTok's educational potential. Chapter 3 outlines the theoretical framework, drawing on the works of Foucault, Hall, and Connell to

examine discourse, representation, and gender constructs. Chapter 4 details the research methodology, including data collection and analysis methods. Chapters 5 and 6 present the findings. Chapter 5 focuses on the influencers' profiles, motivations, and audience engagement, while Chapter 6 provides a textual and multimodal analysis of their TikTok content. Finally, Chapter 7 synthesises the findings, offering conclusions and implications for leveraging TikTok for effective CSE delivery in South Africa.

Chapter 2: Literature review

2.1 Introduction

This chapter will explore the foundational concepts and global significance of comprehensive sex education, recognising its universal relevance and the specific adaptations made by different nations, including South Africa. This overview will illuminate how South Africa, among other nations, draws upon this internationally embraced approach to address the complex terrain of sexual education within its unique social and cultural context.

While this literature review draws substantially on local studies to contextualise the South African experience, it is underpinned by a broader engagement with international and critical scholarship that has informed its conceptual framing. Scholars such as Louisa Allen (2011, 2017), known for her critical work on sex education and her advocacy for desire-centred and youth-informed approaches, were instrumental in shaping the analytical lens of this study, even if not cited extensively throughout.

Similarly, the recent work by Shefer and Ngabaza (2023), which offers a comprehensive critique of dominant sex education paradigms and explores decolonial, feminist, and youth-focused approaches, served as a foundational resource in guiding this review. Their volume captures the tensions between rights-based discourses and the lived realities of learners, a concern that directly informs this thesis's interrogation of informal, influencer-led CSE on TikTok.

Recent work by Shefer and Ngabaza (2023) presents a comprehensive review of both historical and emerging critiques of sex education in South Africa and beyond. Their reflections on the tensions between rights-based language, neoliberal policy frameworks, and lived realities of young people offer a necessary critique of institutional CSE. Their edited volume foregrounds feminist, decolonial, and youth-centred approaches that resonate strongly with the alternative pedagogies emerging on platforms like TikTok.

There is also a growing body of work exploring the digital mediation of sex education, including contributions by Aldred and Fox (2021), who examine the complexity of online spaces where formal and informal learning intersect. Their work highlights how digital

platforms become sites of negotiation, resistance, and identity formation—offering a critical foundation for understanding the hybrid nature of TikTok as both entertainment and pedagogy.

Building on the global significance of comprehensive sex education (CSE), I will explore against the backdrop of CSE how formal and informal sex education content is distributed via different digital channels and social media platforms. The research that investigates this field of content creation is currently expanding (Döring et al., 2022). Researchers have shown interest in such phenomena as sex education ‘influencers’ who may gain access to a global audience (Khan, 2022). In recent years, TikTok has emerged as a popular social media platform for sharing short videos, capturing the attention of millions of users worldwide. With its engaging content, TikTok has become an influential tool, especially among younger audiences. Emerging research suggests that TikTok may offer a promising space for informal sex education, particularly among adolescents and young adults who are drawn to its short-form, relatable content. While more rigorous evaluation is still needed, studies indicate that the platform facilitates access to information and can create openings for peer-led discussion and engagement with sensitive topics (Döring et al., 2022; Lupton et al., 2022; Setty, 2023).

2.2 Contemporary approaches to sex education

Sex education is understood as an essential part of a young person’s education because it has been shown that the knowledge and skills acquired from such education support young people in making informed sexual health and relationship choices (Ngabaza and Shefer, 2019). There are various methods for conducting sex education within South Africa, all informed by different beliefs, goals, and methods. Two common approaches are Comprehensive Sex Education and Abstinence-Only Sex Education (L’Engle et al., 2016). I will explore each approach with respect to its central components, strengths and weaknesses, and the effectiveness of each as a means of explaining how they contribute toward understanding young people’s sexual health and behaviour. This analysis will provide a foundation for evaluating how these approaches contribute to understanding sex and sexuality using the CSE aims as a reference point to evaluate how social media contributes to addressing the gaps left by traditional sex education within schools.

2.2.1 Comprehensive sex education

CSE is widely regarded as the gold standard for sex education when implemented effectively, providing children and young people with the knowledge, skills, attitudes, and values needed to make informed decisions about their sexual and reproductive health (Ngabaza, and Shefer, 2019). It is designed to be curriculum-based, medically accurate, evidence-based, and age-appropriate, aiming to empower individuals to navigate complex issues related to sexuality and relationships. While the implementation of CSE varies across contexts, its principles serve as a benchmark for evaluating the strengths and shortcomings of digital sex education platforms such as TikTok. For this study CSE will be used as a reference point against which to compare other methods of sex education. This is not to say that CSE is without any faults or flaws, and this will also be addressed in this chapter.

CSE goes beyond imparting factual information to encompass a rights-based approach that emphasises critical and social justice pedagogy. This approach challenges inequities in education systems and ensures that sex education equips learners to advocate for their rights and confront systemic barriers to health and well-being (Moletsane, 2010). CSE addresses broad domains of social life, including **sexuality**, **reproduction**, **relationships**, **communication**, and **sexual health**. Various actors—including NGOs, NPOs, state agencies, and advocacy groups—promote and defend their own definitions of what CSE should entail. These definitions are not universal truths but reflect the perspectives and priorities of the organisations behind them. This overview aims to highlight the commonalities and variations in these definitions to establish a framework for evaluating digital sex education platforms such as TikTok.

The core components of CSE, as outlined by Planned Parenthood (2023), include:

- **Reproductive health:** Information on reproductive development, contraception, and STI prevention.
- **Sexuality:** Education on sexual orientation, gender identity, and forms of sexual expression.
- **Healthy relationships:** Teaching communication, consent, and recognising and preventing sexual violence.

- **Life skills:** Decision-making and fostering interpersonal dynamics that support well-being.

There is broad agreement that CSE should start in early childhood and continue throughout a person's lifespan (UNESCO, 2023). Early education is emphasised for its role in improving attitudes and behaviours related to sexual and reproductive health by increasing knowledge about bodies, relationships, and safe decision-making. School-based programs are seen as a primary mechanism for delivering CSE, supported by community-based initiatives that engage parents and caregivers (United Nations Population Fund, 2023).

Ultimately, the aim of CSE is to decrease risk-taking behaviours and empower individuals to make informed choices about their sexual health and well-being (United Nations Population Fund, 2023). This structured yet adaptable approach serves as a benchmark for assessing alternative educational methods, such as TikTok, in addressing the gaps in traditional systems and reaching a broader audience of young people.

Comprehensive sex education is typically taught to children at a young age. However, it aims to introduce age-appropriate information which is reportedly effective when taught over several years (United Nations Population Fund, 2023). As a rights-based approach, it includes information about human development, anatomy, reproductive health, contraception, childbirth, and sexually transmitted infections (STIs), including HIV (United Nations Population Fund, 2023). Still, alternative names may be given, such as human rights education, gender equality education, or sexual and reproductive health education or information (United Nations Population Fund, 2023).

Advocates argue that high-quality CSE delivers significant positive outcomes for young people. Studies suggest that those who receive comprehensive sex education are more likely to delay sexual initiation, use contraception, and engage in safer sexual practices (L'Engle et al., 2016; Mayeza and Vincent, 2019). CSE has been linked to improved knowledge and self-esteem, positive changes in attitudes and social norms, and the development of self-efficacy and decision-making skills (Francis, 2010).

Data from the United Nations Population Fund (2023) highlights that CSE contributes to reducing rates of unplanned pregnancies, STIs, and sexual violence while promoting gender equality and healthy relationships. A critical and social justice pedagogy further amplifies these

benefits by fostering a sense of empowerment and agency among learners, enabling them to navigate not only personal decisions but also societal inequities (Moletsane, 2021).

While CSE is widely recognised as an effective approach, it is not without its criticisms. Implementation challenges, including inconsistent delivery, lack of trained educators, and insufficient resources, have been identified as significant barriers to its success (Shefer and Macleod, 2015). Despite these benefits, traditional CSE often fails to meaningfully engage with students' diverse experiences and perspectives. Bhana and Shefer (2019) highlight the tendency of CSE curricula to be framed within heteronormative and gendered assumptions, further marginalising LGBTQ+ youth and reinforcing traditional power dynamics. Additionally, the diversity of definitions and approaches promoted by NGOs, state agencies, and advocacy groups sometimes creates confusion, diluting the consistency and effectiveness of the curriculum. These gaps underscore the need for innovative platforms such as TikTok, which can disrupt the dominance of expert-driven approaches and offer alternative avenues for participatory and inclusive learning.

As Ngabaza and Shefer (2019) note, CSE as delivered in many South African schools is often linked to the dominance of 'expert'-based didactic pedagogy, where teachers function as authoritative figures delivering information in a structured and hierarchical manner. This approach leaves little room for participatory learning or addressing the lived realities of students. In contrast, platforms such as TikTok represent a departure from traditional classroom experiences. TikTokers, often unbound by formal pedagogical constraints, create content that is dynamic, engaging, and deeply responsive to their audiences. Unlike the top-down delivery of expert-driven CSE, TikTok encourages user interaction, peer-led discussions, and content tailored to real-world questions and concerns. This flexibility challenges the rigidity of traditional models and opens up opportunities to address gaps in the dominant classroom approach to CSE.

Age-appropriateness is a contentious issue, with some parents and advocacy groups claiming that CSE introduces sensitive topics too early in children's development (ACOG, 2023). Additionally, the diversity of definitions and approaches promoted by NGOs, state agencies, and advocacy groups sometimes creates confusion, diluting the consistency and effectiveness of the curriculum. These gaps highlight the need for continued research and refinement to address these challenges and ensure that CSE meets the needs of all learners.

2.2.2 Abstinence-only sex education

Abstinence-only sex education promotes abstinence as the only sure way of avoiding pregnancy and STIs. Abstinence-only sex is also referred to as “Sexual Risk Avoidance”, and the approach is specifically designed to teach young people that abstinence until marriage is the only morally acceptable and safe way to prevent unintended pregnancies and STIs (KFF, 2018). It teaches that sex before marriage and at a young age comes with heavy physical and emotional costs, and emphasises that pleasure in sex is most likely to be found within the confines of marriage. There is a focus on the importance of “family values” and teaching morality in order to limit sex within the bonds of marriage (Francis, 2010). Abstinence-only education generally does not discuss effective methods of contraception or condoms as a means to prevent unplanned pregnancy and STIs.

While abstinence-only sex has been promoted in various contexts as a way to prevent unintended pregnancies and STIs, it has also faced criticism on several fronts for its limitations and lack of inclusivity. Some believe that comprehensive sex education encourages premarital sexual intercourse (Columbia University, 2017). Others say the abstinence-only approach has been demonstrated not just to be ineffective but even to damage the very ideals it hopes to attain (KFF.org, 2023). Other critics further argue that abstinence-only education emanates from religious conviction (KFF.org, 2023). Despite the claims of some researchers, such as Kirby et al. (2007), that abstinence education delays teens’ first sexual encounters and reduces the number of partners they have, Columbia University (2017) found that youth who receive information about contraceptives in sex education programs are at a 50% lower risk of teen pregnancy than those in abstinence-only programs (Columbia University, 2017).

Abstinence-only sex education differs from comprehensive sex education in several ways. Abstinence-only programs focus on promoting abstinence as the only method to avoid sexually transmitted infections (STIs), HIV, and unwanted pregnancies (L’Engle et al., 2016). In contrast, comprehensive sex education programs teach a range of topics, including abstinence, contraception use, STIs and pregnancy prevention, and human sexuality (KFF, 2023). Abstinence-only programs do not appear to delay the first time young people have sex or influence if or when they begin having sex (KFF, 2023). Conversely, comprehensive sex education is said to delay sexual initiation and increase the use of contraceptives (Columbia University, 2017). Comprehensive sex education programs include education on condom and contraception use, while abstinence-only programs may not (Ott and Santelli, 2007).

Moreover, abstinence-only programs may not provide information on STIs and pregnancy, while comprehensive sex education programs do (Ott and Santelli, 2007). Comprehensive sex education programs have favourable effects on adolescent behaviours, such as delaying the initiation of sex, reducing the number of sexual partners, and reducing the incidence of unprotected sex (Columbia University, 2017). According to Columbia University (2017), young people who receive information about contraceptives in sex education programs are at a 50% lower risk of pregnancy than those receiving abstinence-only programs. In addition, it appears that teens in comprehensive programs are no more likely to have sexual intercourse than those receiving abstinence-only education (Columbia University, 2017). Of course, opponents of comprehensive sex education claim the opposite: comprehensive programs encourage premarital sex (Columbia University, 2017). Critics of abstinence-only sex education programs argue that this approach may involve religious influence in secular education and that such programs may be heteronormative and idealise heterosexual marriage, thus denigrating queer relationships (Columbia University, 2017). The critique would be that an education based solely on abstinence and one that focuses on marriage will mean that members of the LGBTQ+ community may never receive any formal information about safe sex practices, placing them at a heightened risk for STIs (Ott and Santelli, 2007).

2.2.3 Potential benefits and drawbacks of abstinence-only sex education

While comprehensive sex education is a curriculum-based process that intends to provide young people with knowledge, skills, attitudes, and values about respectful social and sexual relationships, abstinence-only sex education adopts an alternative approach. The argument for the abstinence-only type of education relies on the conviction that adolescent sexual behaviour is harmful (Ott and Santelli, 2007). Studies have found that young people who begin sexual behaviour early are more likely to have depression and be involved in other risky behaviours (Ott and Santelli, 2007). However, the link between early sexual initiation and depression may not be solely due to early initiation itself (Ott and Santelli, 2007). Instead, pre-existing depression may play a role in subsequent adolescent sexual risk behaviour (Ott and Santelli, 2007). It is the same social deprivation responsible for early sexual initiation that may predispose one to depression and other risk-taking behaviours (L'Engle et al., 2016). Numerous studies document how early adolescent sexual behaviour is often shaped by structural vulnerability, including coercive sex, age-disparate relationships, and the co-occurrence of substance use and gender-based violence (Jewkes et al., 2001; Mchunu et al.,

2012; Francis and DePalma, 2014; Bhana and Anderson, 2013). Thus, while abstinence-only education may aim to reduce or prevent adolescent sexual behaviour, it may not address the underlying causes of early sexual initiation or the associated risks. Critics of abstinence-only sex education therefore argue that educators need to consider the potential drawbacks of abstinence-only education to address the complex factors contributing to adolescent sexual behaviour (Mayeza and Vincent, 2018).

2.3 Sex education in South Africa: context and challenges

Sex education is a topic of debate in most countries, and South Africa is no exception. According to the World Health Organisation (2024), comprehensive sex education refers to an approach taken wherein factually correct and realistic information concerning sexuality, relationships, and reproductive health is taught to young people. Several challenges, however, have risen in South Africa about the implementation of comprehensive sex education (Mayeza and Vincent, 2018). Some of the critical challenges in the implementation of comprehensive sex education in South Africa are the cultural and social hindrances that it faces at schools and in homes. These include cultural beliefs and practices that view discussions about sex as taboo, and stigma associated with sexual health issues (Mokwena, and Morabe, 2016:82). In addition, the political and economic contexts of the country also have a bearing on how comprehensive sex education will be implemented. For instance, limited material and teaching resources and the national financial provision shortfall restricts the delivery of comprehensive sex education in schools across South Africa (Achen et al., 2023). In addition to these limitations are the challenges posed by the teachers themselves. Some teachers are not skilled, knowledgeable, or confident in teaching or delivering sex education (Hanass-Hancock et al., 2018). The authors found that teachers may feel ill-prepared to tackle the complexities of sexual health, relationships, and consent, often resulting in sub-par delivery of sex education to their students. Additionally, the authors suggest that these gaps in preparedness may stem from inadequate professional development opportunities, cultural taboos surrounding the subject, and a lack of support from school administrations. As a result, teachers may avoid certain topics or deliver content in a way that is not accessible to students due to either lack of enthusiasm or understanding (Hanass-Hancock et al., 2018).

2.3.1 Addressing cultural and social barriers

South Africa's complex social and cultural landscape presents a number of hurdles to the implementation of CSE (Mayeza and Vincent, 2018). At the heart of these hurdles lie deeply rooted cultural beliefs about sexuality, creating a formidable barrier for those striving to provide essential knowledge (Achen et al., 2023; Hanass-Hancock et al., 2018). Parents and community members, who may hold values which are informed by customary practice, can perceive sex education as inappropriate for young minds, sparking a clash between "tradition" and contemporary approaches to sex education. This tension, between "custom" and "modernity", presents us with a difficult conundrum. Wilbraham (2008) addresses this difficulty in her review of *Negotiating the past: histories of the present*, in which she examines the book's exploration of how post-apartheid South Africa grapples with its history. The book is a collection of essays that focus on how South Africans have negotiated and re-interpreted historical narratives in order to make sense of the contemporary social and political landscape. Wilbraham (2008) underscores the importance of interrogating how historical narratives are constantly in flux, reshaped and recontextualised to serve present-day purposes. The review encourages further reflection on how history is used to shape social and political discourse. By examining this "delicate balance between respecting cultural norms and delivering vital knowledge", Wilbraham's analysis highlights the ongoing negotiation inherent in sex education frameworks (Wilbraham, 2008:34): "the challenge lies in negotiating the interplay between respecting cultural norms and fulfilling the imperative to provide comprehensive sexual health education" (Wilbraham, 2008:47).

In exploring the cultural and social barriers, it is crucial to acknowledge the contentious debates surrounding specific topics within the comprehensive sex education curriculum, including issues such as abortion, homosexuality, and sexual pleasure, which continue to evoke strong reactions among local stakeholders (Achen et al., 2023). These debates often influence the preparedness of educators, as teachers are frequently left to navigate these sensitive topics without adequate support or training. Within this intricate tapestry, teacher training emerges as a critical area of concern (Mayeza and Vincent, 2018). The scarcity of structured training and support for sex-education teachers, coupled with the broader socio-cultural context, creates a substantial hurdle to implementing comprehensive sex education.

Exploring this complicated terrain requires us to adopt a nuanced approach. Researchers believe that by adopting a whole-school strategy, tailoring education to various developmental

stages, and addressing gender-specific topics, South Africa can forge a path towards more inclusive, effective, and culturally sensitive comprehensive sex education (Hanass-Hancock et al., 2018).

2.3.2 Political and economic landscape

Comprehensive sex education in South Africa seems to be an issue that transcends the many political and economic divides. Some of the major obstacles towards comprehensive sexual education in South Africa include stigma and cultural and social barriers that make it hard to educate adolescent learners on how to make appropriate decisions concerning their sexual health and well-being (Achen et al., 2023). CSE is a ‘rights-based’ approach as it considers the disparities and challenges we meet in providing sex education to the youth (Hanass-Hancock et al., 2018). While attempts have been made to include content on sex education within the life skills curriculum in schools in South Africa, this is not without challenges. Despite these difficulties, sex education is considered the most important field for all students in South African schools, especially considering the social problems that most youth have to confront (Achen et al., 2023). “The fact that many studies still find evidence for effectiveness despite implementation challenges provides an all the more strong argument in favour of sex education’s potential” (Vanwesenbeeck et al., 2016). Scholars suggest policymakers and educators need to recognise these challenges and work towards overcoming them to ensure that young people in South Africa receive the comprehensive sex education they need to make informed decisions about their sexual health and well-being (Panchaud et al., 2019).

2.3.3 Challenges faced by teachers

Sex education is an essential aspect of education, especially in a country such as South Africa where young people have so many social issues, including, high rates of HIV and a lack of access to sexual education, which increase their vulnerability to sexual and reproductive health problems (Panchaud et al., 2019). However, stigma associated with adolescent sexuality forms a severe barrier to its implementation in South African schools. Numerous studies have identified significant challenges faced by teachers in delivering comprehensive sex education in South African schools. These include a lack of adequate training, limited knowledge of sexual health topics, and a lack of confidence in addressing sensitive issues in diverse classroom settings (Francis, 2010; Bhana, 2016; Mayeza and Vincent, 2019). Additionally, socio-cultural factors, such as stigma and personal discomfort with discussing topics such as

contraception, consent, and sexual orientation, further hinder educators' ability to effectively deliver the curriculum (Ngabaza and Shefer, 2019). Although there are policies in place to promote CSE, their full implementation is often hindered by various challenges that have not been thoroughly examined such as inadequate teacher training, insufficient resources, resistance from conservative communities, and a lack of integration with broader educational frameworks (Panchaud et al., 2019). Furthermore, the specific context of South Africa poses unique challenges to the implementation of CSE policies, which require a strategic combination of different approaches to build a sense of sexual agency among learners (DePalma and Francis, 2014). As such, it is important to examine the broad environment, history, and challenges around CSE policies to identify similarities and differences in implementation across different countries (Hanass-Hancock et al., 2018; Panchaud et al., 2019).

2.4 Contextual factors for successful implementation of comprehensive sex education in South Africa

The “Breaking the Silence” approach to CSE in South Africa was developed by the DBE in collaboration with various stakeholders, including local and international organisations. A key contributor to this approach is the UNESCO Regional Office for Southern Africa, which works with the DBE to implement and improve CSE in South African schools (Olsson, 2023:1174). The Breaking the Silence approach was developed and tested to address the cultural barriers and lack of skills and knowledge among educators of learners in delivering sex education in accessible formats (Hanass-Hancock et al., 2018). The rationale is that educators require training and tools to provide sex education on culturally sensitive topics such as sexual orientation and masturbation and to improve awareness and assertiveness among their learners (Hanass-Hancock et al., 2018).

Moreover, school leadership support and commitment to the program are essential contextual factors for successfully implementing CSE (Jimmyns and Meyer-Weitz, 2019). Lack of financial, social capital, and human resources adversely impacts the quality of sex education lessons. However, high levels of social networking can be an enabling factor in teaching sex education (Jimmyns and Meyer-Weitz, 2019). Educators in lower-resourced schools were able to mobilise resources they did not possess through their resourcefulness and reliance on social capital to teach impactful sex education to learners (Jimmyns and Meyer-Weitz, 2019). The term “social capital” in this context refers to the networks of relationships, trust, and support

that educators can draw upon within their communities, such as relationships with local organisations, parents, peers, and even students themselves. Essentially, social capital involves the resources and support available through social networks, which can help educators compensate for limited financial or material resources (Jimmyns and Meyer-Weitz, 2019). Community and religious leaders and parents significantly impact the acceptance of CSE, while negative attitudes and perceptions of teachers hinder progress (Chavula et al., 2022). Finally, interventions must suit the local context for successful implementation, including adjusting for differentiating developmental stages and addressing gender-specific topics (Olsson, 2023; Chavula et al., 2022).

Successful implementation of CSE in South African schools is dependent on several key factors (Vanwesenbeeck et al., 2016). It requires consideration of the contextual factors that impede or promote implementation. For example, CSE cannot succeed without support from educators, parents, and policy-makers, including financial support and capacity building for the subject teachers. Understaffing too may negatively impact the practice of effective teaching of sex education . Jimmyns and Meyer-Weitz (2019) conducted their research in secondary schools across various regions in South Africa. “Teaching in all schools was hampered by a lack of financial, social capital, and human resources, which affected the quality of sex education lessons” (Jimmyns and Meyer-Weitz, 2019). To ensure that CSE programs are effective, it is essential to identify what effective sex education programs should include and how they should manifest within a specific context (Casale and Hannass-Hancock, 2011). It is also essential to consider more prominent national factors that may inhibit implementation (Swanepoel and Beyers, 2019). Evaluation of impact, practical implementation strategies, and contextual factors shaping the implementation of CSE programs should be considered in the South African context and beyond (Sell et al., 2021). Ultimately, the successful implementation of sex education depends on understanding and addressing the context of school-based sex education needs (Vanwesenbeeck et al., 2016).

2.5 The role of traditional media in sex education

Sex education is a critical public health issue that is often conveyed through traditional media such as television, radio, and print. Adolescents are receptive to information about sexuality, and this finding is important for social marketing practitioners trying to convey sensitive messages to young people about sex education and other issues such as drunk driving and AIDS

(Lupton et al., 2022). “There are several unique qualities (e.g. algorithmic interface, short video length, audio trends) of content creation and distribution on TikTok that make it a promising tool for delivering engaging and impactful health communication” (Nicolla, 2023). Researchers have examined the extent to which adolescents report encountering sexual content in mainstream media sources (Hawk et al., 2006). Another study examined whether traditional media use is affected by the internet and if the effects of the internet on traditional media use predict changes in traditional media use (Kaye and Johnson, 2003).

A study by La Ferle et al. (2000). explored adolescents’ uses of the internet in the traditional media landscape. However, research has also shown that social media plays a more significant role in shaping injunctive norms than traditional media (Lupton et al., 2022). Sex education is not a duty of media providers or education authorities, as the specific provisions relating to sex education are unclear (Monk, 2001).

Traditional media, such as television, radio, newspapers, and magazines, have long been popular for sex education programs. This is nothing new, and there is much research on sex education in traditional media (Lupton et al., 2022). One of the advantages of using traditional media for sex education is that it can reach a large audience, including those who do not have access to the internet or other digital media. This is particularly important in developing countries where access to the internet is limited. Moreover, traditional media can be used to convey messages to young people regarding sensitive issues such as sex education, drunk driving, AIDS, and other health-related topics (Lupton et al., 2022). However, one of the disadvantages of using traditional media for sex education is that it may not be as interactive and engaging as other forms of media, such as social media. Another issue with traditional media is that it can be challenging to target specific audiences, which may result in disseminating irrelevant or inappropriate content (Hawk et al., 2006).

Furthermore, research has shown that while adolescents are very eager and open to receiving information about sexuality, they may not always trust traditional forms of media to provide accurate or helpful information (Nicolla, 2023). With the advent of digital media, the use of traditional media for sex education has decreased. However, some studies have shown that traditional media can still complement sex education programs alongside digital media (Dutta-Bergman, 2004). Additionally, education authorities have no duty concerning sex education, but they can still play a role in the provision of sex education through traditional media (Monk, 2001). Therefore, while traditional media can help reach a large audience with sex education

messages, it is essential to consider its limitations and potential drawbacks when designing effective sex education programs.

2.5.1 The effectiveness of traditional media in delivering sex education

While social media is not the most common source of exposure to sex education among adolescents, the effectiveness of traditional media in delivering sex education to young people remains a point of contention. Research indicates that adolescents are eager and receptive to receiving information about sexuality, and traditional media can play a role in conveying such information (Lupton et al., 2022; Nicolla, 2023). However, there are limitations to the effectiveness of traditional media in delivering sex education, especially when it comes to the selection of media and how adolescents consume information about sexuality (Hawk et al., 2006). The relationship between the internet and traditional media has been studied to assess the association between conventional media, digital access, social media, and two types of social participation (Dutta-Bergman, 2004; He et al., 2020). The results showed that there was complementarity between online and traditional media consumption, which suggests that both forms of media can be used to deliver sex education to young people (Dutta-Bergman, 2004; He et al., 2020). Furthermore, provisions in the Education Act of 1996 make it clear that education authorities are not duty-bound to provide sex education, which further complicates the issue of using traditional media to deliver sex education (Monk, 2001). In conclusion, while traditional media can be an effective tool in delivering sex education to young people, its limitations must be considered, and alternative methods should also be explored for a comprehensive approach.

The role of media, both social and traditional, in sex education in South Africa and the world is a complex and evolving topic. The advent of digital media has opened up new avenues for disseminating sex education, with social media platforms such as TikTok and podcasts being used to reach diverse groups of adolescents. While these platforms have the potential to provide valuable information on safe sex practices and sexual well-being, there is a lack of evaluation of their effectiveness. Furthermore, traditional media such as television and schools still play an essential role in providing sex education, although there are limitations to their effectiveness (Nicolla, 2023). The Education Act of 1996 further complicates the issue by not requiring education authorities to provide sex education. There is a need for further research to assess the effectiveness of different media platforms for delivering sex education, particularly in terms of their ability to reach marginalised groups such as sexual minorities. Education authorities

can also play a role in providing sex education through traditional media, but there is a need for greater clarity in the provisions relating to sex education. Overall, the discussion highlights the need for a comprehensive and integrated approach to sex education that considers the evolving role of media and the diverse needs of adolescents (Nicolla, 2023).

2.6 Social media and sex education

In recent years, social media has become an increasingly important tool for disseminating information and shaping public opinion on various issues. One area where social media has the potential to make a significant impact is sex education, where it can provide access to accurate and up-to-date information about sexual health and relationships to a broad audience. One social media platform that has gained particular attention in this regard is TikTok, which has emerged as a popular platform for sharing short-form videos on a wide range of topics, including sex education.

A broad study by Manuel Castells (2011) argues that digital technologies have remade the cultural landscapes of our time. In this regard, Castells says, “Networked communication through the use of the internet and social media platforms has indeed changed how people relate to one another, communicate with each other and express themselves”. He underlines how this network of digital types has made dissemination possible worldwide without any barrier to time and space in cultural content (Castells, 2011).

Castells (2011) pointed out that the current dynamics in the production and consumption of culture are from network society. He felt that people are not passive recipients of whatever cultural message they receive but relatively active agents in the coproduction and dissemination of cultural content along the various digital networks. Within such a participatory culture in cyberspace, people feel empowered to create their cultural identity and narrate themselves (Castells, 2011). Castells is helpful for his insight into how digital technologies form the practice, identity, and interaction that comprise culture in a theoretic key toward the labyrinthine character taken up by today’s global culture. Perhaps most importantly, he gives a vital perspective on the increasingly interconnected nature of the cultural landscapes in the digital era. His work explains the importance of considering what role technology could play in shaping the dynamics of culture and, as such, constitutes an engagement with the critical implications of networked communication for global culture (Castells, 2011).

Henry Jenkins' (2006) reflections on participatory culture create an essential framework for critically analysing global community development in the digital era. In his seminal work, Jenkins postulates that digital technologies, especially the internet and social media websites, have changed how people engage with media and culture. Jenkins explains that a participatory culture is one where persons are more involved in creating, disseminating, and consuming cultural goods. The line that separates producers from consumers has been increasingly complex and fuzzy (Jenkins, 2006).

As Jenkins (2006) describes, a participatory culture gives people a sense of community and interaction well beyond geographical and cultural barriers. The online medium unites all these diverse people who share perspectives, work on projects, and exchange cultural ideas. This kind of participation gives birth to global communities with shared interests, identities, and experiences. Jenkins points to the democratising potential within participatory culture. Participatory culture opposes traditional notions of cultural production and consumption; it democratises access to cultural resources and representation by enabling grassroots participation and bottom-up content creation.

Jenkins' (2006) insights light up the trends in how participatory culture forms global communities in the digital era, underlining the need for more knowledge about how digital technologies forge cultural dynamics and social interactions that enable connectivity with various differentials in global communities.

The influence of social media on the fulfilment of sex education information needs largely depends on the intensity, media content, and attractiveness of the platform used. In Indonesia, for example, social media platforms, such as TikTok, are used to meet the information needs of sex education (Ramadhan et al., 2022). The @tabu.id account on TikTok is an example of how social media can be used to educate individuals on sex education. However, the influence of messages on social media accounts has higher importance than the influence of sex education information itself (Ramadhan et al., 2022). Although social media offers a broad reach at somewhat lower costs and provides privacy for adolescents to learn about sensitive issues, the chances of obtaining an inappropriate website or incorrect information with the use of search engines for sex education are high. In addition, it has also been documented that social networking sites may contain incorrect information on topics such as contraceptives (Yoost et al., 2021.) Nonetheless, technology can help bridge the communication gap between responsible adults and adolescents, "It allows for a broad reach at relatively low cost, greater

privacy for adolescents to learn about sensitive topics, and increased capacity for individually tailoring material to specific populations” (Yoost et al., 2021). A website offering more privacy and a better understanding of sensitive subjects, which often have the potential to be awkward in the classroom setting, was more effective in providing sex education compared to traditional methods (Yoost et al., 2021).

2.6.1 TikTok’s influence

TikTok has the potential to bridge the gaps in sex education and provide sexual health information to adolescents, who may not have access to comprehensive sex education programs otherwise. A study in the United States of America analysed themes of 100 sex education videos on TikTok; according to the researchers, they fit into one of three categories: sex-educational content, sexual content from the perspective of an adult, or neither (Fowler et al., 2022). While TikTok has the potential to provide educational content, there is a concern that children’s exposure to sexually suggestive videos can have adverse effects on their sexual knowledge and attitudes (George and Baskar, 2024). In contrast, TikTok could be an effective way to talk about ‘taboo’ subjects and educate adolescents about things such as masturbation or menstruation. The Indonesian research, for example, established that TikTok has the potential to raise awareness and more widely distribute education about sexual health issues considered taboo in the country (Yoost et al., 2021). As TikTok is the fastest-growing and most representative short video platform worldwide, it is a crucial platform for researchers to analyse and study its influence on minors’ sexual health knowledge and attitudes (Tan and Zhang, 2021).

TikTok has increasingly been used as a medium in providing sex education to adolescents and illustrates the potential to fill the gaps in sexual health education (Fowler et al., 2021; Kiminami and Duggan, 2022). App and web-based content on sexual health has clear appeal to adolescents and young adults who may be eager to learn about these subjects in a discreet, inclusive manner and who may lack other avenues to obtain sex and health information (Fowler et al., 2022). However, there are concerns regarding children being exposed to sexually suggestive content on TikTok that negatively affects their sexual education. Some influential videos have been noted to be hyper-sexualised, which may not be appropriate and accurate (Ayala Guzman, 2024). The platform has been used, though, to teach taboo topics in countries where they are illegal, such as abortions in Indonesia (Ramadhan et al., 2022). For instance, marginalised or LGBTQ+ adolescents may use TikTok as one of the sources of sex education

for themselves in areas that lack the provision of sex education within schools (Zhao and Wagner, 2022). To address these issues, some researchers have proposed using social media platforms such as TikTok to provide comprehensive sex education and local resources that could significantly impact adolescent risk-taking behaviours (Yoost et al., 2021).

TikTok allows young people in every corner of the planet to produce and share content and learn from one another (Kligler-Vilenchik and Literat, 2024), accessing multiple lifestyles and cultures within a single platform (Kim, 2024). This virtual experience is claimed to change the attitudes of a new digital generation to engage with the world around them to create something new (Subrahmanyam and Šmahel, 2011). This openness can be seen, for example, in how South African youth have used the platform to create a hybrid of traditional and contemporary culture (Kariippanon and Gurruwiwi, 2022). The internet is now a primary source of information and entertainment for young people; now, they can use new digital practices as ways of identity-making. In that respect, it has put young people at the heart of digital politics, commerce, and culture (Montgomery, 2007).

2.6.2 The effectiveness of TikTok-based sex education

Where traditional modes of sexual education fall short, TikTok is filling the gaps and conveying sexual health information among adolescents. Innovative teachers have used the video feature of TikTok to develop TikTok-based tasks within closed groups. Students can work together or individually to produce video content on sexual health education topics (Ramadhan et al., 2022). Some studies suggest that TikTok can be more effective than traditional sex education in disseminating information and counselling about sexual harassment prevention (Yoost et al., 2021). Additionally, high-profile celebrities can be critical in promoting preventive medicine practices through TikTok (Fowler et al., 2022). A recent study analysed the effect of TikTok use frequency and active use on user experience and gratification, which revealed new opportunities for enhancing the user experience of TikTok-based sex education (Kiminami and Duggan, 2022).

Research shows no significant difference between how much people use TikTok based on their gender, race, or adulthood status. This opens up more possibilities for the widespread adoption of TikTok-based sex education (George and Baskar, 2024). There are also possibilities and limitations of introducing TikTok-based microlearning to university-level health sciences teaching, which has been evaluated in some research studies, presenting promising results for

the effectiveness of this approach (Ayala Guzman, 2024). Finally, future studies need to explore the determinants of continuous intention in TikTok from a social influence perspective to gain more insights into the effectiveness of this platform in promoting sexual health education (Tan and Yoon, 2024).

2.6.3 Advantages of using TikTok for sex education

TikTok changed how we consume and share information. For example, several creative teachers have offered TikTok-based assignments within closed groups where students can work in groups or individually and produce videos to form part of their assignments (Ayala Guzman, 2024). This study evaluated the possibilities and limitations of introducing TikTok-based microlearning to university-level health sciences teaching. The results showed promising outcomes for a sample of students, suggesting potential for TikTok in sex education at the university level (Ayala Guzman, 2024).

Finally, taking the perspective of social influence, exploring the determinants of continuous interaction on TikTok could offer valuable insights into the effective use of this platform for sex education (Tan and Zhang, 2021).

2.6.4 Limitations of using TikTok for sex education

TikTok presents several challenges and limitations as a platform for sex education. A significant concern lies in navigating sensitive issues, such as abortion education, which TikTok often restricts or censors (Kiminami and Duggan, 2022; Knight, 2022). Educators face obstacles when addressing these topics, with algorithms sometimes participating in the removal of peer-led content, further complicating efforts to provide comprehensive information (Knight, 2022). Additionally, TikTok's video format, while engaging, can oversimplify complex topics, potentially leading to misunderstandings or incomplete information (Kiminami and Duggan, 2022). Misleading or inaccurate content is another critical issue, as users may struggle to discern credible sources from unreliable ones (Fowler et al., 2021).

The platform's appeal to younger audiences poses its own set of challenges. While it offers an opportunity to reach this demographic, many users may not actively seek out detailed discussions on sensitive or nuanced issues. Moreover, cultural norms surrounding open conversations about sexual health can act as a barrier, limiting the scope of education. Privacy

concerns may also deter users from engaging fully or sharing personal experiences, which affects the depth and authenticity of interactions (Kiminami and Duggan, 2022).

Concerns about the sexualisation of content on TikTok and its potential impact on young viewers further complicate its role in sex education (Ayala Guzman, 2024). Additionally, the accessibility of such content raises questions about appropriateness, particularly when users stumble upon it unintentionally, without the context or consent necessary to process it effectively (Fowler et al., 2021).

Despite these challenges, TikTok holds potential as a platform for challenging dominant norms about sexual health and fostering informed choices among young people. Its highly visual and interactive nature, combined with its ability to amplify peer-led discussions, makes it a promising tool for public sex education in the age of smartphones (Jacquerye and De Sutter, 2023). However, fully realising this potential requires addressing its limitations and leveraging its strengths to create a balanced and inclusive space for sexual health education.

2.6.5 Best practices for TikTok-based sex education

Research on TikTok-based sex education content suggests several best practices for creating compelling content. First, it is essential to survey user experience and evaluate the effectiveness of different advertising methods to determine the most effective strategies for reaching and engaging with the target audience (Sciberras and Tanner, 2023). These influencers could be used to give further coverage to the educational content on reproductive health and build more influence on the young audience (Fowler et al., 2021). In designing practical TikTok-based activities, teachers can build on prior research on TikTok as a social media platform that considers user demographics, sex education level, and unique features. Several other potential challenges and limitations also need to be factored in, such as the potential for free-riders to take advantage at the expense of the comparative disadvantage of TikTok-based activism or agenda-setting practices on the part of the platform itself. Indeed, previous research identified that age and gender may determine the reasons behind using TikTok, and creators should note such variables when creating content. The use of appropriate language, phrasing, and messaging aligned with set guidelines in dealing with sensitive areas, such as sexual violence, is informed by previous digital health communication studies. Overall, developing effective sex education content on TikTok calls for strategic planning against a thoughtful consideration of the target audience and within established best practices parameters.

2.6.6 The impact of social media on sex education

Despite the popularity of social media platforms, there is a lack of evaluation of content such as sex education podcasts and social networking groups (Srinayanti et al., 2024). One piece of research conducted in Bridgewater, Massachusetts, presents a content analysis of themes for 100 sex education videos. The study found that the sex education content on social media is mainly limited to topics such as safe sex (Mekler, 2021). Effective sex education cannot bank on simple information relay; rather, it depends on the social and political contexts in which it is set (Cai et al., 2023).

Despite the popularity of social media, research conducted in Nigeria suggests that it is not a common source for sex education. Only 9.5% of adolescents in Osadolor et al.'s (2022) study reported receiving their first sex education from social media platforms such as TikTok. However, the study did not provide any information on the effectiveness of this sex education. This gap in research underscores the need for further investigation into the potential benefits and limitations of using social media as a tool for delivering sex education. It is essential to consider how social media can be used to reach young people who may not have access to traditional sources of sex education and whether it can effectively provide them with the information they need to make informed decisions about their sexual health. Additionally, it is crucial to examine the quality and accuracy of sex education content on social media platforms, as misinformation can have harmful consequences for young people. Further research is needed to fully understand the potential of social media in delivering sex education to the youth and to develop evidence-based strategies for leveraging this platform to improve sexual health outcomes among young people.

2.6.7 The use of TikTok in sex education: global and South African perspectives

TikTok has emerged as a significant platform for engaging young people on various topics, including sex education. In South Africa, the platform's growing popularity has sparked interest in its potential to address gaps in CSE. However, research specific to its impact in the South African context remains limited.

Adekola and Mavhandu-Mudzusi (2022) conducted their research in South Africa, exploring the potential of TikTok to disseminate scientifically accurate sex education messages to

students and other audiences. Their findings highlight the platform's capacity to complement formal CSE initiatives by addressing misinformation and engaging youth in discussions about sexual health. This is particularly relevant in the South African context, where traditional CSE programmes often encounter cultural taboos and logistical barriers.

Another South African study by Adekola (2023) examined the influence of "fitspiration" TikTok videos, raising concerns about how exposure to such content can reinforce harmful body ideals or stereotypes. This study underscores the need for critical engagement with TikTok's content, especially when addressing youth audiences, as it demonstrates how the platform's dual role as an educational and entertainment space can sometimes perpetuate unhealthy norms.

Beyond South Africa, international research provides broader insights into TikTok's educational potential. For example, Soriano-Ayala et al. (2022), in their study conducted in the United States, investigated the sexualisation of TikTok videos, comparing the content with young people's narratives about the platform. Their findings highlight the tension between TikTok's entertainment-driven nature and its potential as an educational tool, a dynamic equally relevant to South African youth navigating similar digital spaces.

Escamilla-Fajardo et al. (2021) conducted research in Spain, exploring TikTok's educational impact in formal learning environments. Their study demonstrated how the platform's short-form video format can effectively engage students in learning. However, they also cautioned against the oversimplification of complex topics, which could lead to misunderstandings. This insight is critical for South Africa, where nuanced discussions about sexual health are essential in addressing diverse cultural and social realities.

Jacquerye and De Sutter (2023), in their European-based research, identified challenges associated with TikTok's algorithmic biases and content moderation practices. These challenges include the risk of censoring educational material on sensitive topics such as abortion or LGBTQ+ rights. Such findings are directly applicable to South Africa, where these topics remain contentious and require careful navigation to ensure inclusivity and accuracy in sex education messaging.

TikTok's role in peer education, particularly in empowering marginalised sexual identities, has been highlighted in various studies, demonstrating its potential as an educational and advocacy tool. For instance, a study undertaken in Germany underscores how social media platforms

such as TikTok and YouTube facilitate peer education and empowerment for marginalised sexual identities (Döring et al., 2022). The research emphasises the potential of these platforms to create supportive spaces where users can share experiences, access affirming content, and challenge societal norms around gender and sexuality. This is particularly significant for LGBTQ+ communities, where access to inclusive and affirming sex education in traditional school settings may be limited or even harmful.

While TikTok's global relevance in education is evident, its applicability in the South African context is uniquely significant. South Africa's diverse cultural landscape and persistent gaps in formal CSE programmes make TikTok a promising platform for reaching young people. By examining both local and international studies, this research situates TikTok within a broader discourse on digital education, offering insights into how the platform can empower youth to make informed decisions about their sexual health while addressing its inherent challenges.

2.6.8 Evaluating TikTok as a global tool for sex education

TikTok has been used to promote public discussion and education about sex and HIV, and the Chinese version of the app has been used to deliver sexual health information (Zhang et al., 2022). Additionally, social media platforms such as TikTok can be used for sponsored ads to improve sexual health education, and studies have found a strong positive effect of education on such platforms (Wang et al., 2022). Although TikTok is often associated with sexual content, the most searched hashtags on the app in 2022 were found to be related to education sites such as Coursera rather than erotic or explicit sexual content (Saposnik, 2023).

Research has shown that there are several barriers to quality and age-appropriate sexual education in South Africa, including limited access to HIV and sexual/reproductive health services (Shah et al., 2022). While TikTok and other social media platforms have been used to deliver health-related information, studies have shown that TikTok, among other social media platforms, has seen misinformation spread quickly through these platforms with little governance to remove the content (Lupton et al., 2022). Demographic controls such as age, gender, education, and socioeconomic status can be included in evaluating the effectiveness of TikTok as a sex education tool (Nicolla, 2023). Despite some benefits detected in using TikTok in other educational contexts, it is essential to assess its pedagogical use before integrating it more widely into sex education programs (Escamilla-Fajardo et al., 2021) in order to better contextualise, more specifically, how effective it is as a sex education tool.

To evaluate the effectiveness of TikTok in delivering sex education, demographic controls for age, gender, education, and socioeconomic status are included in research studies conducted in South Africa (Epstein et al., 2023). Studies have demonstrated that TikTok's engaging and interactive format enhances users' understanding of sexual health topics. For example, the use of creative videos has been shown to improve knowledge retention and shift attitudes towards more positive and informed perspectives on sexual health (Wang et al., 2022; Escamilla-Fajardo et al., 2021).

The platform's design, which allows users to personalise their feeds through the algorithm, makes it an effective tool for targeting specific audiences with tailored educational content. Sponsored advertisements on social media platforms, including TikTok, Instagram, Twitter, YouTube, and Facebook, have further demonstrated strong influences on users' education levels by reinforcing key messages and providing accessible information (Wang et al., 2022).

TikTok also leverages hashtags to drive engagement and visibility, with sexual health education-related hashtags among the most searched on the platform (Saposnik, 2023). Hashtags such as #SafeSex, #ReproductiveHealth, and #Consent not only foster conversations but also encourages young people to engage with and share educational content, further amplifying its reach.

Future research is needed to explore the nuanced impacts of TikTok on mental and emotional well-being, particularly its potential to create a sense of "social safeness" within its community. Maziriri et al. (2022) suggest that social safeness may moderate the relationship between exposure to health-focused content and improvements in life satisfaction, positioning TikTok as a tool not only for education but also for enhancing psychological well-being. Additionally, examining TikTok's ability to address cultural taboos and myths surrounding sexual health in diverse settings such as South Africa could provide deeper insights into its transformative potential.

Chapter 3: Theoretical framework

3.1 Introduction to theoretical framework

This study, undertaken within the framework of South African Comprehensive Sexuality Education (CSE), adopts a constructivist approach to representation, drawing on the works of Stuart Hall and Michel Foucault to explore the relationship between media representation and subject formation. Constructivist scholars argue that media and cultural representations shape our understanding of the world and the ways in which we interact (Hall, 1997, 2013). The CSE curriculum in South Africa serves as a critical framework for addressing issues related to sexual health, gender identity, and relationships among adolescents and young adults. Still, the effectiveness of CSE initiatives is contingent upon how sexual education content is represented and disseminated through various media channels, including digital platforms. What follows is a discussion of the constructivist framework which underpins the exploration of the complex interplay between discourse, power and the constitution of subjects in South Africa. I use Michel Foucault's concept of discourse (1991), as interpreted by Stuart Hall (1997), to explain the role of media representations in the constitution of subjectivity. Additionally, I use Foucault's ideas concerning the social construction of sexuality, as set out in *The History of Sexuality* (Foucault, 1990), as it highlights how power, knowledge, and discourse shape societal norms around sexuality.

This framework enables me to demonstrate how powerfully the media's representations of sexuality can shape our perception and behaviour. It also lays the foundation for the study's focus on the relationship between representation and subject formation. Here, I draw on Hall (1997, 2013). This frame is helpful because, while the South African approach to CSE within the curriculum provides an essential framework through which adolescents and young adults can be empowered to take up issues affecting their sexuality, gender, and relationships, the effectiveness of CSE initiatives is often contingent upon how sexual education content is represented and disseminated through various media channels, including digital platforms.

Building on the critical theories of Stuart Hall (theory of representation) and Michael Foucault (discourse, knowledge and the subject), this thesis also draws on Raewyn Connell's constructivist concept of the gender order to assess how CSE content is presented on the digital media platform TikTok (Hall, 1997, 2013; Foucault, 1976; Connell, 1987). Connell's (1987)

work provides a valuable framework for understanding the intersection of gender dynamics within media representations. These frameworks collectively illuminate various aspects of the production, dissemination, and reception of sex education content. Hall's (1997) theory of representation explains how meaning is socially created and how both the producer and consumer of any representation construct and negotiate that text's meaning. Similarly, Foucault's (1976) concept of discourse and power unveils the socio-cultural contexts influencing the production and reception of this content, revealing underlying power dynamics that contribute to shaping the form and meaning of media representations. Hall (1997), building on Foucault's (1976) exploration of knowledge and power, critiques structuralist theories of representation. While structuralism focuses on how meaning is constructed through signs, Foucault and Hall emphasise how social institutions, including the media, use representation to create and perpetuate dominant power relations. Connell's constructivist model helps to contextualise gender constructions within colonial and post-apartheid experiences, informing the analysis of gender representations in contemporary sex education content (Connell, 1987). This framework helps us understand how historical events shape gender roles as well as perceptions of their relationship to sexual health and behaviour within digital media content such as TikTok.

Foucault's concept of discourse and power also offers a lens for examining how TikTok creators navigate and challenge dominant norms around sexuality. Hall's theory of representation highlights how meaning is constructed and contested within media content, particularly in digital spaces. Connell's gender order framework provides insights into how these representations reinforce or disrupt traditional gender hierarchies, especially within the South African context. Together, these theoretical perspectives illuminate the complexities of digital sex education, situating TikTok as both a site of resistance and reproduction of existing social structures.

In addition to the theoretical frameworks established by Hall (1997, 2013), Foucault (1976), and Connell (1987) that serve as the foundation for this study, it is crucial to recognise the significance of decolonial and postcolonial feminist viewpoints in comprehending the complex dynamics of sex education in South Africa. Although these perspectives are not examined in detail within the main theoretical chapter, this research is implicitly guided by studies that scrutinise the coloniality of gender and the intersections of sexuality with race, class, and historical power dynamics. The conceptualisation of the "coloniality of gender" by María

Lugones (2007) is especially pertinent in this context, as it highlights how colonial power has altered indigenous perceptions of gender and sexuality; an epistemic rupture whose effects persist in shaping contemporary sex education. While Hall, Foucault, and Connell are the primary analytical lenses, the wider context of this research remains sensitive to the decolonial critiques that question Eurocentric assumptions prevalent in both public health and educational discourse.

3.2 Stuart Hall's Theory of Representation

At the core of Hall's theory is the process of encoding and decoding, as discussed in much greater detail in his 1980 essay. While rooted in his earlier Marxist concerns with ideology, this theory is constructivist in its emphasis on the active construction and circulation of meaning within the "circuit of culture". This theory involves the relationship between that of producers and consumers – the texts encode meanings, which the consumers variously decode at the moment of consumption. While Hall (1997:24) argues that "media content producers encode preferred meanings in the signs they use", he postulates that audiences also participate in the production of meaning by decoding the messages, which is not a passive process but rather an active negotiation of the text's meaning, which is read in relation to one's cultural background, experience, and social context.

According to Hall, representation in any form could not be remotely possible without cultural codes. He describes cultural codes as "the shared understandings, meanings and practices within a culture" (Hall, 1997:25). From this perspective, one's cultural codes will contribute to how messages of sexual health and relationships will be decoded by the audience of sex education content on TikTok. In other words, media content is accessible and understandable when it draws on shared cultural codes; but its preferred meanings can also be rejected or negotiated when it contradicts the audience's frame of reference. This is the essence of Stuart Hall's encoding/decoding model, which offers a useful framework for analysing how TikTok content creators produce messages about sex education and how audiences interpret these messages in various ways. Hall argues that media producers (in this case, TikTok creators) encode content with intended meanings shaped by their cultural and ideological perspectives, but audiences decode these messages differently depending on their social positions, cultural contexts, and personal experiences (Hall, 1980). This process highlights the polysemy of media

texts—where a single piece of content can generate multiple, sometimes conflicting, interpretations.

The underlying premise of Hall's theory of polysemy is the idea that there is always a potentiality for a cultural text to have more, even opposing, meanings. Hall said, "The same event, the same sign, can be read in quite different ways by different audiences or readers" (Hall, 1997). Reading content on sex education on TikTok within the South African context, with polysemy in mind, presupposes that any particular message will uniquely reach persons and communities of diverse cultural backgrounds and standpoints. First, we become familiar with the fact that preferred, negotiated, and oppositional readings are constituted by differently positioned audiences. Regarding sex education on TikTok in South Africa, one group of readers may read through preferred readings that agree with the cultural ideals, another group may negotiate, while some create oppositional readings as a reflection of diverse societal representations.

This work takes cognisance of dominant ideologies through which meanings of representations are influenced. As Hall put it, "the meanings carried by the dominant representations become the 'common sense' of society" (Hall, 1997:26). It is in this respect that the study of sex education on TikTok in the South African context should relate to how dominant ideologies and cultural norms construct portrayals of sexuality and intimacy on that site. Hall (1997) postulates that "media are sites of struggle where diverse social groups fight for representation". He iterates that "media representations are never neutral mirrors of reality". In analysing sex education on TikTok within a South African context, representation is a cultural site where actual social struggles around meanings, identities, and values about sexual health and relationships are fought out. Representation does not ever stand in a state of stability, just like social media. "Representation is not the same as reflection or mirroring. It does not reflect, like a mirror, what already exists out there in the world. It produces the meaning of the thing being represented" (Hall, 2013:21). This quote encapsulates the transformative nature of representation regarding construction in meaning and shaping ways of viewing for the individual.

Stuart Hall's ideas of representation provide a valuable framework for analysing the globalised, participatory nature of TikTok, particularly in how meaning is produced, communicated, and interpreted within this digital platform. Hall's theory posits that representation is not a passive mirroring of reality but an active process of meaning-making that shapes how individuals and

groups are understood within cultural contexts (Hall, 1997). On TikTok, representation operates through both visual and textual modes, with users actively constructing, sharing, and interpreting content that often reflects and contests global norms, ideologies, and cultural narratives.

The TikTok creators are active agents of representation in sex education; therefore, they produce videos to convey information on relationships, consent, and reproductive health. Hall states, “Representation is the process of producing and communicating meaning within a culture”(Hall, 1997:15). Using visual elements, narrative, and symbols, active agents construct discourse and can shape how the audience perceives sexual education.

In so doing, the audience of TikTok made worthy interventions in these cultural texts through their views and active responses to the continuing conversation about sex education. As Hall (1997:61) says, representation “involves the use and play of symbols, images, and representations, which stand in for yet give meaning to the world around us, and structure our social relations, including relations of power”. Features such as the comment function, sharing tools, and TikTok’s duet feature —where users can create side-by-side videos responding to or interacting with existing content—facilitate dialogical interactions; ideas and views of the world are contextualised by the user and socially constructed understandings, thus helping to constitute the social order.

Representation theory helps us to understand how media constructs a view of the world, representing social relations. According to Hall (1997), it is through such an analysis of the production, circulation, and interpretation of representation within media texts that scholars are better informed about how meaning is constructed and negotiated within cultural contexts. Representational theory, as a perspective, frames representation as an active relationship that is mutually constituted between creators and consumers of the representation.

Stuart Hall’s use of Michel Foucault’s theories of discourse and the formation of subjectivities build on his insight into the complex relationships between power, knowledge, and cultural production. Indeed, it is from here that Hall extrapolates theories of discourse into the field of media studies, theorising how representations within media form subjectivities that contribute to social identity-building. In this way, Hall’s framework provides critical insights into how TikTok functions as a global site where the meaning of sex and sex education is negotiated, contested, and disseminated. By analysing the platform through Hall’s lens, we can better

understand the complexities of how digital spaces shape cultural norms, influence individual and collective identities, and contribute to globalised flows of meaning.

3.3 Hall's adaption of Foucault's theories

Foucault's notion of discourse as presented in *The Archaeology of Knowledge* (1972) refers to a system of meanings which structure and control the production of truth in specific historical and social contexts. Discourses are neither simply descriptive or neutral; they are constitutive, in that they actively produce and shape knowledge about the world, defining what can be thought, said, and known within any particular society at any one time.

Hall uses Foucault's concept of discourse to investigate how mass media constructs and circulates dominant ideologies and cultural norms. For Hall, representations in the mass media are part of discursive formations that help organise how people understand themselves and their social realities. Media discourses construct meanings about and interpretations of social phenomena by selecting, framing, and circulating specific narratives and images.

Hall builds on Foucault's work on subject formation by providing an accessible explanation of how media constructs discursive subject positions for audiences to identify with. Foucault approached subject formation from the point of view of how persons are constituted as subjects within discursive frameworks and structures of power. Hall takes that framework and shows how media representations position individuals within larger socio-cultural discourses and power relationships. Media representations play a central role in the construction of subjectivities and the formation of identities by positioning readers within specific discursive frameworks.

3.4 Foucault and Hall: intersection of knowledge and power

Foucault's concept of discourse is central to understanding the intricate relationship between knowledge, power, and subject formation. For Foucault, discourse is not merely a system of communication but a mechanism through which knowledge is produced, controlled, and infused with power to shape social relations and individual subjectivities (Foucault, 1972). Knowledge, according to Foucault, is always entangled with power; it defines what can be thought, said, or known within specific historical and social contexts, thereby disciplining

behaviours and beliefs through normative frameworks (Foucault, 1972). Media institutions, as sites of knowledge production, play a significant role in distributing this “truth”, often reinforcing dominant ideologies and silencing alternative perspectives.

Hall adapts Foucault’s insights by explaining how representations constitute discursive subject positions for media audiences. Hall (1997:5) argues, “Media are not just a representation of the real but constitute and construct it through the provision of representations that define and circulate the cultural norms and values and the identities constituting subject positions from which people view themselves and their worlds”. In this sense, media representations not only perpetuate dominant discourses on sexuality, relationships, and gender but also offer spaces for resistance, where audiences can negotiate or challenge these meanings.

3.5 Structuralist approaches to representation

To understand Foucault, we need to understand structuralism and, in turn, his rejection of structuralist understandings of representation. Structuralism, rooted in the linguistic theories of Ferdinand de Saussure, posits that meaning is constructed through systems of signs, which are composed of a relationship between a signifier (the form of the word or image) and a signified (the concept it represents) (de Saussure, 1983). Structuralism emphasises that these signs derive meaning not in isolation but through their differences and relationships within a broader system of language or culture. Roland Barthes extended this theory into cultural analysis, arguing that myths and everyday objects carry multiple layers of meaning shaped by cultural conventions (Barthes, 1972). Additionally, Claude Lévi-Strauss applied structuralism within anthropology, exploring how underlying structures in myths and social systems organise human experiences and shape perceptions of the world (Lévi-Strauss, 1963). These structuralist theories laid the groundwork for understanding how representations in media and culture operate within shared systems of meaning, shaping societal norms and behaviours.

Foucault rejected structuralism’s emphasis on fixed structures of meaning, arguing instead that meaning is not stable or universal but is produced through discursive practices that are historically and socially contingent (Foucault, 1972). While structuralism focuses on the internal relations of signs within a system, Foucault emphasised the role of power and knowledge in shaping discourse and what can be thought or said within any given historical context. In *The Archaeology of Knowledge* (1972), Foucault critiqued structuralist approaches

for neglecting how discourse both constrains and enables knowledge production, asserting that power operates through discursive formations to regulate what is considered “truth” (Foucault, 1972). Foucault’s later work on power, particularly in *Sexuality and Power* (1978), further distances his approach from structuralism by illustrating how power is exercised through social institutions, not simply through linguistic structures, and how it actively shapes subjectivity and social norms.

3.6 Foucault’s Theory of Discourse and Power

In *The Archaeology of Knowledge* (1995), Foucault developed his concept of discourse, drawing attention to the systems of knowledge and meaning which operate in specific historical and social contexts to control the production of “truth”.

Foucault conceptualises sexuality as an expression of discourse: how we experience, understand and practice sex is the outcome of the discourse, institutions, and practices that regulate and govern human sexuality (Foucault, 1976). He contends that modern societies have developed complex systems of knowledge and power around sexuality, which he refers to as “biopower” (Foucault, 1988). These systems of power operate through various mechanisms, including medical discourse, legal regulations, and social norms, to shape and control individuals’ sexual experiences and identities.

Foucault’s concept of “biopower” offers a critical lens for understanding how CSE policies function as mechanisms of social regulation and how platforms such as TikTok can either subvert or reinforce this power dynamic. Biopower, as described by Foucault (1976) refers to the strategies and mechanisms through which states exert control over populations, particularly in areas such as health, reproduction, and sexuality. Educational policies such as CSE are prime examples of biopower in action, as they aim to regulate sexual behaviour, instil normative values, and govern bodies by disseminating knowledge about sexuality within structured institutional settings.

Within this framework, Foucault highlights the role of discourse in shaping cultural understandings of sexuality and constructing normative rules of sexual behaviour and identity. It is in this way that hegemonic discourses in the West (a confluence of bio-medical, psychological and patriarchal discourses) created categories such as “heterosexual” and “homosexual”, each with pre-prescribed norms and practices. It is this discourse that controls

both what is normal or deviant with regard to sex and sexuality and also grants access to the social and political rights of persons regarding their sexual identity.

Foucault thus challenges essentialist notions of sexuality as something fixed and innate, instead emphasising its historical and cultural contingency. He argues that sexuality is not a natural or inherent aspect of human identity but rather a social construct that is produced and regulated through discursive practices and power. “Power can be exercised not only by withholding or refusing but also by revealing, not only by doing but by saying nothing, saying something without saying at all” (Foucault, 1978:27) One might consider Foucault’s concept of sexuality as a practical, theoretical framework in which discourses constitute sexual identities and practices. It is here, then, that scholars can analyse the role of media representation within the construction and regulation of sexuality, providing valuable insight into how power operates through discourse within this arena of sexuality and its implications for lived experience.

In the context of globalised digital media, Foucault’s insights on sexuality are highly relevant for understanding how media representations shape cultural understandings of sexuality and shape individual sexual identities and practices. Often, media discourses tend to build up specific normative rules and regulations of sexuality by reinforcing binary categories and marginalising alternative voices. The usefulness of the Foucauldian approach lies in how it enables us to more informatively engage with media representation in such a way as to learn something more about how discourses of sexuality “work” within our new media ecologies and draw out consequences in terms of how people think about or come to know themselves and their sexual self. The value of this is that by developing such insights, we better understand how power is socially distributed and the impact that this might have on social justice: “Sexuality is an especially dense transfer point for relations of power” (Foucault, 1988:103). From this perspective, Foucault’s concept of sexuality provides a valuable theoretical framework for understanding how discourses shape sexual identities and practices. By examining the role of media representations in constructing and regulating sexuality, scholars can gain insights into how power operates through discourse within the realm of sexuality and its implications for individuals’ lived experiences.

Foucault’s analysis of discourse and power is particularly relevant in a post-apartheid South African context because it provides a framework for understanding how institutional power and cultural taboos intersect to shape societal norms, identities, and access to rights. In post-apartheid South Africa, the legacy of institutionalised racial segregation and oppression has

left a profound impact on the ways power operates, particularly through racial and patriarchal discourses. Foucault's concept of discourse highlights how power is exercised not only through direct control but also through the regulation of what can be spoken, thought, or known within a society (Foucault, 1972; Hook, 2001).

During apartheid, power over people by the government was overtly expressed through legal and systemic structures, such as education policies that marginalised black communities and silenced conversations about sexuality, gender equality, and reproductive rights (Morrell, 2003; Francis and DePalma, 2014). These silences became deeply embedded in cultural taboos, creating lasting barriers to open dialogue around topics such as sex education, gender, and sexuality. Foucault's theory enables us to interrogate how these historical discourses continue to influence contemporary norms (Francis, 2010).

3.7 Connell's Constructivist Model of the Gender Order

I use Connell's (1987, 1995) constructivist model of the gender order to approach the complexities of gender and sexual relationships in our southern locale. Connell's (1987) model of the gender order provides a critical lens for analysing how digital sex education on platforms such as TikTok reflects or challenges traditional gender roles within the South African context. This framework allows us to interrogate how digital sex education content perpetuates, disrupts, or renegotiates these traditional gendered hierarchies.

A central component of this framework is Connell's theorisation of hegemonic masculinity (2020), the culturally validated form of masculinity that legitimises male dominance and subordination of women and non-conforming men. This concept provides a lens for analysing how the influencers either reinforce or disrupt traditional masculine norms through their narratives, tone, and subject matter. By attending to the presence or rejection of hegemonic masculinity in their content, the study is able to trace how TikTok serves not only as a site of health communication but also as a space for negotiating masculinities in the South African context.

Connell's constructivist model of the gender order provides a foundational framework for analysing how societies create a hierarchy of gender. Central to Connell's theory is the concept of hegemonic masculinity, which refers to the culturally dominant form of masculinity that

legitimises male dominance over women and marginalised masculinities (Connell, 1987:183). Hegemonic masculinity operates alongside other gender positions, including subordinated, complicit, and marginalised masculinities, creating a dynamic and hierarchical structure of gender relations.

At the core of the model is the interaction of three primary structures:

1. **Labour:** This refers to the division of labour and resources along gendered lines, often privileging men in terms of economic power and with more ‘invisible’ labour such as child rearing, running a home, etc. falling to women.
2. **Power:** This structure addresses institutional and interpersonal power dynamics, including control in political, legal, and domestic spheres.
3. **Cathexis:** This concerns emotional and sexual relationships, including how desire and sexuality are organised within heteronormative frameworks (Connell, 1987).

In her later work, Connell (2009) applies the model to Southern spaces which have been shaped by histories of colonisation, such as South Africa. Colonial masters imposed their own cultural and social systems on subject peoples and tore asunder the traditional gender norms and hierarchies of the region (Connell, 2009). Thus, it considers gender a fundamental aspect of social inequality and explores power relations within and among societies to appreciate gender. Such an approach underlines the multiple masculinities and femininities in a given society and, of course, challenges the monolithic and hierarchical way of viewing gender. It is more applicable in post-colonial contexts where myriad cultural traditions and practices of diversities coexist and interrelate. The model helps us to understand how gender dynamics work within Southern spaces (Connell, 2009). This is done by drawing from Connell’s argument on the logic of power relations in the constitution of the gender order. The inequalities within and between social groups emanated from racial, class, and ethnic divides, which are powered by colonialism and its aftermath. Colonial power relations continue to shape the gender identity and relations within Southern spaces. Connell thus emphasises the social construction of gender relationships in terms of power relations and underlines the need for an intersectional analysis considering the crossing axes of power and privilege in Southern spaces such as South Africa.

These historical events and the influence of colonialism provide the base upon which contemporary norms are established regarding gender and sexual relations. The colonial

encounter brought with it the ideals of the West regarding gender and sexuality, juxtaposed to and often replacing those that existed prior to colonialism. This has had a profound influence on the contemporary gender landscape in South Africa.

It was during the colonial period that the Western notions of masculinity and femininity were privileged in patriarchy and hence hierarchised gender, race, and class (Stoler, 2002; Reid, 2001). The puritanical code of morality concerning sexuality was further instilled by stigmatising non-normative sexualities and practices. Institutionalised patriarchy alienated and disenfranchised women and gender minorities. Apartheid rule further cemented inequalities along racial lines, making women of colour victims of intersectional oppression resting on both race and gender (Gqola, 2010).

This can be seen in the manner in which specific articulations of masculinity and femininity, for instance, are articulated within South Africa, where Western forms of masculinity and femininity are idealised. At the same time, those who are indigenised are devalued. It constituted the hallmark of the New Imperialism (Stoler, 2002; Bundy, 2008). Resistance to colonial oppression resists patriarchal norms and is one of the cardinal features of South African history. Precisely, the construction of struggles against dominant discourses of gender and sexuality, as part of social justice movements such as those against apartheid, is evolving (Gqola, 2010).

Over the past twenty years, there has been an increasing demand to decolonise gender norms and sexual relations in South Africa, especially within activist, academic, and student-led movements. This has included demands to reframe sex education through intersectional, anti-colonial, and feminist lenses, often articulated by scholars and activists associated with the Fallist movement (Ratele, 2019; Bhana, 2016; Simmonds and Msibi, 2022). The concept of decolonisation creates an effect on the legacies brought about by colonialism that is purposed to make understandings of gender and sexuality representative and particularly intersectional. This, therefore, brought forth the need for a campaign against structural inequalities that trigger violence and discriminatory behaviour and encourage social and economic empowerment among marginalised communities. South Africa remains one of those countries where historical processes and colonial legacies have left indelible marks on present-day gender relations and sexualities. It is a historical backdrop within which complex gender relations in any country can best be given meaning and worked out for more just and peaceful societies.

Through distributing and receiving the content about sex education, one should observe how the role of power relations and social norms with cultural expectations has been provided through the constructive model of the gender order reviewed by Connell. These dynamics construct the nature through which messages of sex education come into creation, distribution, and reception in society. The nature of the contents and the deliveries of the sex education programs thus reflect the nature of power relations at the institutional, interpersonal, and individual levels. It is at the institutional level that schools, government agencies, and media organisations in large part determine which discourse on sexuality will be privileged over others. What eventually gets accessed and learned in sex education is further grasped by the interpersonal power dynamic imposed by teachers, parents, and other such authorities. As Olivares García (2022) says, positioning individuals within hierarchies of gender, race, class, and sexuality shapes the way young people receive and make sense of the content given through sex education, including issues related to sexual health.

Social norms and cultural expectations mainly mediate the dissemination and reception of information on sex education. Social norms regarding male/female gender roles, sexual behaviour, and relationships signal what approaches to sex education are in vogue, and also shape how young people are disposed to becoming involved with its contents. The cultural expectations of issues such as abstinence, contraception, and sexual pleasure may also inform the framing and delivery of the programs. It goes without saying that in these diverse social and cultural contexts, norms and expectations about issues of sexuality will be different. Thus, diversified understanding and reaction to sex messages are to be expected.

Therefore, from the critical viewpoint of the constructivist model, according to Connell, how power relations, social norms, and cultural expectations engage with one another would be pretty enlightening about complicated variables affecting the dissemination and reception of the content of sex education. This would help in devising an all-inclusive approach toward sex education in ways that could efficiently answer various needs and experiences within societies.

3.8 Conclusion

This theoretical framework chapter illuminates the complex dynamics influencing the dissemination and reception of sex education content, focusing on power relations, social norms, and cultural expectations. Drawing from Connell's constructivist model of the gender

order, the chapter emphasises the significance of these factors in shaping access to and interpretation of sex education messages (Connell, 1987; Smith, 2013; Jones, 2015). By recognising their impact, educators and policymakers can develop more inclusive and effective sex education programs tailored to diverse societal needs (Connell, 1987; Smith, 2013; Jones, 2015).

This theoretical framework underscores the need for critical engagement with gender, sexuality, and representation in the digital realm. By interrogating how power operates within digital spaces, researchers can uncover the underlying mechanisms that shape individuals' experiences and identities online. This understanding is essential for promoting more inclusive and equitable digital environments that affirm all users' diverse experiences and identities.

Chapter 4: Methodology

4.1 Introduction

In the previous chapter, we established how much research has been conducted, or rather how much it lacks, regarding digital sex education in South Africa. Meaning is communicated in TikTok videos via music, videos, visual images, and written language, which constitute multimodal videos. This chapter outlines the methodology adopted in this research to study the influences of the discourses on sex education by TikTok content creators operating within the South African context.

This study is guided by the following research questions, which were developed to operationalise the broader research aims and inform the process of data collection and analysis:

1. How do South African medical professionals on TikTok construct and communicate sexual health education in alignment with—or in tension with—the principles of Comprehensive Sexuality Education (CSE)?
2. What discursive, visual, and narrative strategies do these influencers use to engage audiences, and how do these strategies reflect or challenge dominant social norms about sex, gender, and health?
3. How do followers engage with sexual health content on TikTok, and what evidence is there of knowledge transfer, attitude shifts, or community formation around these influencers?
4. What are the limitations and ethical considerations involved in using TikTok as a platform for informal sex education, particularly in the South African context?

These questions shaped both the selection of content for analysis and the structure of the interviews conducted with creators. They also informed the thematic, narrative, and multimodal coding strategies used during data interpretation.

This chapter is organised into several sections. First, it discusses the qualitative methodology adopted in this study, focusing on its suitability for exploring meaning and understanding within digital contexts. The chapter then moves to describe the sampling strategies used to select both the creators and the TikTok content for analysis. Following this, the methods of

data collection are outlined, covering qualitative in-depth interviews with creators and visual analyses of TikTok videos using Multimodal Thematic Analysis (MTA). Finally, the chapter details the systematic processes employed for handling and analysing data to ensure a nuanced and rigorous investigation of the research questions.

4.2 Qualitative methodology

Social researchers engage in a systematic process of gathering and scrutinising data, with a focus on identifying underlying patterns observed in society (Babbie and Mouton, 2001:269). Such an exercise aims to gain knowledge about and explain aspects of social life. To this end, social researchers may resort to two approaches to producing reliable knowledge: quantitative and qualitative research (Strauss and Corbin, 1998:26). Mine is a qualitative study. A qualitative framework is based on the interpretive or phenomenological philosophical orientation that emphasises “that all human beings are engaged in the process of making sense of their (life) worlds. We continuously interpret, create and give meaning to, define, justify and rationalise our actions” (Babbie and Mouton, 2001:2). Qualitative researchers aim to create detailed descriptions and understand the social world by focusing on people in their lived social and historical context.

However, the validity and objectivity of qualitative research is sometimes subject to dispute, for it is nearly impossible for human beings to be objective (Babbie and Mouton, 2001:271). Qualitative researchers, therefore, see objectivity in the light of trustworthiness. The following criteria are deemed essential to evaluating trustworthiness: credibility, transferability, dependability and confirmability (Strauss, 1998:27). These criteria ensure that the research aligns with the epistemic imperative, maintaining integrity and reliability in the research process.

The strength of the qualitative approach to research, which, according to Hsieh (2005:7), is initially nothing more than an open-ended exploration of a topic or phenomenon, lies in its ability to explore and explain the complexities of social life, and to answer ‘how’ and ‘why’ questions. It tends to generate a more profound understanding and explication of social phenomena within specific social contexts, which usually results in better comprehension of social actors than quantitative research (Welch and Patton, 1992).

Qualitative research is able to capture the subtleties, nuances, and complexities of social experience which might be overlooked by statistical measures. Appreciation for reality is subjective, and people see the world differently according to how they feel, what they have experienced, and which culture they are brought up in. Qualitative research seeks to identify those personal perspectives and how they influence a person's acts and observation (Hsieh and Shannon, 2005). Qualitative research is deeply concerned with the context in which phenomena occur. It is essential to know how the distinctive conditions, environment and social relationships of the individuals involved in the study will define their activities and perceptions (Hart, 2017). It does not extract merely a single variable or even factor; it leads to the whole picture (Hart, 2017). It considers the play of factors and a more global, social, and cultural context within which the phenomenon is embedded.

4.3 Selection of creators

To identify suitable participants for this study, I conducted an extensive search on the TikTok platform using the hashtag “#SexEducationSouthAfrica”. This hashtag was chosen because it specifically targets sex education content within the South African context, ensuring the search results were relevant to the study's focus on local, culturally contextualised sex education. The hashtag serves as a key filter for discovering content directly related to sexual health, relationships, and education, thereby narrowing the pool of creators to those whose content aligns with the study's objectives. While there are numerous hashtags related to sex education, “#SexEducationSouthAfrica” was selected because it directly reflects the geographical and thematic focus of this research.

The inclusion criteria for selecting participants were based on the prominence and relevance of the TikTok accounts that emerged in the search results. I chose to include the top three creators that appeared based on the TikTok search algorithm. The ranking of these accounts was determined by factors such as their follower count, engagement rates (likes, comments, shares), and the relevance of their content to the study's focus on sex education. This method was used to identify influencers who enjoy significant visibility and influence within the TikTok community. The top three creators were chosen purposely for their established presence and influence on the platform. These creators have larger follower bases, higher engagement rates, and wield greater influence in the TikTok community.

It is important to note that this small sample is not meant to represent the larger population of sex-education TikTok influencers; rather, the three subjects were chosen for their relevance to the study's objectives. Given the diverse nature of content on TikTok, it was necessary to identify South African creators with a substantial presence in the sex education niche. This necessitated a thorough review of their content, ensuring it aligns with the objectives and focus of the study. The selection was based on relevance to the research objectives, particularly a focus on fact-based, medically accurate, and educational content aligned with the principles of CSE. The aim was to ensure that the selected creators were providing reliable and informative sex education, as opposed to more sensational or entertainment-focused content, which may not align with the educational goals of this study.

Additionally, factors such as audience engagement, follower demographics, and content format must be taken into account. Opting for a mix of creators with varying audience sizes, engagement levels, and content styles can offer a well-rounded perspective on how different TikTok creators curate their content. Furthermore, considering diversity in terms of gender, age, and cultural backgrounds among the selected creators will contribute to a comprehensive analysis of the impact of sex education content on different demographic groups.

4.4 Ethical considerations

The process began by inviting participants to engage in the study through a direct approach via email and social media messages, explaining the nature of the research and how their involvement would contribute to the study's objectives. Informed consent was obtained by providing detailed information about the interview process, including its voluntary nature, confidentiality measures, and participants' right to withdraw at any time. Consent forms were signed electronically before scheduling the Zoom interviews (Ethics Approval Letter, Appendix A). Each participant was provided with an informed consent form, ensuring they understood the purpose of the study, their rights, and the confidentiality measures in place. The interviews were audio-recorded with explicit consent from the participants and later transcribed for analysis.

4.4.1 Confidentiality and identity protection

The subjects of this research are well-known personalities in the TikTok sex education space. For this reason, although their personal names are well known through their TikTok handles,

utmost care has to be exercised when handling other sensitive personal information. For example, this includes personal contact information such as physical or email addresses (Richardson, 2015). The protection of such confidential information is a foundational ethical research practice. In this regard, all the respondents' personal information, other than their TikTok names, was kept confidential. In this way, I have attempted to maintain the respondents' privacy as it would have been at the beginning of the research study (Richardson 2015). By seriously following such confidentiality protocols, I hope to demonstrate commitment to ethical research principles that may guide research and underscore the value placed on the confidence and cooperation the participants show, strengthening the integrity of the overall research.

4.5 Engagement with creators

4.5.1 Analysing the TikTok videos

Beginning with the selection process, I utilised TikTok's metrics shown on every creator's video on their accounts to see which videos were the most viewed. I made a list for each of the ten most viewed videos of each creator. I found that the creators had some of their best-performing videos already 'pinned' to their page, meaning they were prominently displayed for viewers. This feature helped me to focus on the content that had clearly resonated with their audiences. Exploring the most viewed videos enabled me to identify recurring themes, content strategies, and messaging techniques that have resonated with viewers. This provided valuable insights into what is most effective in terms of sex education content on TikTok. The reason I have chosen ten videos specifically is that it is a manageable number for analysis, ensuring that the study remains feasible within the available time frame. This approach is practical and efficient while still providing valuable insights.

4.5.2 Online Interviews

Choosing a neutral and accessible interview location for all participants is crucial for conducting successful interviews (Becker et al., 2012). For this study, however, I was expected to conduct internet interviews. This decision was influenced by the convenience and practicality of conducting remote interviews in the context of the global digital landscape and participants' varying geographic locations. I am located in the United Kingdom while the

participants were located across South Africa. Online interviews help mitigate the challenges associated with traditional in-person focus groups, such as the need for physical proximity and the logistics of travel.

Zoom is an interactive video conferencing software where people can hold virtual meetings, webinars, or other events online (Gray et al., 2020). Also, it is available on a range of devices, including computers, phones, and tablet computers (Oliffe et al., 2021). The advantage of using Zoom is its accessibility: users need only a computer or smartphone with an internet connection and an installed Zoom application. It is fairly easy for a broad category of people to use, including those with impaired mobility. The Zoom app provides features including screen sharing and a chat function. Importantly for my purposes, it can also create video and sound recordings of the interviews (Gray et al., 2020; Oliffe et al., 2021). Also, subsequent transcription of the interview recording enables analysis based on the conversation, as the video and sound recordings ensure nothing is missed. Screen sharing is a function which is handy for sharing the visual aids, documents, or any materials that have to be used for conducting the interview. Using Zoom allows single and group interviews. That flexibility allows the researcher to change the format of an interview depending on their requirements for the study design and objectives. Lastly, Zoom can help to ensure the research protocols of privacy and confidentiality. For example, with password protection and waiting rooms, as in the case where only invited participants are allowed into an interview session, a method is assured of creating a safe environment to discuss sensitive or personal matters (Oliffe et al., 2021).

This observation is particularly relevant when conducting online interviews, where technical issues can impact the flow of conversation and the overall interview experience. To mitigate such challenges, I adopted a multi-faceted approach. This included preparing participants in advance by offering clear instructions on using Zoom, providing troubleshooting advice, and ensuring that backup communication methods (e.g. email or WhatsApp) were available in case of technical difficulties. In this way, I aimed to create a seamless and supportive environment for participants, addressing potential issues proactively and ensuring the interviews proceeded smoothly.

Conducting the interviews through Zoom not only addressed practical concerns but also ensured that the research was conducted within ethical guidelines, allowing participants to feel comfortable and respected throughout the process. The interviews were scheduled individually with each participant, ensuring they had ample time to prepare and that the session would be

at their convenience. The first round of interviews was conducted in October 2023, with each interview lasting approximately 30 to 45 minutes. I used a semi-structured format to allow participants the freedom to express their views in detail, while also guiding the conversation to ensure all key topics related to sex education on TikTok were covered. During these interviews, I focused on understanding the creators' motivations for producing sex education content, their audience engagement strategies, and how they perceive the impact of their work on viewers. This first round of interviews helped establish rapport with the participants and provided the foundational data needed to explore the effectiveness of TikTok as a platform for sex education.

Despite the advantages, there are significant challenges in doing online interviews, including the digital divide, time constraints, and issues related to the cost of airtime or data, and internet connectivity (Becker et al., 2012). As Nehls et al.(2015:21) points out, "there is always a possibility that 'things' will go wrong with technology, which may decrease the non-verbal cues that are present in face-to-face communication and reduce personal connections".

4.5.3 Data handling and storage

After I conducted the interviews, I labelled and stored the Zoom recordings in separate folders on my Google drive. Each folder also contained the interview transcriptions. Additionally, links to the relevant videos and the verbatim transcripts of the selected TikTok content were recorded and stored in a separate spreadsheet. Together, the interview recordings and transcripts form the basis for the following stages of the research process: data scrutiny, coding, and identification (Fowler et al., 2022). This systematic organisation renders the information accessible and in sequence for further close analysis (Lewis and Ross, 1995). The process of curating the content involved filtering the most viewed TikTok videos from each creator in order to identify what resonated most with their audience. This approach allowed for a focused analysis of the content that had the greatest impact and relevance. By concentrating on the most popular videos, I aimed to understand the specific trends, messaging techniques, and themes that contributed to their success on the platform. This holistic analysis helped determine the creators' impact and the elements of their content that consistently engaged their audience (Fowler, 2022).

4.5.4 Secure storage and access control

Any research data that involves personal information, such as the identities of participants, must be stored securely to protect privacy. Digital data should be kept on a computer or server

with restricted access, which can be secured using a password. This is the primary method for preventing unauthorised access (Ruj, 2014). There was limited access to the data so that only people who were involved in the research could view it (Yang, 2013). This ensured data could not be changed or manipulated. Another layer of protection was that the files were kept encrypted and with an invite only access that only my supervisors and I could access.

Once I have completed my research, I will be responsible for securely disposing of all sensitive information that could compromise the confidentiality or privacy of my participants (Liu et al., 2023). To ensure this, I will use secure tools or data overwriting methods to prevent data from being recovered, thus protecting against accidental or unauthorised access (Liu et al., 2023). Throughout the research process, I will maintain strict confidentiality and adhere to ethical guidelines to protect participants' privacy (Liu et al., 2023).

For long-term data storage, I will select a secure and reliable repository where the data can be organised and accessed easily (Bhat, 2018). This will allow other scholars to access the data in the future if needed (Baker et al., 2006). I chose Google Drive for its security features and familiarity. All data will be stored in a password-protected Google Drive folder, ensuring that it remains accessible only to me and my supervisors. I will adhere to relevant data protection laws, ensuring that the data is stored securely for a period of five years (Baker et al., 2006).

4.6 Methods of analysis

4.6.1 Cyberethnography

One methodology employed for this research is cyberethnography, which is specifically designed to study the complexities of online environments. Hart (2017:86) describes cyberethnography as a method that “embraces the digital landscape as a site of cultural production”, enabling researchers to examine how virtual spaces intersect with real-world social dynamics. This approach aligns with the qualitative principles outlined above, as it prioritises understanding participants' behaviours, interactions, and cultural practices within the digital sphere.

To effectively engage with the TikTok space, I immersed myself in this environment for nearly two years, starting in January 2023. Immersion, a cornerstone of ethnographic research, allowed me to develop a nuanced understanding of how sex education is presented, consumed,

and discussed on the platform. Prolonged engagement within a field enables researchers to “uncover patterns and cultural norms that may not be immediately visible” (Hsieh, 2005). This long-term approach was essential for capturing the evolving nature of interactions and content trends on TikTok.

A significant feature of cyberethnography is its ability to examine both content creation and audience engagement. This method considers not only the creators’ intentions and strategies but also the responses of their audiences, revealing how information is received and interpreted. The interplay between these factors is central to understanding the role of TikTok in sex education. Moreover, the insights generated by the prolonged immersion in the content supported the analysis of multimodal data, including video content, text captions, and audience interactions such as likes, comments, and shares.

The decision to adopt cyberethnography was informed by its alignment with the study’s objectives. Traditional research methods often rely on didactic, expert-driven pedagogy, which, as Ngabaza and Shefer (2019) argue, “risks reinforcing hierarchical structures that fail to engage with the lived realities of learners”. In contrast, TikTok presents an alternative model of knowledge dissemination—one that is participatory, peer-led, and often informal. By situating this research within a cyberethnographic framework, it was possible to explore how these digital interactions challenge and expand upon traditional pedagogical models.

Through this method, I sought to uncover not just the explicit content shared on TikTok but also the implicit cultural and social dynamics at play. TikTok offers a unique lens through which to examine how sex education intersects with youth culture, global trends, and local contexts.

4.6.2 Multimodal analysis

The qualitative methodology adopted for this study is characterised by an inductive approach (Papageorgiou, 2017). This approach involves the development of theories based on observations of empirical data. Techniques used in qualitative studies include content analysis, thematic coding, and interpretive methods (Papageorgiou, 2017). A method particularly suited for this research is multimodal thematic analysis (MTA). MTA is a methodological framework designed to analyse datasets that integrate multiple modes of communication, such as visual, textual, and auditory elements (Sankey, 2013). It is particularly effective for examining how

these diverse modes interact to construct meaning within a single medium. MTA is especially suited to the analysis of TikTok videos because the platform blends images, text, and synthesised sound into highly engaging, multimodal content.

Employing MTA, the investigation aims to elucidate how influencers shape sex education for their followers (Sankey, 2013:853). The thematic analysis brings into focus the regular patterns and subjective aspects of the data set (Sankey, 2013:854).

MTA will be applied to two key aspects of this study:

1. **Video Content Analysis:** To identify and interpret the ways influencers use visual, textual, and auditory elements to convey sex education messages.
2. **Interview Data Analysis:** To explore the motivations, strategies, and perceived impacts of these influencers, providing a complementary perspective to the video analysis.

Three qualitative procedures are used in this process: content analysis, thematic coding, and interpretative approaches (Sankey, 2013). This study specifically adopts Sankey's (2010) articulation of MTA, as it aligns closely with the objectives of examining TikTok content. Sankey's emphasis on integrating multiple modes of communication into a cohesive analytical framework is particularly relevant for understanding the unique affordances of TikTok as a platform for sex education.

Thematic coding and content analysis are complementary procedures used within MTA. Content analysis involves systematically identifying and quantifying specific elements within the videos, such as recurring visual motifs, language use, or sound effects. This step is foundational, providing a structured way to map out the dataset and identify key areas for deeper exploration. Thematic coding builds upon this foundation by focusing on the interpretation of these elements, uncovering patterns and meanings that emerge from the data. In this study, content analysis serves as the initial phase, laying the groundwork for the more interpretative process of thematic coding (Papageorgiou, 2017).

Both sets of data from the interviews and videos will be subjected to Multimodal Thematic Analysis. This process encompasses six distinct steps (Sankey, 2013):

1. **Data Familiarisation:** This step entails carefully sifting through the data, including both the interviews and videos, and becoming familiar with it. I read through transcripts, watched videos and became intimately acquainted with the content. The goal was to gain a comprehensive understanding of the material. Familiarisation is a foundational step in MTA because it enabled me to identify initial patterns, themes, and nuances that informed subsequent stages of analysis within my research.
2. **First Generation of Codes:** These codes represent preliminary interpretations of the content. This served as a starting point for identifying patterns and themes.
3. **Thematic Exploration:** I began systematically sorting through the data set, looking for recurrent patterns, ideas, or subjects. This was geared towards discovering similarities, differences, and anomalies within the dataset.
4. **Analysis and Themes Development:** At this stage, I critically examined the identified themes. I assessed the coherence and relevance of each theme and considered whether any adjustments or refinements were necessary. This step ensures that the themes accurately capture the essence of the data.
5. **Thematising and Labelling:** Once the themes had been refined, I defined each clearly. These definitions articulate the meaning and significance of each theme within the context of the research. Additionally, I assigned descriptive names to the themes to facilitate communication and analysis.
6. **Thematic Analysis in the Final Report:** In the final phase, I incorporated the identified themes into the overall analysis and reporting of findings. This involved synthesising the themes to construct a coherent narrative that addressed the research objectives. The themes provided a framework for interpreting and discussing the data.

Sankey (2010) highlights these steps as integral components of MTA, emphasising the structured and systematic nature of the process. By following these steps, I was able to develop nuanced insights from the interviews and video data. Interview data will provide direct insights from creators, capturing their perspectives and motivations (Papageorgiou, 2017).

4.6.3 Thematic and narrative analyses

Thematic and narrative analyses were employed in this study to provide a comprehensive understanding of how TikTok influencers shape and disseminate digital sex education content. These qualitative methodologies allowed for an in-depth exploration of the patterns, themes, and narratives embedded in the data, offering insights into the ways media representation operates within the South African context.

Thematic coding refers to a systematic way in which meaningful patterns may be discovered within the data (Gibbs, 2007). It is a procedure in which researchers ensure that they submit their data to a systematic review and analysis in which themes, patterns, and categories start emerging within the content (Vaughn and Turner, 2015). Thematic coding draws upon concepts, ideas, or topics recurring within a dataset. The themes reflect meaningful patterns relevant to the research questions or objectives (Gibbs, 2007). This process involves reading or reviewing the material to understand its content and context. The data is then broken down into manageable segments or units, such as sentences, paragraphs, or other meaningful divisions, depending on how the data is set out (Vaughn and Turner, 2015). In the case of TikTok videos, thematic coding incorporates not only textual elements but also sounds and visuals, recognising their integral role in meaning-making.

Narrative analysis is a qualitative research approach that centres on individuals' stories or narratives that relate their experiences, perspectives, and interpretations of events or phenomena (Oliver, 1998). Narrative analysis seeks to understand how people construct their narratives in order to make sense of their lives and their world (McAlpine, 2016). It is valuable as a way of exploring subjective experiences and understanding how individuals interpret and communicate their lived realities (Oliver, 1998). It offers a window into the richness and complexity of human experiences, allowing researchers to gain a more profound understanding of the events that shape people's lives. As such, it enables the researcher to understand how people make meaning for themselves, including how they describe their experiences and voice their opinions for themselves and others.

I assigned specific codes to sections of the data, with each code representing a particular concept, idea, or pattern observed within the dataset. These codes serve as short, descriptive labels that capture the core dimensions of the content. Thematic coding typically involves an inductive approach, meaning that the codes emerge organically from the data rather than being

imposed based on preconceived categories (Gibbs, 2007). This approach is particularly suited to exploratory research, allowing the researcher to remain responsive to the unique patterns and themes that surface during analysis.

The assigned codes were developed through repeated immersion in the data, guided by the research questions and objectives. For example, recurring elements such as “consent”, “healthy relationships”, “visual emphasis”, or “engaging soundtracks” were identified based on their prominence across the TikTok videos. This process was informed by Vaughn and Turner’s (2015) emphasis on developing codes that are both descriptive and interpretive, capturing the richness of the dataset while maintaining analytical focus.

I used narrative analysis to examine the structure, content, and context of the narratives of the three TikTokers I interviewed. I considered these narratives within the broader cultural, social, and historical contexts shaping sex education in South Africa (Oliver, 1998). While the cultural, social, and historical context shapes the form of sex education in South Africa, the analysis sought to understand the meanings, patterns, and themes which arise from the stories sex educators tell about sex education against this backdrop.

The process of narrative analysis includes several key steps (McAlpine, 2016):

1. **Data Familiarisation:** Engaging deeply with the dataset, which involved repeated reading of interview transcripts and reflecting on their content and tone.
2. **Identifying Narrative Structures:** Analysing how participants organised their stories, including the sequencing of events and the use of language, imagery, or metaphors.
3. **Thematic Analysis of Content:** Identifying recurring themes, patterns, or ideas within the narratives. For example, common themes such as resistance to cultural taboos or the importance of accessible information were noted.
4. **Contextual Analysis:** Interpreting the narratives within their broader sociocultural and historical contexts, considering how South Africa’s unique educational, political, and social dynamics influence sex education narratives.
5. **Interpretation:** Synthesising the findings to reveal how these stories reflect individual and collective experiences, as well as how they align with or challenge dominant discourses around sex education.

This approach allowed me to explore not only the explicit messages conveyed by the influencers but also the deeper meanings embedded in their narratives, providing a nuanced understanding of their role in shaping digital sex education in South Africa.

4.6.4 Content analysis

Content analysis is a research method used to examine and interpret various forms of communication, including written text, visual images, or audio recordings (Stemler, 2000). It involves a structured process of evaluating the content to uncover essential concepts, recurring themes, and discernible patterns within the material. I used content analysis by closely examining and analysing the data, looking for specific features or characteristics that may inform the study. This involved examining the frequency of certain words or phrases and identifying prevalent verbal themes (Harwood and Garry, 2003). Researchers using content analysis break down the content to understand implicit messages, concepts, or images within the material (Stemler, 2000).

Using content analysis, I closely examined the TikTok videos produced by the selected influencers, analysing specific features and characteristics that inform this study. For instance, I evaluated the frequency of keywords or phrases, recurring verbal themes, and the use of particular visual or auditory elements (Harwood and Garry, 2003). This included identifying patterns such as the consistent use of specific hashtags (#SexEducationSouthAfrica) and examining how influencers utilised captions, visuals, and soundtracks to convey their messages.

The steps involved in content analysis are as follows:

1. **Data Preparation:** Organising the dataset by collecting and cataloguing TikTok videos for systematic analysis.
2. **Category Development:** Defining the categories or variables to be analysed, such as verbal themes (e.g. “consent”), visual motifs (e.g. educational infographics), or auditory features (e.g. engaging background music).
3. **Coding:** Assigning codes to segments of data based on these categories. Codes are short, descriptive labels that capture the essence of the content.

4. **Pattern Recognition:** Identifying trends or recurring elements across the dataset, such as the frequent use of humour to engage viewers or the inclusion of culturally relevant examples.
5. **Interpretation:** Synthesising the findings to understand how the data reflect broader trends, attitudes, or cultural representations (Harwood and Garry, 2003).

Content analysis provided a structured way to extract meaningful information from the TikTok videos, enabling a deeper understanding of the multimodal strategies employed by influencers to communicate sex education. Together with narrative analysis, it contributed to a comprehensive view of how sex education is framed and disseminated in the digital space.

4.7 Conclusion

This research methodology captures a rigorous and holistic manner of exploring the subject at hand: representation of sex education content on TikTok. Combining multiple qualitative methods, including textual analysis and online interviews, this methodology will investigate the nuances of the digital sexual health education landscape. The textual analysis section of the is grounded on the base it offers to give a deep review of the complex interaction between different modes of communication found in the TikTok content for sex education. Unlike regular textual modes that merely trace the written or spoken forms of communication, multimodal thematic analysis emphasises kinds of modalities using visualisation, text, or audio.

I watched each video on TikTok with a critical eye as I learned the type of visual imagery the creators of their textual captions were creating, and the message in the videos. With these mediums of communication side by side, the analysis sought to decipher their respective themes, messages, and presentation styles tied up in the content. This would then make me consider this as an integrated approach in the sense that the message of the creators regarding sexuality and sexual health was appropriately communicated through various channels of communication. This analysis then went beyond mere observation of the situation to fish out hidden narratives or discourses within the perception of the audience on sexuality. It sets a precedent in analysing the cultural, social, and historical context most likely hidden in content. Accordingly, I began exposing some latent assumptions, biases, and power dynamics and how those assumptions, biases, and power dynamics influence texts.

When explained and questioned, such a process unmask the most important themes and patterns beneficial for developing insight into the strategies of content creators and their broader cultural context. Themes varied from such representations of consent and pleasure to topics about reproductive health and the rights of LGBTQ+. It enables the study to reveal how creators have been involved and actively participate in discussions about sexual health on TikTok as the themes are developed systematically and explored.

Rather than providing stability for digging into the intricacies inherently embedded in TikTok sex education content culled from the MTA, it narrowed it down to the interplay of different modes of communication and profound interrogation of the discourses to provide rich insights about how digital media platforms shape understanding of sexuality and sexual health.

In its design, although it features online interviews with each creator, the study can thus afford a multi-faced view of the landscape concerning the contents of sex education on TikTok. Realisations in interviews with those creators give unique opportunities to talk directly to the creators, and a chance to look beyond the surface of the video and try to make sense of the motivation, perspectives, and approaches underlying the content creation process. This could help contextualise textual analysis results and insight into creators' intentions and the bigger context where their content resides. A direct-to-source interview with the creators has provided more insight into what motivations lie beneath a respective engagement with sex education on TikTok. Reviewing the creators' experiences, professional backgrounds, and aspirations for the content leads to a nuanced perception of how such persons might uniquely approach sexual health education.

The interviews amount to more than just interviews by allowing creators to talk about deeper ethical concerns and responsibilities when being content creators on this digital media platform. Discussions of privacy, consent, and relating to audiences make them as informative as learning about the dedication that producers devote to their ethics in the content creation. In so doing, this research contributes to the capacity of a person to understand the ethical dimensions of TikTok sex education content and the challenges of its creators toward such issues. Online interviews brought dynamics to the communication process between the researchers and the creators, trying to grasp the complexity of problems in education related to sexual health. Through online interviews, textual analysis has been supplemented with a richer understanding of the motivations, perspectives, and considerations existing among the producers. Direct engagements with the producers allow researchers to establish a flow of substantive

information about the subtleties of making sex education content for TikTok and its more general social implications within the understanding of sexuality and sexual health.

Ethics were fully established during the research, where proper care was observed concerning the privacy and consent of the producers and their audience. Respect for ethical integrity enabled the study to respect principles that guide its engagement with sensitive subject matter by strictly adhering to the ethical guidelines and carrying measures to protect the rights and well-being of all parties involved. Thus, the chapter is methodologically sound and performed ethically rigorous research into content on TikTok regarding sexual education. The paper synthesises textual analysis and online interviews that make valuable contributions to how new digital media platforms define the understanding of sexuality and construct sexual identities.

Chapter 5: Analysis of Influencers

5.1 Introduction

This chapter focuses on the profiles, motivations, and ethical considerations of two prominent TikTok creators, @dr.gynae and @kmhealingagain, who play significant roles in shaping digital sex education within the South African context. Chapter 6 will build on this discussion by analysing their TikTok content and audience engagement in greater detail.

The emergence of TikTok as an influential platform for discussing sexual health and well-being is remarkable. The app's visually stimulating nature allows the creators to innovate in the critical knowledge that needs to be delivered. This study examines the complex landscape of sexual education on TikTok, focusing on the dynamics of content creation and audience engagement. In this chapter, I first present the findings from my interviews with @dr.gynae and @kmhealingagain. These interviews provide valuable insights into their motivations, aspirations, and ethical considerations when producing content. This qualitative data offers a deeper understanding of their strategies and the principles guiding their work as influencers.

Following this, the chapter delves into a multilayered content analysis of selected TikTok videos by these creators. This analysis highlights the messaging strategies and visual elements used to communicate sexual health information effectively to their audiences. By combining these perspectives, this chapter uncovers the multifaceted ways in which these influencers shape and disseminate knowledge, contributing to a broader discourse on digital sex education.

5.2 Overview of the chapter's structure and objectives

This discussion begins with an overview of the creators' professional expertise, TikTok presence, and the motivations driving their content creation. Their profiles highlight the diverse strategies they employ to address misinformation, enhance accessibility to reliable information, and empower audiences with knowledge.

Next, the chapter examines the influencers' audience demographics and their reach, contextualising their impact within the broader landscape of digital sex education. Metrics such

as follower numbers, engagement rates, and audience interactions provide insight into their resonance with diverse communities.

Finally, the chapter addresses the ethical challenges that @dr.gynae and @kmhealingagain navigate as sex education influencers. This includes discussions on privacy, misinformation, and the ethical considerations tied to producing accessible yet accurate content for a broad audience.

5.3 Profiles of selected influencers

5.3.1 @dr.gynae

5.3.1.1 Professional background and expertise

Dr Mpume Zenda, known as @dr.gynae on TikTok, is a board-certified gynaecologist and obstetrician based in Sandton, South Africa. With over ten years of clinical experience, Dr Zenda provides specialised care for women at all stages of pregnancy and reproductive health. According to her professional profile, she holds a medical degree from the University of KwaZulu-Natal and completed her specialisation in obstetrics and gynaecology at the University of the Witwatersrand.

This information is derived from publicly available details on her TikTok profile and accompanying professional pages on LinkedIn, which highlight her credentials and experience. Her TikTok content leverages this medical expertise, offering accurate and reliable information on sexual and reproductive health. By presenting herself as both a trusted healthcare professional and an approachable educator, Dr Zenda aims to dispel myths and reduce stigma around these topics while ensuring her audience feels empowered and informed.

Her book, *Mommy My Body Is Changing*, published in 2023, attempts to make discussing puberty more approachable by dispelling the myths and misinformation about this stage of life.

5.3.1.2 TikTok presence and content

Dr Zenda (@dr.gynae) uses her clinical know-how to engage in discussions with thousands of women on TikTok about their health concerns. The topics range from explaining the menstrual cycle, options, and common misconceptions about vaginal health to entertaining short,

interactive videos and QandA sessions. Warm and not too technical, she makes otherwise complex medical knowledge accessible and is extremely popular and trusted. For instance, she might start talking about the myths related to birth control methods and then continue to mention some benefits and the side effects associated with them. In doing so, she gives an example of how this may benefit the viewers as they consider their choices concerning their reproductive health. The end is accomplished by empowering her audience through liberation from myths and access to understandable science-based information.

5.3.1.3 Impact and reach

With more than 125,000 followers on TikTok, Dr Zenda affects public health education significantly. Her best performing video has 2.1 million views with over 800 comments and 102 thousand likes, showing immense engagement by her audience. Her followers thank her for her straightforward and precise explanations of topics ignored by traditional sex education.

5.3.2 @kmhealingagain

5.3.2.1 Professional background and expertise

@kmhealingagain is the TikTok alias of Khumo Masege. She is a licensed mental health counsellor, LMHC and certified psychotherapist. According to her LinkedIn page, Khumo holds a Master's in Education in Counseling Psychology from Columbia University. She is experienced in individual and couple therapy, related to sexual dysfunction, trauma recovery, sexual identity, and relationship counselling, as well as long experience with the LGBTQ+ community. She uses holistic as well as physical and psychological approaches to sexual health in her therapy practice.

5.3.2.2 TikTok presence and content

In her TikTok account, @Kmhealingagain, Masege combines her clinical skill with a warm style. Most of her content is about sexual health, mental health, and relationships. She presents easy-to-digest portions of otherwise tricky information, including consent, sexual communication, and how mental health issues impact sexual well-being. Most of her videos present practical advice and ways to deal with specific situations. For example, she has developed several videos about how to deal with sexual anxiety and how trauma impacts sexual health. She posts informative and supportive material, safely opening up space for people to learn and talk about sensitive issues. What stands out in her life on TikTok is the effort Masege

made for inclusivity. She addresses the particular issues of LGBTQ+ by ensuring that she relates through content relevant to a range of audiences. The sexual orientation and gender identity issues are well reflected in her videos, making her priceless for any confirmation and support-based source.

5.3.2.3 Impact and Reach

Masege's popularity on TikTok was noticed when she had over 2 thousand followers, and hundreds of thousands of views on her videos. Many users comment that her advice helped them get through the process in some way. With such engagement at such a high level on her posts, this means her content is popular and effective. Besides her online presence on TikTok, Masege is professionally active. She also leads workshops and webinars on sexual health and therapy for the public and professionals.

5.3.3 Motivation and goals behind their sex education content

Central to the creation of these TikToks are the motivations and objectives underpinning the sex education content created by TikTok influencers Khumo Masege (@kmhealingagain) and Dr Mpume Zenda (@dr.gynae). Their work represents a convergence of personal experiences, professional expertise, and a deliberate effort to address significant gaps in CSE.

5.3.3.1 Addressing misinformation and stigma

Some of the fundamental reasons for making the sex education content on TikTok is to combat the negative information that sexual education is associated with stamping out the stigma surrounding sexual health. In many societies, sexual health has been grossly misunderstood, and this is so in South Africa, resulting in mass misinformation myths created around sexual life. Sex and sexuality have traditionally been regarded as taboo subjects for discussion and learning in South Africa since they are regarded as social and cultural forbidden subjects that are not allowed to be discussed or learned. Taking into consideration the impact of TikTok, the specialists believe that it will create a judgment-free safe space to exchange factual knowledge. Masege closed her interview by saying these walls of misinformation “should break down for the health and wellness of our community to be well”.

5.3.3.2 Enhancing accessibility to reliable information

What really calls both Masege and Zenda to post on TikTok is the need for reliable sexual health information to be available to a wide audience, as traditional sex education often misses out on reaching entire demographics, and most importantly the marginalised communities. A multifaceted, globally diverse user base such as TikTok can reach far beyond the boundaries of educational settings. This can be supported by the argument advanced by Shah et al. (2022). that accessible, media-based interventions in health education are essential. Masege makes a point, saying “TikTok allows me to reach people who might not have access to traditional forms of education, especially in remote or underserved areas”.

5.3.3.3 Empowering individuals through knowledge

Such empowerment is the heart of content on the influencers’ posts, underscored by Dr Zenda as she explains, “Knowledge is power. When people are informed, they can make better decisions about their health.” Masege and Dr Zenda hope to finally empower people to make the right choices in matters of sexual health with full information that is accurate. That falls in the edutainment approach, as viewed by Aksakal (2015): the content is educative but also informative and interesting and empowering, and therefore leads to an enhanced perception of agency by the viewers. Empowered people are more likely to engage in safe sex, seek medical guidance whenever necessary, and address the social policies related to stigma and misinformation.

5.3.3.4 Fostering open dialogue and community support

Another goal shared by Masege and Zenda is to create an atmosphere in which men and women are free to narrate sexual health experiences in forums, asking, sharing experiences, and learning from one another. This approach normalises discussions about sex and detaches the human being from loneliness, making society wholesome. For Hall (1997:267), “representing diversity and difference within media is critical to shifting public discourse and attitude”.

The videos by Masege and Zenda create trust in their followers, and invite them to pick up their content and join in: this develops a feeling of belonging within this community and of mutual support. Sexually health-dominated societies where such an area seldom appears on the agenda become havens on such platforms because people feel free to share their stories and advice without judgment.

Masege normally starts with a direct communication to the audience, saying “Today is going to be something important”, thus keeping the space open to converse rather than talking over followers. In this way, it becomes much more relevant as well as empowering her audience to take an active part. In the same way, through interactive features such as QandA, she makes sure that their voices are heard and that their concerns are addressed.

TikTok’s interactive nature allows for real-time feedback and continuous dialogue. Comment sections, questions about videos, and immediate answers makes the educational experience much more significant and varied. The dynamic immediacy and accessibility, and their evolution over time, is crucial for people with urgent requirements (Jenkinset al., 2024). When immediacy and accessibility come together, for example when social media and health education come together in interactive and responsive scenarios, things get very dynamic, and so learning is efficient.

The videos are able to bring personal experiences to light and demystify sexual health problems, and therefore break barriers. Commenters share their experiences and build a tapestry which others can learn from. The accumulated knowledge and experience feed into building a support community in which members can find solace knowing they are not alone. This plays an important role in reducing stigma around sexual health. For example, if another person opens up in a similar vein, this immediately starts to normalise the discussions and remove some of the shame or embarrassment of having these discussions. A more communal approach is especially helpful in handling topics which were traditionally held to be taboo. For instance, people who would love to have e.g. menstruation, contraceptives, and sexually transmitted infections explained, can be taken into consideration more easily and be assured of not being intimidated in this supportive community.

Engagement in TikTok can even stretch to where viewers apply the knowledge and confidence that they acquired through interaction in daily applications. Such an outcome can result in greater openness for discussing issues from families, peer groups, and other social circles toward the setup of a more knowledgeable and healthy society.

This opens the door to social, open discussion on sexual health. Engaging and encouraging groups to bring people together to provide them with valued information, shared feelings of belongingness and mutual support so are well-positioned to play a massive role in normalising conversations on sex and sexuality, de-stigmatising sexual issues, and empowering group

members. This would, therefore, mean that, as Hall (1997) puts it, hearing other voices and experiences is necessary to fashion public discourse and attitude.

5.3.3.5 Addressing specific public health issues

Using the content, the two influencer personalities reflect on some of the issues pertaining to public health with a broad depth towards countering the rate of HIV/AIDS in South Africa. The area is the epicentre of a critical public health challenge, due mainly to the rate of HIV/AIDS, and there is a need for focused and sustainable education campaigns. We must address the most relevant challenges in our communities' health with pertinent and actionable information. There will come a time where, as presented through the mouths of Masege and Dr Zenda, the public may be far better equipped and informed about how to have safe sex and prevent STIs, and are enlightened regarding all-round reproductive health education. These are integral aspects that help people to make proper decisions regarding their sexual well-being and prevent spreading STIs.

Their work will hopefully be able to support the wider health and social goals through the more enlightened, healthier citizenry they will assist in producing. They demystify subjects often branded as taboo for discussion through their very engaging videos, drawing sexual health into open discussions. It then becomes much easier for one person to raise a specific subject or get some advice. The efforts of Masege and Dr Zenda will be crucial in this continuum of changing the face of sex education, especially where other traditional approaches have failed. Their content is culturally responsive, and they know what goes wrong in their communities caused by inadequate or incorrect understanding. This points them in the direction to go in addressing the issues. Dr Zenda uses the reference of languages and cultures from the audience's background so they can find the information in the videos a little more acceptable and understandable. This approach with regard to locality and culture is key for the message to result in change among the people.

Masege and Zenda entertain questions and discussions and this helps them to reach their audience: the content is 'conversational' instead of 'transmissive'. Such communication is called for in the solving of personal issues and accords them the right kind of information needed for particular concerns. Masege says, "The power of communication online means that I can directly connect with my audiences to clarify very specific questions and dispel certain

myths that may be rife in their communities.” This inspires confidence in the audience, and they are therefore likely to seek such online portals for sexual health information.

The producers go further than just spewing information, and give the masses the means of action in controlling sexual health. For instance, their videos provide advice on which conditions will necessitate the help of health services, how to work a healthcare system, or even advocate for health needs. This is one area of empowerment that prepares a person in how to take care of health and well-being. According to Dr Zenda, “Empowering people with education and action plans is important so they can make proper decisions pertaining to their health.”

Beyond the more salient issues that may inherently impact on health, what is important to Masege, and specifically with Dr Zenda, is the overarching theme of long-term behavioural change. The two will continue to address their followers time and again on safe sex practices and the prevention of STIs, among other matters relating to reproductive health, thus advocating for healthy behaviours and attitudes. This message is sure to achieve a phenomenal impact on the status of public health. Healthy behaviours are influenced by the attitude and behaviour of the public through an overwhelming influence in the media. Their venues become the precepts for other health instructors or influencers as they show how practical and effective they are, setting an example for others to follow. This will turn into a bigger change in delivery concerning sexual health because it would be easier and appealing to different kinds of audiences.

5.3.3.6 Contributing to a larger movement

What gets Masege and Dr Zenda going is not just the work that is being done but is related to the all-inclusive strategy of employment of comprehensive sexuality education and sexual health advocacy. Their approach aligns with the broader objectives of global health education interventions: breaking archaic norms, pushing societal change, and improving health policy practices. As Oosterhoff et al. (2017) emphasise, digitalisation and outsourcing are key strategies in leveraging digital media for public health purposes.

Dr Zenda articulated this vision when she stated, “Myself and my team are grassroots-based. When I said earlier, ‘Real change comes from educating and empowering people at the grassroots level’, I meant it.” She reinforced this message, explaining, “Policy changes are necessary, but without informed and empowered individuals, those policies won’t be as

effective. Our work on TikTok is about giving people the knowledge and confidence to make informed decisions about their health.”

The two influencers’ passion for their goals drives them to address significant gaps left by traditional education systems. They aim to provide accessible and accurate information on topics that are often neglected or inadequately covered. As Dr Zenda explained, “We’re not just supplementing existing education; we’re often providing some of the only reliable information people will get on these topics.”

Masege and Dr Zenda effectively utilise TikTok to navigate the cultural and regulatory sensitivities that often constrain discussions of sex and sexual health in traditional media. Conventional media frequently avoids these topics, framing them as taboo due to societal norms and strict regulations (Hall, 1997). However, TikTok provides a platform where such discussions can be conducted openly, reaching audiences who might otherwise remain unheard in more traditional social settings (Fowler et al., 2022). The platform facilitates candid and inclusive conversations, challenging entrenched taboos and fostering greater dialogue around sexual health.

The approach of Masege and Zenda prioritises inclusive representation, ensuring that their content reflects the diverse experiences and identities within their target audience. By challenging stereotypes, they contribute to a more comprehensive understanding of sexual health. This approach aligns with Hall’s proposition that media plays a critical role in “giving voice to differences” and creating opportunities to resist dominant cultural narratives within power-knowledge relations (Hall, 1997:230). As Masege explains, “We are contributing to making a more inclusive society where everybody gets to understand everybody through different voices and experience representation”.

TikTok’s interactive nature allows Masege and Zenda to engage dynamically with their audience, creating a sense of community and a deeper understanding of their followers’ concerns and needs. “We are always learning from our audience,” Masege stated. “Such questions and comments back from them inform us on what information is most needed and how we can make the content better serve them” (Masege, 2023). This feedback loop ensures their content remains relevant and impactful, directly addressing audience demands.

Beyond education, both influencers actively engage in advocacy work, pushing for policy changes and greater investment in sexual health education and services. Advocacy efforts are

brought directly to their audience, hoping to bridge the gap between policy and real-world experiences. As Dr Zenda explained, “When we see how lack of information or access impacts our followers, it motivates us to push for change at a higher level” (Zenda, 2023).

By leveraging their platforms for both education and advocacy, Masege and Zenda translate their audience’s experiences into actionable efforts, demonstrating the potential of digital platforms such as TikTok to drive meaningful societal change.

Much of the two influencers’ work is underpinned by raising awareness and promoting activism for sexual health. Using the app, they should be able to touch many lives and reach particular critical public health issues that can feed into broader social change. Work by such innovators shows how digital platforms can empower education and advocacy in achieving the universal health goal. Masege and Zenda are thus contributing to the building of a smarter, more inclusive and healthier society not only by educating grassroots people but also through empowerment. This is achieved through combining personal experience and professional knowledge with a passion for public health. In this way, Masege and Zenda cover the full range of sex education. Countering misinformation, improving access, empowering, open dialogue, and harnessing the power of digital media, they are valuable actors in the world of sex education. They use TikTok to educate and inspire a more enlightened, open discussion over sexual health, with ambitious intentions toward better health outcomes and reduction in stigma.

5.4 Narrative analyses

An important dimension of power tapped through Masege and Zenda is that they use personal experience and story as tools for learning. Their sharing of lives and problems makes this content more human and hence more educative to the learners, in big ways. This echoes broader strategic approaches in education literature, foregrounding narrative as what engages the minds of learners and makes concepts meaningful and deeper.

Masege effectively uses personal stories mainly in relation to sexuality to subvert stereotypes and as an instrument toward acceptance. She hopes the openness about her weaknesses will give room to followers to reflect on what they have been through and seek guidance. This is because most followers usually comment on her videos with personal stories and questions. Such involvement seems to enhance the educational value of her contributions and leads to community and dependency among the members.

Although Dr Zenda speaks with a more clinical voice, she still uses experience, particularly in messages related to issues about women's health. She goes on to explain that since she has the background from which she draws professional knowledge, she comes into contact with patients personally, thus enabling her to give tips that are based on real-life cases. This strategy not only lends a sense of credibility but also makes the information relevant to the lives of the followers. The trust that Zenda appears to build with the audience is the critical success factor to her educational endeavours, as she hopes this makes the followers take what she says seriously and implement it in their health practices.

5.4.1 Engagement with followers

Masege and Zenda foster meaningful connections with their followers by engaging with comments, which often serve as platforms for questions, personal stories, and advice-seeking. This interactive approach enhances the educational and empathetic dimensions of their content, cultivating a sense of community and trust.

5.4.1.1 Supportive and affirming interactions

Masege uses comments to validate her followers' experiences and encourage self-reflection. For instance, in a video about coming out, a follower expressed fear of rejection from family. Masege responded empathetically, stating in her interview, "Your feelings are absolutely valid. Coming out is a journey, and you have the right to do it on your own terms. Remember, you are not alone in this" (Masege, 2023). Such affirmations appear to create a supportive environment, helping followers feel seen and understood.

5.4.1.2 Educational clarifications

Dr Zenda addresses health misconceptions directly through comments. When a follower asked if birth control pills affect fertility, she clarified: "No, that is a misconception. Birth control pills are reversible and designed to allow conception once you stop taking them" (Zenda, 2023). Her authoritative and factual responses appear to contribute to her credibility as a reliable source of health information.

5.4.1.3 QandA sessions

Both influencers extend engagement through QandA sessions, allowing for in-depth discussions on followers' concerns. For example, Masege addressed a question about coping with childhood trauma by encouraging therapy, community support, and self-compassion.

Similarly, Dr Zenda tackled a query on severe menstrual cramps, advising viewers to consult healthcare providers for proper diagnosis and treatment. These sessions appear to amplify their educational impact by offering personalised guidance.

5.4.1.4 Live videos

Live videos provide a platform for spontaneous and authentic interactions. Masege often shares personal stories during live sessions, such as discussing coping with isolation, stating, “Being here with you reminds us we’re not alone” (Masege, 2023). This perceived immediacy appears to foster a deeper sense of connection. Likewise, Zenda leverages live sessions to address urgent health topics, such as COVID-19 vaccines, reinforcing her role as an accessible health educator.

5.5 Follower demographics and reach of @dr.gynae and @kmhealingagain

There are a couple of very important reasons to know the demographics and reach of influencers in digital health education. One can measure effectiveness while breaking down the demographics of followers. By getting the age, gender, and geographical breakdown of followers, it becomes easy to create content relevant and engaging for the target audience. This is important to health educators because they are working with a platform such as TikTok whose content must not only be informative but also friendly to various audiences.

Reach and engagement metrics indicate how influential these influencers are. The capacity to create viral content with high levels of engagement will indicate authenticity in the eyes of followers. Information and education on sexual health may have long-term effects on the outcome of public health contingent on information relevance and accuracy. Most of the users of TikTok fall within the 16-24-year age group. This is the most vulnerable age group to misinformation; however, this is an age bracket likely to acquire knowledge through peers and influencers (Anderson, 2021).

More importantly, such knowledge about demographics and reach can be used to conceptualise more general tactics for a public health campaign. In this regard, influencers such as Dr Mpume Zenda (@dr.gynae) and Khumo Masege (@kmhealingagain) would make great partners in the domains of public health by leveraging their developed followership to communicate critical

health messages. This aids in the interpretation and application of data to make health-related communication more effective and efficient in connecting with the target audience and ensuring that such information reaches those who need it most (Fowler et al., 2022).

5.5.1 @dr.gynae: demographics and reach

5.5.1.1 Follower demographics

The followership of @dr.gynae, led by board-certified gynaecologist Dr Mpume Zenda, was quite extensive and diverse. Her capabilities to break down complicated medical information into simplified content have made her the most sought-after figure in online health care education. Here are the demographic findings of her followers:

Age: The audience of Dr Zenda is primarily the target age range, within 18-35 years old. This age range falls during an extremely interactive age group on TikTok, the social media that has been described as mainly made up of a younger audience. The majority of users of TikTok that cut across the age bracket of 16 to 24 years is almost the same age bracket of Dr Zenda's audience (Anderson, 2021).

Gender: The content from Dr Zenda is feminine and takes up the aspect of gender sensitivity because the concentration is on gynaecological health issues which immediately relate to health issues concerning females. In fact, women are far more keen on health issues than men, which explains why most of Dr Zenda's followers are women (Bhana et al., 2019).

Geographical reach: From a geographical perspective, Dr Zenda's audience is predominantly based in South Africa, reflecting her localised focus on health education relevant to the region. However, there is also evidence of engagement from viewers in other continents, suggesting her content resonates with a global audience. This broader geographical reach highlights the capacity of digital platforms such as TikTok to transcend physical borders, allowing creators to connect with diverse audiences worldwide. Metrics such as viewer analytics provided by TikTok, including location data and engagement rates, are useful tools for determining the geographical range and reach of her audience (Klug et al., 2021).

5.5.1.2 Reach and engagement

The reach and engagement metrics provide valuable insights for analysis, offering a glimpse into the impact that digital health educators, such as Dr Mpume Zenda (@dr.gynae), can achieve. On TikTok, her substantial footprint is evident in her high view counts and significant user interactions. While she does not have millions of videos, several of her videos have garnered millions of views, demonstrating the broad appeal of her content. The depth of engagement, reflected in thousands of likes, comments, and shares, underscores her ability to connect with her audience and effectively disseminate vital health information. This deep engagement highlights her potential to influence public health behaviours positively.

Engagement rate: Engagement rate is a key metric for evaluating content effectiveness. It is calculated as the total number of likes, comments, and shares divided by the total number of followers, multiplied by 100 to yield a percentage. For simplicity, likes alone can provide a reliable approximation, as this metric is prominently displayed on TikTok profiles. For example, with 603,200 total likes and 25,100 followers, Dr Zenda achieves an average of 2,395 likes per post and an engagement rate of 2.35%.

To contextualise this figure, a 2.35% engagement rate is considered high in the realm of digital content creation. According to industry standards, engagement rates above 1% on TikTok indicate highly resonant content (Sehl, 2021). This metric demonstrates that Dr Zenda's audience is not only consuming her content but also actively interacting with it, a key indicator of its relevance and impact. As Sehl (2021) argues, high engagement rates stand testimony to how pertinent and proper content is.

By achieving such an engagement rate, Dr Zenda exemplifies the effectiveness of using TikTok as a platform for public health advocacy and education. Her content succeeds in capturing the attention of her audience while fostering meaningful interactions, amplifying her capacity to influence and educate on critical health topics.

Content virality: The content of Dr Zenda speaks to reaching so many people: she has one video which stands at 2.5 million views. Videos that take trending topics or debunking popular myths end up being viral, managing to attract broad attention. Virality amplifies her reach beyond her very direct followers.

Cross-platform influence: Besides being phenomenal on TikTok, Dr Zenda is still very energetic and active on other platforms such as Instagram and a website. The cross-platform influence will expose her extensively since through these, she would be reaching a substantial number of people and gaining an influence in more than one digital space (Anderson, 2021).

5.5.2 @ kmhealingagain: demographics and reach

5.5.2.1 Follower demographics

Masege (@kmhealingagain), a certified sexual health educator, has cultivated a diverse and engaged following. Her audience spans various demographics, reflecting the broad appeal and accessibility of her content.

Age: Masege's followers predominantly fall within the 18 to 35 age bracket, similar to Dr Zenda's audience. This demographic is particularly significant for digital health education, as individuals in this age group are often navigating critical aspects of their sexual health and identity. They seek accessible, private, and credible sources of information, making platforms such as TikTok especially relevant (Bhana et al., 2011).

Gender: Although Masege's content is inclusive and addresses all genders, her follower base consists primarily of women. This may be attributed to the emphasis she places on topics such as mental health, consent, and body positivity, which often resonate strongly with female audiences (Bhana et al., 2011).

Reach geographically: Masege's audience is primarily based in South Africa and the United States, although her content also attracts viewers from other countries worldwide. This international reach underscores the universal relevance of her sexual health education, positioning her work as a valuable resource for global audiences (Bhana et al., 2011).

5.5.2.2 Reach and engagement

Engagement rate: The engagement rates for Masege's TikTok content are notably high, reflecting an active and interactive audience. By analysing her follower metrics, it is evident that with 25,700 total likes and 2,227 followers, Masege achieves an average of 291 likes per post, resulting in an engagement rate of approximately 12.55%. This high engagement rate underscores her ability to connect with her audience effectively, demonstrating the resonance

of her content and the success of her communication strategy. Engagement as a metric is crucial for evaluating influence, as it highlights the extent to which her audience finds her content relatable, relevant, and actionable.

Virality of content: Masege's videos frequently achieve virality, especially those addressing controversial or particularly pertinent topics. Her most popular video, for instance, amassed over 41,400 views, a testament to her ability to create content that captivates and spreads beyond her immediate follower base. This virality amplifies her reach and extends the impact of her educational messages to audiences who may not yet follow her account.

Cross-platform Presence: Beyond TikTok, Masege extends her reach through other social media platforms such as Instagram and her personal website. This multi-platform approach ensures that her content is accessible to a diverse audience, broadening the scope of her influence. By leveraging various digital channels, she maximises the impact of her educational initiatives, reaching multiple demographic segments and enhancing the visibility of her message (Sankey et al., 2010).

5.5.3 Influence on public health education

Both Masege (@kmhealingagain) and Dr Zenda (@dr.gynae) exemplify the transformative potential of digital platforms for public health education. Their extensive reach and high engagement rates highlight their capacity to disseminate accurate, accessible health information effectively. In doing so, they foster well-informed communities and inspire activism around sexual health and education. By harnessing the power of social media, these influencers bridge knowledge gaps and challenge traditional barriers to health education, embodying the progressive role that digital spaces can play in public health initiatives.

Their work underscores the importance of innovative digital strategies in reaching and educating diverse audiences, making platforms such as TikTok integral to the future of health communication and community mobilisation.

5.6 Challenges and ethical considerations

Despite their positive impact, both influencers face challenges in using social media platforms for health education. One significant issue is the potential for misinformation. While Dr Zenda and Masege strive to provide accurate information, the open nature of TikTok means that users

might also encounter misleading or incorrect content. Both influencers often address and debunk common myths, but the prevalence of misinformation remains a concern.

Another challenge is the issue of censorship. Social media platforms such as TikTok have strict community guidelines that can sometimes result in the removal or flagging of content related to sexual health. Both Dr Zenda and Masege have experienced this, which can hinder their ability to disseminate important information. Navigating these guidelines while ensuring that critical health information remains accessible is a constant balancing act.

Privacy and confidentiality are also significant considerations. As professionals, Dr Zenda and Masege are bound by ethical standards to protect their patients' and clients' privacy. On TikTok, they must navigate how to provide personalised advice without violating confidentiality or offering individual diagnoses and treatments.

5.7 Conclusion

This chapter delved into the profiles, motivations, and strategies of two influential TikTok creators, Dr Mpume Zenda (@dr.gynae) and Khumo Masege (@kmhealingagain). Their work demonstrates the unique ways TikTok is being used to engage audiences on sexual health topics. Through Dr Zenda's professional expertise and Masege's personal storytelling, both influencers illustrate how digital platforms can address misinformation, reduce stigma, and foster meaningful conversations about sexual health.

Their methods of engagement, including responding to comments, hosting QandA sessions, and leveraging live videos, create interactive and supportive spaces for their followers. These strategies not only enhance the accessibility of accurate sexual health information but also build trust and a sense of community among their audiences. Despite facing challenges such as censorship, misinformation, and ethical concerns about privacy, their approaches highlight the transformative potential of social media as a tool for sex education.

In the next chapter, I move from analysing the influencers themselves to exploring their TikTok content in depth as well as the interviews I was lucky enough to have with both creators. Through a textual and multimodal analysis, I will investigate how themes, visuals, and narrative elements are used to communicate sexual health information. I hope to provide further insights into how representation and discourse operate within the digital landscape of sex education.

Chapter 6: Textual and multimodal analysis

6.1 Introduction

This chapter explores the textual and multimodal dimensions of sex education content created by Dr Zenda (@dr.gynae) and Khumo Masege (@kmhealingagain). Building on the findings from the previous chapter, which examined the influencers' profiles, motivations, and community engagement strategies, this section focuses on a detailed analysis of the content they produce. By investigating the interplay of textual, visual, and audio elements, this chapter explores how these creators communicate complex ideas about sexual health in ways that resonate with their audiences.

The analysis is structured to highlight the themes, messaging strategies, and design elements that define their content. Special attention is given to how textual captions, on-screen text, hashtags, and visual cues work in tandem with audio components to deliver comprehensive and engaging educational material. These multimodal elements are critically examined to understand how they support the transmission of knowledge, foster audience connection, and promote meaningful discourse around sexual health.

In addition, this chapter explores the alignment of their content with the broader objectives of Comprehensive Sexuality Education (CSE) in the South African context. It investigates how these influencers address culturally sensitive topics, challenge stereotypes, and provide accurate, inclusive information to their followers. The textual and multimodal analysis also considers how TikTok's algorithmic framework influences content visibility and audience interaction, shaping the educational potential of this digital platform.

By combining thematic, multimodal, and narrative approaches, this chapter aims to provide a holistic understanding of how digital sex education operates within the visual and interactive ecosystem of TikTok. This exploration highlights the opportunities and challenges inherent in using short-form, multimedia-rich content to address gaps in traditional sexual health education.

6.2.1 Masege and Dr Zenda’s most viewed videos

Note: “Views” represent the total number of times the video was played—this includes replays by the same user.

<u>Influencer</u>	<u>Video</u>	<u>Views</u>	<u>Summary</u>	<u>Analysis</u>
Khumo Masege	Childhood Trauma and Not Speaking to Parents	5.1 million	Masege shares lip sync in a humorous video about the complicated relationship between adult children and their parents when it comes to discussing trauma they may have experienced at the hands of their parents.	Resonates due to using humour as a way to touch on a topic that has a lot of discourse surrounding it, which is adult children going to therapy to unpack what happened in childhood.
Khumo Masege	Booking Free Group Support	41.4 thousand	Masege promotes group support sessions, fostering community and collective healing.	Emphasis on community support underscores commitment to creating safe spaces for dialogue and healing, addressing mental health holistically. She uses commonly felt issues to show that the person is not alone in their problems.
Khumo Masege	Being Gay and Not Enjoying Sex Until Discovering They Were Gay	34.9 thousand	Masege discusses personal experiences discovering her sexuality and its impact on sexual experiences.	Challenges stereotypes and promotes self-acceptance within the LGBTQ+ community, encouraging open conversations about sexuality.
Khumo Masege	Top 5 Things They Wish They Knew About Sex in High School	28.1 thousand	Masege provides advice on sex education topics she wishes she had known in high school.	Educational content fills gaps in traditional sex education, addressing misconceptions and promoting informed decision-making among young audiences.
Khumo Masege	Coming Out as Gay Later in Life	15.7 thousand	Masege shares insights on coming out later in life, addressing challenges and personal growth.	Serves as a source of support and visibility for older LGBTQ+ individuals navigating identity disclosure, promoting empathy and understanding.
Khumo Masege	Misconceptions About Bisexuality	10.1 thousand	Masege debunks stereotypes and misconceptions about bisexuality.	Challenges myths, fostering awareness and acceptance of diverse sexual orientations, advocating for inclusivity and respect.

Khumo Masege	Crying to Release Emotions	8 thousand	Masege discusses emotional release through crying and its therapeutic benefits.	Normalises vulnerability and emotional expression, encouraging viewers to prioritise mental well-being and seek healthy coping mechanisms.
Khumo Masege	Introduction to Her and What She Does	7.7 thousand	Masege introduces herself and explains the focus of her content.	Establishes identity and purpose, enhancing Masege's credibility and connection with new viewers, fostering trust and engagement.
Khumo Masege	Affirmations	5.5 thousand	Masege advocates for positive affirmations for mental and emotional well-being.	Promotes self-care in a humorous way with the goal of empowering viewers to cultivate positive self-perception.
Khumo Masege	Coming Out as Gay	4.4 thousand	Masege shares personal experiences and advice on coming out as gay.	Offers support and encouragement to viewers navigating similar journeys, promoting visibility and acceptance. She gives viewers an insight into her own story which allows viewers to feel a closeness and familiarity with her and her content.
Dr Zenda	Pantyliner	2.5 million	Dr Zenda discusses the proper use of pantyliners for menstrual hygiene.	Practical health advice on everyday issues resonates with viewers seeking reliable information and promotes menstrual health awareness.
Dr Zenda	Myths About Sex	2.4 million	Dr Zenda debunks common myths and misconceptions about sex.	Content correction addresses misinformation, promoting sexual health literacy and empowering viewers to make informed choices.
Dr Zenda	Diarrhoea and Periods	1.6 million	Dr Zenda explains the link between menstrual cycles and digestive issues.	Holistic health education highlights lesser-known menstrual health aspects, fostering an understanding of viewers' bodies. This, like many of her videos, takes a 'taboo' topic and removes the stigma by talking about it and informing audiences.
Dr Zenda	Gender Reveals	1.3 million	Dr Zenda is included in the gender reveals of her patients.	Behind the scenes of a tender moment that draws us in as we feel we are being given a vulnerable glimpse into her patients' lives.
Dr Zenda	Pimple on Vulva	1.3 million	Dr Zenda addresses concerns about dermatological issues in the vulvar area.	Medical advice on intimate health concerns reduces stigma and encourages viewers to seek appropriate care.
Dr Zenda	What isn't normal for a period	721.6 thousand	Dr Zenda discusses what is normal for a period and when	By addressing specific symptoms and providing actionable advice, the video empowers viewers to

			you should see a healthcare professional	better understand menstrual health and seek timely care.
Dr Zenda	Contraception	706 thousand	Dr Zenda provides factual information about different contraceptive methods and their appropriate use.	This video dispels myths about contraception, promotes informed decision-making, and encourages open dialogue about reproductive health.
Dr Zenda	Normal Vaginal Smells	409 thousand	Dr Zenda explains what vaginal smells are normal and when they may indicate a health issue.	The video normalises discussions about intimate health, aiming to reduce stigma and encourage proactive health-seeking behaviours.
Dr Zenda	Facts about the clitoris	408.2 thousand	Dr Zenda shares educational insights about the clitoris, addressing misconceptions and providing clarity.	This video promotes sexual health literacy, highlighting anatomical knowledge as a foundation for understanding and respect.
Dr Zenda	The morning after pill	400.7 thousand	Dr Zenda explains the use, effectiveness, and misconceptions about the morning-after pill.	The video provides clear and accurate information, countering myths and encouraging informed decision-making regarding emergency contraception.

6.2.2 Common themes

Despite the two influencers being very different content creators, common themes appear in both accounts, albeit addressing them differently. Through thematic analysis of their top 10 videos I was able to find the differences and similarities between the content of both influencers, and what performs well with audiences. These are:

- 1. Human Anatomy:** Khumo Masege (@kmhealingagain), and Dr Zenda (@dr.gynae) both emphasise the need to understand the body and its anatomy. Sexual education requires a basic understanding of human anatomy, and Dr Zenda's videos provide reliable information regarding anatomical parts and their functions. Dr Zenda's videos provide reliable information about anatomical parts and their functions, presenting complex topics in a clear and accessible manner. For example, in her video *What Isn't Normal for a Period*, Dr Zenda explains how to identify irregularities in the menstrual cycle. Using diagrams and straightforward language, she discusses common concerns such as heavy bleeding, prolonged periods, and severe pain. In the video she uses dancing and graphics to say that if your period lasts more than seven days, you have large clots, or debilitating cramps, then that's not normal, and you should see a doctor. This clear articulation of key health indicators demonstrates how she breaks down complicated concepts such as the menstrual cycle and hormonal changes into manageable, understandable pieces. By visually illustrating the phases of a menstrual cycle and using relatable examples, Dr Zenda ensures that her audience can grasp and apply the information effectively. This approach exemplifies her commitment to making accurate sexual health education accessible to all. Masege, in her holistic way of teaching, also reminds the audience to observe and study their bodies. She promotes body awareness and self-examination in order to ensure that people know their bodies and respect them, appreciating any difference that may exist within them. In her TikTok video titled *5 Ways to Affirm Your Trans/Non-Binary Identity*, Masege offers practical steps to help individuals feel more connected to their identities. Through such content, Masege highlights the significance of understanding anatomical variation, underscoring its role in fostering self-respect and promoting health-conscious decisions. Both Masege and Dr Zenda advocate for anatomical knowledge as a vital foundation for individuals to make informed and healthy decisions about their well-being.

- 2. Reproductive Health:** The two influencers also speak on reproductive health. Dr Zenda, while focusing on her background of being a gynaecologist, emphasises medical accuracy and evidence-based information for content regarding menstrual health, pregnancy, infertility, and menopause. Much of the video content addresses common misconceptions and provides practical advice to be followed. For example, she has shared several videos about symptoms of some of the most common diseases affecting the reproductive health of women, such as PCOS and endometriosis, as well as when to go to the doctor.

Masege takes a holistic approach by blending traditional knowledge and modern science to address sexual health. In her video series titled *How Virginity is* she challenges conventional narratives surrounding virginity and promotes body literacy. This content dismantles myths about virginity and addresses how these myths are wrong, where they may have come from, and gives factual information that debunks them. By integrating discussions about these myths, Masege consistently empowers her audience to take control of their health through practical, evidence-based, and culturally resonant advice.

- 3. Consent:** One of the most relevant topics to sexual health education remains the matter of consent, and both TikTokers are dedicated to the understanding of consent as clearly as possible with respect. Dr Zenda, in particular, emphasises the importance of clarity and mutual agreement in any sexual encounter. During her interview, she explained her views: “When we are able to grab those kinds of topics at an early stage as they happen, you find that then talking about things such as sex becomes a little bit easier because they already understand their bodies. They already understand what consent is. They already understand what my private space looks like. They already understand how to even choose friends. So we’re not just talking about sex education. You’re talking about a holistic approach to a youth or a young person so that they are equipped and empowered to make the best choices for themselves.”

This approach is evident in her TikTok content, where she provides practical tips on how to navigate conversations about consent, ensuring her audience understands its importance in fostering healthy and respectful relationships. Her focus on recognising and respecting boundaries reinforces the message that consent is an essential, ongoing process in any interaction.

Masege also talks about consent, but she concentrates on the more emotional and psychological aspects. Talking about boundaries in her interview, she said “I think maybe what South African youth need a bit more of is education around boundary setting, around communication with sex partners. I think methods for safekeeping outside of when the act is happening. I think like a misconception about sex education is that all we’re talking about is sex, when in reality it’s a lot broader than that, right? We’re talking about like what’s happening leading up to it, we’re talking about how do you communicate with people, how do you know if you want to have sex, how do you know if you don’t want to have sex, what do you do if you’re like almost about to and then you change your mind?”

She also emphasises how to navigate power dynamics in relationships. For example, she gives advice about ways of handling situations when consent is vague, or if someone claims their boundaries are crossed, “So for one I definitely think the basics of like communication and boundary setting is important. I also think like broadening what sex is is really important.” she said in her interview. Both influencers emphasise that consent is an ongoing process. It should always be given freely and enthusiastically.

4. **Contraception:** Both Masege and Zenda address methods of contraception, including hormonal methods such as oral pills, IUDs, and implants, as well as non-hormonal use of condoms and diaphragms. For example, Zenda describes in a video about contraception how effective each one will be and what side effects might be expected from using them. She starts the video by making clear, “The more you know (about contraception options) the easier it is to communicate your needs and ask pertinent questions when speaking to your healthcare provider.” She wants her followers to understand the information they will need for the proper choice when it comes to birth control. Masege talks about the use of contraception in non-heteronormative spaces. Her aim is to educate followers on an often forgotten space in sex education. In her interview she said “I think when I was in school, there was a focus on like, you are inevitably going to do this thing and it’s going to be either you’re going to get pregnant or you’re going to get sick or, you know, like this is how you do it, right? And I think when I was younger, I just wanted someone to be like, it doesn’t have to be that way.”
5. **LGBTQ+ Issues:** Both Masege and Dr Zenda make their content relevant to the needs and concerns of the LGBTQ+ community. Dr Zenda highlights health-related issues

unique to LGBTQ+ followers, such as hormone treatment for transgender people, practicing safe sex among same-sex couples, and also the urgency of frequent health check-ups. She also stresses that health professionals should provide their patients with non-judgmental and non-discriminatory services. In her interview she highlighted the need for this, “particularly those who are minorities, even within the context of South Africa, of black women, the disabled, the youth, the LGBTQ+ who don’t feel like they are part of this. So definitely it makes all the difference that someone who looks like them, speaks like them, has experienced the same country as them and knows the difficulties has come from, you know, traditional, very conservative families like we do, like I do, it makes all the difference.”

Masege focuses more on emotional and social issues associated with LGBTQ+. Her content is focused on being welcoming, celebrating difference, advocating for acceptance, and further understanding of the issues. Among these videos she has are stories about coming out, the experience of discrimination, and how communities can be more accepting of each other. She has published some personal stories such as her video about coming out later in life as a way of showing and illustrating their experience and challenges. She attempts to bring about a safe and inclusive environment for all their followers regardless of sexual orientation or gender identity.

- 6. Mental health:** Both doctors emphasise the interaction of mental health and sexual well-being. Both point out that sexual health is not only about physical health but also entails emotional and psychological aspects. Dr Zenda discusses how mental health issues such as anxiety and depression can impact sexual health, as well as the positives on mental health through sex, masturbation, and intimacy. In her video *why are women clingy after sex*, she discusses the oxytocin (feel good hormone) that is released during and after sex.

Masege addresses mental health as a self-care and mindfulness issue. Masege writes regarding the relationship of psychological effects of stress and trauma with sexual health; she has many coping strategies that have healing capability. In her video talking about *remembering trauma* she says “remembering the details of sexual trauma can be retraumatising and not always necessary for healing.” This and other videos discussed the link between sexual and mental health and how they are not two separate concepts

but are interconnected, helping viewers make a mind/body connection when it comes to their sexual health.

- 7. Safe sex:** Content from Masege and Dr Zenda promotes safe sex. Dr Zenda is informative on how one can appropriately use condoms; the need to be regular in getting checked for STIs, and how to have the “talk” with a partner about safety. In [this video](#) she discusses lifestyle and sexual health as well as the complexity of this topic. “There isn’t one blue pill that solves issues so it is about lifestyle as well,” she says. She talks on topics such as PrEP and PEP: roles in HIV prevention. Her aim is to arm her followers with the necessary knowledge so that they and their partners will not fall prey to such diseases.

Masege backs this up with her discussion of the requirement of communication and respect from both partners when it comes to practicing safe sex. She describes how one can find the time to talk about STI testing and safe sex practices with a partner. Her post often features personal stories and testimonials about the need for such practice in real life, such as [this video](#) where she expands on what she wish she knew about sex in high school. Both influencers have the same objective: to normalise safe sex while they help reduce the stigma that is often associated with the testing and prevention of STIs.

- 8. CSE:** Both Masege and Dr Zenda’s initiatives revolves around proper sexual education. Both concur that every individual should be exposed to correct and comprehensive facts about their sexuality. The more aware a doctor, such as Dr Zenda, can be in terms of giving rather comprehensive and scientifically accurate information on any kind of topic, the better. As numerous as the basic problems are related to human reproduction, so are the problems of the utmost complexity when it comes to treating infertility and sexual dysfunction. Dr Zenda has become a contributor to sex education not only through her TikTok content but also notably her book *Mommy, my body’s changing* where she discusses puberty and sex education.

This is complemented by Masege, giving a holistic inclusive perspective. She puts the traditional knowledge along with cultural practices into the content of her videos, giving it a holistic approach towards sex education. In most of her videos, she reveals that the education has to be based on understanding one’s body as well as respecting people’s

experience and their identity. Together, Masege and Dr Zenda represent all-rounded yet accessible sexual education, always informative but empowering at the same time.

6.2.3 Differences in approach

Masege and Dr Zenda cater to different audiences despite both focusing on sex education. It is inevitable that they approach topics differently to appeal to their audiences. This careful content curation is partly what has helped them build and maintain an audience.

They differ in approach in three main ways:

1. **Narration style and individualisation:** Masege relates to the target audience by, mostly narrating her personal stories, and emotive narration, such as in [her video](#) about why medical practitioners saying they're "queer aware" isn't good enough for inclusive healthcare in her opinion. She also posts self-reflective videos which contain growth, struggle, and strength in vulnerability. Dr Zenda, on the other hand, approaches things in a slightly technical and clinical manner, discussing only what she believes in her chosen field of health and evidence-based knowledge that can normatively be applied for instructing the viewers on matters of healthcare.
2. **Medical Information:** Dr Zenda's posts are saturated with health information and medical images. People are better equipped with knowledge of how physiological functioning works, of symptoms, and what can be given as treatment. Masege focuses on the mental health side of things, sharing personal stories and anecdotes.
3. **Mental Health and Emotional Awareness:** Masege talks especially to concerns of awareness concerning mental health as well as emotional being. She achieves this by addressing traumatic issues and self-care, and issues regarding support concerning matters of mental health. Dr Zenda sometimes has content that appears to point towards a psychological perspective of health, but her general content reflects far more towards knowledge of physical health and well-being.

The ways they have focused their messages to the audience are what have led them to using TikTok as an education, empowerment, and advocacy tool, mainly on generally more wide-ranging conversations at the social level, much of which deals with sexual health, identity, and well-being.

6.2.4 Engagement and interaction with followers

Analysing the digital engagement of Khumo Masege (@kmhealingagain) and Dr Zenda (@dr.gynae), it is easy to see how these influencers interact with the audience in the comments, QandAs, and live videos. This allows us to observe the relationship they have with their followers. To do this, we can look at the methods they use and see responses from their followers as to how efficient and effective it is.

6.3 Multimodal analysis

Video content in apps such as TikTok-conveys the message in ways that are effective and engaging. This chapter discusses how the construction of the content supports its educational aims.

6.3.1 Effect of visualisation in communication

Visualisation of communication is one of the most effective means of achieving a proper understanding, especially if the matter is deemed critical or abstract. Multimodal discourse has revealed how pictures and words in communication aid in delivering data to be remembered because it incorporates other learning abilities (Jewitt, 2020). On TikTok, an application where contents are predominantly composed of short graphically rich posts, Masege and Dr Zenda both incorporate their verbal narratives with graphics, making their content accessible in terms of both intelligibility and palatability to varied clienteles.

6.3.2 Graphics

Masege and Dr Zenda use graphics and infographics in some of the videos that they create. Among some of the advantages of using graphics and infographics are that they help break down complicated information into shorter pieces that are easier to understand, while the key points are clear visually and makes the content aesthetically appealing and hence interesting. In Masege's video *Top 5 things they wish they knew about sex in high school*, the bold text overlays help to focus the attention of viewers on important facts that can very easily be remembered and recalled.

Graphics such as those of Dr Zenda have been used in the form of illustrations to make it easy to understand and access various medicine and anatomy videos. For example, in the video *Sex and Pleasure* Dr Zenda uses graphics and animated short clips to make the video engaging, and she demystifies taboo topics regarding sex and sexual health through such visualisations. Graphics assist not only in providing a clear understanding but also normalisation of the discussion about sexual health.

6.3.3 Visual storytelling

It is unsurprising to know that visual storytelling is used in their videos. Visual storytelling using a ‘show don’t tell’ approach adds the life or vitality needed in how the content is interpreted and, in most cases, the success of educational material on TikTok. To Masege and Dr Zenda, these forms of visual materials are additive and integral to their communication strategies, aiding clarity to the content, making it relate and connect with emotions, and creating relevance in trying to make sensitive and complex information relevant.

For instance, a video by Dr Zenda on menstrual health uses visual imagery to tell a story in a way that engages, educates and empowers the viewer by taking them through normal period flow, all the way through to practical advice. Relatable imagery and demonstrations are used to aid viewers to understand the content better.

6.3.4 Limitations of visual communication

While visuals make content on TikTok appear attractive, they are accompanied by some limitations and risks. There is a risk of oversimplification: something important gets lost in trying to make it visually appealing or digestible, something that is complex has been simplified. Accuracy and details really matter, especially when it comes to sexual health education.

The second limitation comes more directly in the nature of the platform itself. In the required length for a TikTok short video (fifteen seconds to three minutes), only so much information can be delivered in just one video. Such a situation often compels influencers to be short, and sometimes this shortness makes the content less engrossing. Masege and Dr Zenda obviate this challenge well in a string of videos on a subject, which makes them able to discuss complex material over multiple videos. Yet the audience cannot depend on sitting back and finishing the whole series on each occasion. Nevertheless, solid visuals surely may prove to be a great way

of connection to engagement. Sometimes, however, if visuals are not thought through correctly, they feed into and develop the stereotype or bias – for example, images on LGBTQ+ identities or gender roles may feed into stereotypes if visualised incorrectly. Masege and Dr Zenda both know this, however, and work to turn to pictures of inclusiveness reporting on a range of experiences, and the danger is an inherent challenge in any kind of visual communication.

6.3.5 Tone

The tone of a video is one of the most critical features of a message and reflects the changes in the perception of a message: it can greatly modify the way a particular message is received by a viewer. Thus the tone becomes crucial for content on TikTok, which, more often than not, involves super-short videos that move fast.

For instance, Masege sometimes uses a warm and empathic voice in the videos. Most of the time she is discussing sensitive topics such as mental health issues, LGBTQ+ issues, even traumas. The empathic tone creates a safe space for viewers to feel almost free enough to connect emotionally with the subject. For example, in the video *Crying to release emotions*, Masege opens the door to talking about crying in a positive light as an emotional release. This gives her message authenticity and forms trust among her target audience.

Dr Zenda uses a more authoritative and confident intonation, which might result from her professional experience as a gynaecologist. She says credible things; the tone is dependably reliable, covering topics such as health and medicine, be it reproduction, contraception, or menstrual hygiene. For example, in the video *Normal Vaginal Smells*, Dr Zenda's soothing, confident tone clears up a subject that is often shrouded in stigma and misinformation. With her blog, there is often a professional tone that makes her a great source for information, as health advice is required to be accurate and reliable.

Both Masege and Dr Zenda show flexibility in their tone, varying it based on the subject and the intended audience. Masege is typically soft spoken; however, if she is talking against social injustice or witnessing affirmation to the LGBTQ+ community, she may be much more fervent or forceful. Likewise, Dr Zenda can also tone down her words when speaking to aspects of care that are personal/emotive about patient experience and mental health. The change in tone here leaves clear messages, both practical and emotionally persuasive but for different audiences.

6.3.6 Language: accessibility and inclusivity

Language is a crucial topic when speaking of content being aimed at South Africans, where there are 11 official languages (12 if you count South African Sign Language) with no accurate option on TikTok to translate or caption the video in every language. It becomes imperative for them to get their message across in an accessible way where those they are addressing can understand the intended message.

Masege avoids using very technical language, but uses words that everybody understands targeting the youth and mixed ethnic groups of people. In her video *Top 5 Things They Wish They Knew About Sex in High School* Masege uses colloquial terms and simple explanations that make sex education topics easier to understand. This language is thus friendly and accessible for the audience, lets the viewers feel comfortable to engage and share the content. If she does use technical language, she provides a definition either as a visual aid in the video or explains what a word or phrase means verbally.

Dr Zenda is dealing with medical content which at times can be difficult to make accessible, especially concerning medical terms. Despite this she takes great care to make her content as accessible as she can, explaining concepts simply and providing as much explanation and visual aids as possible. Since her content is very medically focused, Dr Zenda often tries to simplify difficult health concepts to a level everybody can understand. For instance, she succeeds in breaking down all the complicated medical jargon in her video on *Diarrhoea and Periods* into plain language anybody can understand. This enables a better understanding of the content and confidence on the part of the viewer to take charge of his/her health by availing himself/herself of the information in an assimilated manner. She also deals with sensitive health issues in a soothing, non-sensational manner. The sound and balanced presentation of the explanations mitigates the anxiety and confusion that the viewer has about their health. It is such careful expression that complements her position of a trusted healthcare provider and helps her material overall deliver its intended purposes.

6.3.7 Presentation style

The style with which the content is presented will affect how it is received. Thus, the creators take into consideration pace, emphasis and overall strategy for presentation of their videos.

Masege and Dr Zenda have developed specific delivery styles that resonate with their content and the target audience of their messages.

Masege tells stories and relates them back to herself. This narration style makes the content more interesting, because the speaker seems that they are conveying a personal issue to the audience. Her human side to the issues she talks about can easily be seen by the viewers. In *Being Gay and Not Enjoying Sex until discovering they were gay*, for example, Masege narrates her personal sex experiences while providing comfort and solidarity, going on to say “did anyone else swear up and down that you don’t like sex, penetration isn’t really enjoyable, question maybe you were asexual...and then start dating people you actually liked and were like oh, I was just gay.” She makes the story about herself while asking questions or giving information to involve her followers. In most videos she takes her time to speak slowly and clearly, allowing viewers time to think and reflect on what is being presented to them instead of being given lots of information to take in all at once. She presents topics in a casual way, almost like talking with a friend. The camera is close to her, she’s staring directly at the camera, and this creates a sense of intimacy that makes it feel as if she is talking directly to you on the phone.

Masege makes use of emphatic pauses and changes in intonation to emphasise a point which otherwise may go unnoticed by a viewer, and reiterates the importance of what she is communicating; thus, the deliberate pacing and emphasis on some aspects creates a rhythm in her delivery that keeps the viewers interested in what she is communicating.

On the other hand, as observed, Dr Zenda uses a very simplistic and didactic style of teaching. All the videos she publishes on her channel are linear: she introduces the theme, goes into the details connected to it, and then concludes by having some action-taking advice or recommendations. This methodological approach is very apt for the medical content that she writes about because it ensures that viewers get clear and comprehensive information. For instance, in her video *How Often Can You Use the Morning After Pill* she describes systematically what one needs to do for emergency contraception. She starts the video by saying “First of all it is not an abortion tablet! It does not have any affect once a person is actually pregnant!”. This sure and simple tone means there is little room left for misunderstanding. She goes on to speak about the usage of the morning after pill and when to speak to a healthcare provider about more reliable forms of contraception if your usage is more than 2-3 times a month. She ends her video by saying “If you need a reliable contraceptive,

speak to your doctor.” This encourages viewers to seek specific and tailored medical advice instead of giving inaccurate advice to any one individual based on their needs and circumstances.

Dr Zenda’s delivery also includes the ability to break up large chunks of information so she can deliver with such flair that she doesn’t drown the viewer in thick information. She does this again and again when she repeats points or words she pronounces, which assists one in learning and also ensures one remembers. Rhetorical questions and direct address (“You may be wondering”) also make the audience engage with the video by talking directly to them.

Like Masege, Dr Zenda also uses a close-up shot in this video and stares directly at the camera to create intimacy with the viewer. In other videos she can be seen further away but still looking into the camera. Unlike Masege, Dr Zenda is more informational and less intimate, similar to a lecture or an informational talk.

Both influencers leverage their video delivery to create an experience tailored to the content and what their audience wants to see (a talk with a friend vs an informational talk, for example). They do a fantastic job with keeping on brand with these style choices, ensuring that the viewers come to know them and be familiar with their style of content.

6.4 Analysis of textual elements

Captions, hashtags, and on-screen text are other textual elements that contribute hugely to the narrativity of the TikTok content. Constituent elements inform how audiences make sense and share content and engage with it. In this chapter, we will analyse how Khumo Masege and Dr Zenda make use of these textual elements in providing video accessibility, visibility, and impact on TikTok.

6.4.1 Captions

Captions are a written form of audio, thus the viewer can see any content in exactly the same way. For example, on TikTok people may silence the video due to being in public or because they may not want anyone to hear the video; hence captions reach more audience subsets because they cater for people who are deaf, hard of hearing, or want to view the video in silence.

The proper use of captions by Masege amplify the essential messages of her videos. Her captioning is much shorter and mainly verbatim to what she is speaking about: therefore, she makes sure that viewers do not miss any intended message in the clip. For example, in *Myths About Bisexuality*, she prints the captions as she speaks in the video so that no matter which mode the viewer is consuming in, the deconstruction of these myths will go through. It makes her videos easier to consume and communicates the most crucial information very well, which happens mostly to be carried in the memory.

Sometimes Masege uses captioning to state the auditorium background which would not occur within the audio dialogue. For instance, perhaps she is giving one-word definitions, explanations, afterthoughts or phrases that give the viewer an extra depth of understanding of the issues at hand. Some videos are often much helped by clarification.

Another important feature of Dr Zenda is that she believes it is very important to include subtitles in her learning materials. For those clips on health-related subjects, with terms that may appear to be relatively scientific, subtitles will ensure user access and at the same time support memory and retention processes. In the video *What Isn't Normal for a Period*, important medical terms and their meanings are subtitled throughout the video to make learning easier. This approach helps the audience to retain the information presented as a part of health-related education.

The two influencers used captions to create a more engrossing tone by using asides or questions to the audience. Such a strategy makes the interaction more direct when it is an individual activity and thus personal and interactive. For instance, Dr Zenda may ask through captions such as, “Have you ever noticed this too?” This form of engagement motivates people to actively participate and reflect, and thus be highly and actively involved.

6.4.2 Hashtags

Hashtags are a strong tool for categorisation, reach, and connection to certain communities. They are about keywords, and help a user who is interested in a specific topic or trend to discover relevant information on the platform. Use of hashtags might be what will drastically shift the way a video will be viewed and increase its visibility.

Masege uses the proper hashtags; she is interested in content that really resonates with her audience. Most of the hashtags she uses are #LGBTQ, #MentalHealth, #SelfCare, and

#TraumaRecovery. This kind of hashtag puts her work into relevant discourse on TikTok, and thus more opportunities are noticed by users searching and showing interest in those topics.

She also uses hashtags specific to the themes of the videos she does, such as #BisexualityMyths or #ComingOutStories. Such niche-specific hashtags bring the content forward but also give prior heads-up on what the particular focus of every video is, so that viewers can dig deep and explore the content in which they are interested or experienced. This helps Masege's videos as well as the far more common talk on TikTok to turn her audience into spectators sharing the same identities or struggles to become part of a "belonging", almost inviting them to engage with each other's content as well as with hers.

Dr Zenda also uses hashtags in boosting the views of her content. As widespread as they are, there are a number of other oft-repeated popular hashtags which include but are not limited to those in the videos: #WomensHealth, #ReproductiveHealth, #MenstrualHygiene, and #SexEducation. The tags ensure that her content falls under the health education category on TikTok, hence attracting users targeting verified information on the subject.

She uses more accurate hash-tags such as #Contraception or #VulvaHealth, to reach users who are interested in specific issues within the area of reproductive health. The usage of more hash tags in a strategic way increases the possibility that her videos will be viewed by active users who have an interest in some in-depth expert information on a particular topic, therefore making her videos more relevant and impactful. Dr Zenda aligns her content with global health talks through association with popular trending hashtags in awareness campaigns about health issues such as #BreastCancerAwareness or #WorldMenstrualHygieneDay that may be a very important and trending at the time.

6.4.3 On-screen text

Another very important textual element that influencers use in order to give emphasis to key messages and to provide additional information and enhance the general aesthetic quality is on-screen text, which overlays text over a video. While captions usually represent speech, on-screen text offers much higher creative freedom for the purposes of drawing attention to certain messages or adding layers of meaning to the content.

Masege often captions videos with key points or statistics, quotes, or questions. In the video *Top 5 Things They Wish They Knew About Sex in High School*, she uses bold colourful text to

list each of the five points as she talks about them. This can make the content more visually engaging and memorable, which are two major aspects of the success of a video – how likely that viewers will remember some of the main take-away points from the video. Using on-screen text can be particularly potent for learning content, since visual reinforcement of content helps learners to remember and understand information.

In addition, on-screen text is one of the ways that emotional or rhetorical punch is achieved in Masege's videos. For instance, in her video on [*childhood trauma*](#) and *not speaking to parents*, Masege will employ on-screen text to make the video all the more poignant. These textual elements trigger thinking, while at the same time raising emotion for a viewer, deepening engagement with the content.

Dr Zenda uses onscreen text mainly to inform the viewer of essential health information and instructions. For instance, in *How Often Can You Use the Morning After Pill* she uses on-screen text to introduce the video so viewers know exactly what it is about. This not only makes the information more accessible to the viewers, but also ensures that viewers can quickly grasp the topic of the video as they are scrolling, which will hopefully get them to stop and watch.

Onscreen text is also used in some of Dr Zenda's videos as a means for dispelling myths and, more colloquially, providing for a clarification of misunderstanding. For instance, in her video *Myths about sex*, she can write the myth on the screen and point to whether it is true or not. The fact that this form of correction takes place visually makes educational material that uses this kind of technology all the more valuable, for it is made easy for viewers to distinguish between a falsehood and the truth.

The two influencers have used screen text for a cohesive visual style that ties into their brand. The fonts, the colours, and how the text is laid out on the screen are all related to the tone and style of their content. It makes their videos more visually appealing and at the same time reinforces their brand to make them recognisable within their own content.

Using these textual elements, Masege and Dr Zenda are able to break complex ideas down to the audience clearly, thus ensuring that their messages reach broad, diverse audiences. The interconnection between the two influencers and their followers hinges on such elements being strategically deployed in a changing social media environment. If the rapidly changing social media environment is strategically deployed, using such textual elements among others, the

interconnection between the two influencers and their followers will have a significant effect on the future of sex education.

6.5 Perceived Impact

Social media influencers have been instrumental in determining the currently popular issues and trends of the young generation in the digital world. In the next section, I look at followers' perceptions and effects on knowledge and attitudes towards sexuality and sex based on qualitative data drawn from follower interactions, video content, and appropriate academic sources.

6.5.1 Expanding access to comprehensive sex education

While there are many contributions of the influencers such as Masege and Dr Zenda, there is also space for opening up of avenues for really comprehensive and inclusive comprehensive sex education. Old school sex education that is usually mired by cultural, religious, or institutional constraints can only be informative in a narrow and sometimes very limited understanding of sexual and reproductive health. Social media influencers can be said to provide far greater fluidity and much-needed depth of thinking that completes the gaps in conventional schooling systems.

For example, Masege used to discuss things that mainstream sex education curricula paid little attention to or completely disregarded. Much of her content with the LGBTQ+ population, and issues of consent and possible arousal is central to her content, bringing information to followers in a non-judgmental supportive space. In the video *Top 5 Things They Wish They Knew About Sex in High School*, Masege gives straight, pragmatic advice for tips taken directly from questions submitted when people mentioned what was lacking in old-fashioned sex education at school. Qualitative feedback gleaned from her streams and fed back through her fans indicates educational value for her content, as comments were usually conveyed through gratitude for the insights. For example, one of the followers commented: "I never knew so much about bisexuality until I watched your videos. You opened my eyes to really understand myself." Such testimony points to how Masege's content is considered to fill critical gaps in formal education around matters of sexual identity and orientation.

Where Dr Zenda relies on her medical knowledge to do informative authoritative pieces and talks from a clinical point of view about sexual health, topics will range from contraception and menstrual health to common myths which tend to mislead many people. For instance, in the video titled *Myths About Sex*, Dr Zenda systematically breaks down the many mythologies that leave people confused and misinformed. Some reactions from the followers explain that this content is indeed exceptionally awesome for the simplification of complicated medical issues. For instance, one of her followers comments: “I have always been confused about contraception, but you clarify everything in your videos. Thank you for helping us understand!” Such a reaction explains how a central role Dr Zenda plays in making sexual health issues not mystic, hence empowering her audience to make informed choices.

More than filling up those gigantic gaps in education, they are playing a big part in getting involved with marginalised communities. Masege and Dr Zenda have incorporated themes in their content work touching on LGBTQ+ issues, race issues, and socio-economically disadvantaged groups. This makes them take education to a broad audience while democratising access to much-needed sexual health information.

6.5.2 Shifting attitudes towards sex and sexuality

Apart from edifying knowledge, influencing icons such as Masege and Dr Zenda have significantly impacted attitudes in society regarding matters of sex and sexuality. Their contents educate but leave a challenge regarding most of the existing norms and stigmas associated with sexual and reproductive health. This is clear in how they tackle matters that many consider taboo or sensitive.

For instance, the issues that Masege raises on sexual identity challenge the larger prevailing opinion, as her followers embrace her identity without judgment. At one point in a bid to write about what she will reveal in reference to finding her sexual identification, Masege made reference to a personal story that most of her followers can easily relate to,. Such content, full of authenticity and vulnerability, builds a relationship and earns their trust – a sure way of challenging orthodox social and cultural values. Most comments from her followers show such impacts. Many comment that Masege’s openness has helped them to better understand themselves and accept themselves as they are. One said, “Your story affected me. I have been trying in vain to find my sexual identity for years; I feel less lonely with your videos.”

And as far as menstrual health and contraception issues are concerned, Dr Zenda is likely to reduce stigma in women's health quite significantly. As she addresses more information in a factual manner and an accessible way, she de-stigmatises the discussion on a topic usually considered shameful or embarrassing. One such video is *What Isn't Normal for a Period*, where she lists what medical concerns should be checked for, starting with being proactively healthy. Comments from her audience show that this kind of production is simple but makes women informed and empowered to take charge of their reproductive health. "I have always been too ashamed talking about my period problems; your video made me feel confident enough to see a doctor finally", one viewer noted. They talk about their opinions concerning current affairs, and provide relevant answers to questions and are frequently video streaming; hence, they never end a talk that might one day mature into further research and discussions regarding sexual health issues. The interaction is crucial in the formation of a community where members feel valued concerning the continuation of talking about issues that without such talk might have not been disclosed.

6.5.3 Examples of follower testimonies and feedback indicating learning outcomes

Other than the direct evidence from the bodies regulating social media influencers, the most spectacular evidence comes from the testimonies and feedback of the followers. Personal accounts qualify how influencers such as Khumo Masege and Dr Zenda produce knowledge and attitudes relating to sex and sexuality. The next section covers some illustrations of follower testimonies and feedback as a proof of educational outcomes behind their contents.

6.5.3.1 Testimonies from Khumo Masege's followers

Content developed by Masege, who places great significance on sexual identity, mental health, and LGBTQ+ issues, has been extensively associated with her followers, who are most appreciative of the enlightenment and guidance they receive through her videos. An obvious example comes from one of the followers who commented on one of the videos describing Masege's experience in figuring out her sexual identity:

"I've fought with sexual orientation all my life and was so lonely. Your videos are what make me feel not alone in all this. You gave me the encouragement to research and explore my own self without any judgment."

This testimony is one of the significant takeaways from this whole experience: a self-acceptance and empowering ability to embrace oneself. Personal stories of Masege and the willing attitude to share her story, inform and create a facilitating setting in which the followers feel heard and understood.

After watching Masege's video about the misconceptions on bisexuality, another follower commented in an interview:

“I had all sorts of misconceptions about bisexuality before I saw your video. I didn't even know that they were wrong. You've opened my eyes to the fact that it is not only okay but perfectly valid and accepted to be attracted to more than one gender at once.”

Such evidence of feedback shows how the influencer strives to debunk myths and gives real, relatable facts that directly affect how her followers view and interpret sexual orientation.

Some very interesting feedback was received from Masege concerning mental health, especially when she discussed childhood trauma and healing of emotions. A follower commented on the video where Masege talked about experiences concerning childhood trauma:

“Thanks for discussing issues with childhood trauma. I was never able to explain what I experienced in the past, but your video helped me understand how I feel and consequently why I need to get some help. You helped me get pushed toward therapy.”

This testimonial is a paradigm of a learning experience: one will be honest about the need for mental health services and subsequently make the correct steps to seek intervention. Honest conversations Masege has with her audience about her mental health reflections not only teach but also empower her followers on controlling their emotional well-being.

6.5.3.2 Testimonies from Dr Zenda's Followers

With medical knowledge that forms the basis of her sex education approach, Dr Zenda has been able to overcome most information deficits and misconceptions among most of her viewers. Most of the videos from the physician attract feedback that indicates considerable knowledge change as well as an attitude shift towards sexual and reproductive health.

Q: Why do you think he thinks AIDS occurs through rape?

A: The answer lies in his belief that “rape involves sex with an AIDS carrier”.

“I used to believe much of these myths, and that influences how I think about sex and even myself. All along, your explanations were very clear and informative, and I now find myself much more confident in my knowledge and less anxious about my sexual health.”

This is a strong statement to the educative value of the content of Dr Zenda in deconstructing myths and giving people a healthier, better-informed view of sexual health. In the learning outcomes of her work, this specific shift – from worry and confusion to confidence and clarity – is particularly dramatic.

Another viewer says they recall seeing a menstrual health video in which Dr Zenda explains what might worry someone sufficiently to bring them to medical care:

“I probably learnt that pains in periods are never something to be put up with; after watching this video by you, I realised that what I was experiencing wasn’t normal and hence I ought to see a doctor. Thanks for advising me on this; at least this helped me get serious about my health.”

This learner outcome is observable because the follower intends to visit a doctor after establishing that her symptoms are not ordinary. Dr Zenda’s content is informative, provoking action in the lives of her followers to put their health first.

Dr Zenda’s video *Contraception* has changed the life of a follower who commented,

“I was all confused about contraceptives. I never really knew, sometimes not even trying what would work for me. Now your video really helped break it all down for me, and I’m very confident about my choices for the future. Thanks to you for taking this all so complicated to make it rather easy.”

This feedback addresses the influence that individuals such as Dr Zenda have on the demystification of complex subjects, empowering followers to make informed decisions about their reproductive health. Clear accessible explanations form some of the most important outcomes of her educational effort.

6.5.4 Fostering a community of learning and support

Masege and Dr Zenda are very active towards community building, and this can be seen in the comments on the videos with most of the followers sharing experiences and supporting each

other to foster a harmonious learning environment. It is in this sense that she builds a community around her platform that enhances the educational value of the content as the followers learn both from the influencer and from each other.

For example, one of the followers responded to the *Coming Out as Gay Later in Life* video that Masege posted later in life, saying:

“I came out in my 40s, and it was the hardest thing I’ve ever done. Seeing your video made me realise it’s never too late to be true to yourself. I want to tell everybody in this community to stick strong and remember you’re not alone.”

This particular comment gives a personal mileage for the content put in by Masege in that it adds to a bigger community conversation that develops the messages of acceptance and resilience.

In similar fashion, on the comments of a video by Dr Zenda about proper use of contraceptives, most followers who support her usually change advice and share experiences.

“I have had the same problem with the pill, and switching to an IUD was one of the best decisions I have ever made. Thanks to Dr Zenda for explaining the options so well...I wish I had known this sooner!”

All such interactions evince how the educationally viable content prompted further learning and further support amongst followers, ultimately adding up to increase overall engagement.

6.5.5 Role of influencers in filling gaps left by traditional sex education in South Africa

Traditional sex education in South Africa has been criticised on a wide range of issues. For example, the curriculum fails to fulfill the changing needs of adolescents. Its scope is rather narrow in scope, constantly orienting toward the biological aspect of sex that in many cases negates social, emotional, and psychological aspects of sexuality. There would be hardly any discussions on an issue as basic as LGBTQ+ sensitisation, consent, and sexual pleasure, very significantly leaving out areas of tremendous importance for student education.

Speaking on this role, Dr Zenda remarked during our interview, “I look at for example I’m very cognisant that the book that I’ve written is more educational than sort of like a bookshop kind of book and we’re doing so you know, organisations, companies, and we’re like, everybody buy a book for a girl, because I think it kind of bridges that gap with the current school curriculum. But I was like, I’m not going to wait for government. But even so, as I’m saying is that we still use our social media platforms to promote this kind of work as well, which is kind of more on the academic side”.

Such influencers as Masege, Dr Zenda and many others make these gaps bridgeable. For example, the existing platforms tend to get information close to the realities and needs of the youths. Influencers have been able to fill such gaps in sexual education by allowing discussion of topics that are considered vital but about which it is taboo to speak out on them. This is something of high interest to the youth.

6.6 Broader contextual and comparative analysis

6.6.1 Challenges faced by TikTok sex educators

Through this kind of learning on TikTok, sex education is giving unprecedented opportunities to reach the masses, but there are also some critical challenges for educators. The questions that arise while addressing misinformation and negative feedback include censorship and follow-up community guidelines, with a balance between professional credibility and the trends of the platform and the audience’s expectations. In this regard, Masege said “I can’t say that my page is a safe space because I can’t control who comments on my things. And so I think like, if I post something in good faith and then somebody says something terrible and then a follower sees it, who relies on this page as a safe space, it can be unnecessarily harmful to them. So I think like in terms of safety, I would say that’s a limitation, but also that like people will take what I say as applicable to them and absolute fact when in reality, like, I can’t tell you what’s applicable to you unless you are my client.”

6.6.2 Censorship and community guidelines on TikTok

As stated above, one of the biggest challenges sex educators face with using TikTok is its strict policies on censorship and community guidelines. Since it is a social media application in nearly every country around the globe, TikTok has put up strict content moderation practices

to ensure its environment is safe and adequately family-friendly. The result has been a place that often handicaps how sexual health information will be distributed, regardless of whether this is done in an educational manner or not. For instance, both Dr Zenda and Masege have reported that content could not be flagged or removed for suspected violations of these rules.

Undoubtedly, a contentious point of irritation that Dr Zenda mentioned in an interview was that the reason videos on topics such as menstrual health or contraception were taken down was because they were “just so clinical and informative”. She continued, “It’s really discouraging when you are doing these videos to educate women about their body parts, and it gets taken down while the less educational stuff is still sitting there.” It is possible to gather this from articles that analyse social media sites. It seems that free speech platforms such as TikTok have been selling free speech, but they have algorithms censoring sensitive or inappropriate content

A second factor that adds complexity is how TikTok moderates their platform. For instance, Masege said there appears to be a pattern where videos she produced talking about issues facing the LGBTQ+ community ended up being flagged, but videos by other creators were not. “It feels like walking on eggshells—you never know which video will be flagged,” she said. This variability makes it complicated to plan and deliver content. And this ambiguity forces educators to water down their messages or use veiled terms and euphemisms, which defeats their very purpose.

Algorithms meant to govern the content are judgmental and cannot distinguish between bad content and that which has educative value. Under this scenario, essential discourses on sexual health and rights become silenced inadvertently (Gillespie et al., 2018). This is supplemented by a call to openness in decision-making which sows seeds of uncertainty and confusion in the minds of the teaching fraternity who always find themselves treading a narrow line in an attempt to avoid hefty penalties.

6.6.3 Dealing with misinformation and negative feedback

Another huge problem with TikTok sex educators is fighting against false information and negative feedback. The fact that TikTok is the users’ content site makes the source inherently full of myths, misconceptions, and sometimes downright untruths about sex and health, which go viral way too often before educators can catch them.

Dr Zenda often dispels a lot of myths and misconceptions in sexual and reproductive health. “In trying to correct one little white lie,” she’ll often end up playing a game of whack-a-mole as correcting one can lead to a queue of others popping up. Indeed, in one of the most-viewed videos, *Myths about Sex*, she speaks about the myth that food can alter the smell of vaginal secretions. The comment section, however, showed that widespread beliefs in these myths existed even when evidence-based information was readily available.

Such information usually seems to be more believable than fact when presented through social media pages because the content is emotive and thus self-perpetuating within echo chambers (Pennycook and Rand, 2019). Moreover, it becomes very challenging to keep up with such a rate of spread on TikTok because of the way its algorithm functions, favouring popularity over everything else. Dr Zenda have therefore had to endure hostile responses in those situations where they try to challenge such widely held beliefs, including disdainful or even belligerent remarks.

This is especially challenging in the event of trolling or harassment. For example, Masege said that she often publishes content based on LGBTQ+ issues, which often results in her receiving a lot of homophobic messages commenting on her content. “The negativity can be overwhelming at times,” she added, “especially when it is directed at something as personal as one’s identity.” However, this underlines the fact that this is only one form of education that is being done. Wider research should be undertaken that demonstrates how online harassment is a broader subject for content creators, especially those who tackle sensitive or otherwise sensitive topics.

Such negativity calls for resilience and strategizing. Like Masege, many educators use negative comments constructively whenever possible and make them a teachable moment. However, constant criticism bears an emotional toll that may make it hard for some educators to keep up with engagement with followers or to make them avoid certain topics. While such a strategy would definitely maintain the mental health of the educator, it would limit the depth and breadth of education they can provide.

6.6.4 Balancing professional credibility with social media trends and audience expectations

Sex education experts particularly are facing a different challenge while trying to give their professional integrity due to the attempt to trend according to the platform and cater for the imagined audience that might increase their popularity. Of course, above all else, for most of the content that may be seen on TikTok, they resort to the viral challenges, using popular music and a certain type of editing, which usually becomes a foundation upon which everything else stands.

“There is a fine line between being informative and entertaining. I want my content to be informative but nobody will sit there and watch it if it’s too dry.” (Masege, 2023). This too is justified through the findings of Bouvier and Rasmussen (2020), which indicates that social media content should be engaging as well as informative in nature at the same time, and in most purposes, it is engagement that overshadows the volume of information disclosed, especially within the traditional short fast-paced TikTok video.

Masege shares personal experiences that can be said to align with her identity as well as mental health. She talks about facing her problems. While these problems help Masege to reach out to her audience through self-experience and prevailing trends, they make her content seem serious or authoritative as dictated by how it must be said. “I constantly think about how to be as relevant as possible but still respected,” she said. This works somewhat as a balancing mechanism in the assessment of credibility, especially on matters such as sexual health, which call for so much trust.

What the literature on social media influencers would say is that the acceptability of contributions by educators does not arise directly from the truthfulness of the information but from their ability to hold the attention of the target reader (Bouvier and Rasmussen, 2020). This is what pits professionals such as Dr Zenda and Masege against the informal yet often irreverent tone which must accompany very complex information.

To this end, users of TikTok expectations sometimes became a prerequisite. For example, fans will want to have the blogs or updates on social media as often as possible, expect immediate response to their commentaries and any other prerequisite demands that come along with them. Such demands are very time-consuming and emotionally exhausting to teachers in particular.

Another challenge is be that of providing better researched material while at the same time being accurate, especially to educators who have other professional engagements beyond social media circles. Such expectations of continuous involvement can also compromise the integrity of content, possibly when educators are inclined to write more but be less profound in their musings.

6.6.5 Navigating and challenging traditional narratives

Cultural and social myths, especially those related to sex and sexuality, are very deep-rooted with the interests of patriarchy, heteronormativity, and cis-normativity. These myths always fix rigid gender roles, prejudice stigmatises non-normative sexual identities and behaviours, and some of the prevailing myths have been in relation to sexual health. Alternative discourses are offered by players such as TikTok influencers Dr Zenda and Masege, who are both inculcated with elements of diversity as they go about their critical engagements on sexual health.

Much of Dr Zenda's content brings to the forefront an argument against the stigma attached to women's reproductive health. As she continues attempting to destroy the myths pertaining to vaginal odour, she says in one of her videos, "Your body is not dirty for being human." We have to unlearn what we learned, generationally. This statement says it is a move to actively engage with the ethos that has dominated the cultural conversation for centuries over female sexuality and health. It is in line with Foucault's observation that power is exercised through discourse in terms of what is true and what is wrong or normal.

Masege, on the other hand, uses her videos to disrupt some assumptions based on heteronormative attitudes and raise awareness about LGBTQ+ identities. Talking about the challenges of coming out in more mature life, she repeats that societal forces often force people into heteronormative lives, and opines, "We live in a world that tells us who we should be, rather than allowing us to discover who we are." By foregrounding her own experiences and that of her community, Masege carves a counter-narrative that questions the dominant heteronormative discourses and legitimates non-heteronormative experiences.

The efforts of power resistance theory by Foucault are echoed by Dr Zenda and Masege in contesting the mainstream narratives. In a statement by Foucault (1990), where power exists there is resistance, and making content that questions and deconstructs the dominant discourses

shows these influencers as performing acts of resistance. Their work speaks to how, in spaces such as TikTok, social media platforms could be a site of subversion and reconfiguration of power relations that frame public understandings of sex and sexuality.

6.7 Advantages and limitations of digital platforms in sex education

Digital channels such as TikTok allow one to reach everybody of every age, connect the inhabitants of this world with heterogeneous interests, and particularly they are engaging and appeal to the younger crowd. But there are the potential pitfalls of mis- and disinformation, algorithms, and privacy and data security.

6.7.1 Advantages

Probably, the most significant plus factor of digital platforms with regard to sex education is that they are easily accessible. Given the use of smartphones in South Africa, they are predominantly utilised by young people, who use TikTok to a very great extent. This are people who otherwise would not have formally accessed material on this topic or may be looking for such information through online media. “Digital platforms have democratised access to information, and young people can now search for and interact with information relevant to their needs and interests” (Fowler et al., 2022:741).

The other virtue of online platforms is interactivity, and through TikTok users can immediately interact with the author of the content by posing a question that might elicit a timeous reply. This allows for an interactive way of learning with an opportunity to clarify and consult over some issues on matters concerning a user. For example, in one of the videos by Dr Zenda HIV/AIDS prevention, one of her followers asked how one would deliver the message to someone to get tested for HIV. In this case, Dr Zenda replied with another follow-up video full of useful tips, reassuring the individual and showing the potential of the platform as an interactive and person-to-person education system (TikTok, @dr.gynae, 2024).

6.7.2 Limitations

Although there are benefits offered by digital platforms, as mentioned above, there are also limitations. TikTok’s brevity can lead to oversimplification of complex issues, while its

algorithms and lack of stringent content moderation may amplify misinformation. Privacy and security concerns remain pressing, with users hesitant to engage with sensitive topics openly due to fear of exposure. Privacy concerns must be addressed to foster greater engagement. Initiatives such as anonymous user accounts or enhanced privacy settings could encourage users to interact with sensitive content without fear of judgment or exposure. A comment on one of Masege's videos encapsulated this concern: "I fear who sees my likes and comments on such sensitive topics."

One main constraint is the promotion of misinformation. It often chooses sensational content or false information promoted on the platform, which forces users to spread wrong information about sexual health. On this issue, @dr.gynae stated: "It is irritating sometimes to see how those myths that needed a silent burial on contraception or STIs are going viral, while the factual information bides their time to reach prominence" (Zenda, 2024). This really underpins the issue of digital literacy and the need for a critical eye on how online users navigate the large amounts of unconfirmed information freely and anonymously offered in cyberspace.

Another constraint is that of echo chambers enforced by algorithms. Algorithms create zones where only content users' views and preferences are aligned, and thus they can foster misconceptions and augment their chances for less exposure to diverse views. Content tends to be overly simplistic – leading to oversimplification of complex issues – and since a social networking site always demands interaction in terms of its use, the subject of most significant concern in terms of privacy and data security becomes a concern for younger users. Such activities in collecting data by TikTok especially have been deemed wrong in the way some of the information used from the users is dealt with. This is crucial, especially dealing with matters related to sexual health education, whereby a matter of privacy has so much to do.

6.8 Conclusion

This chapter has examined the textual and multimodal dimensions of TikTok content produced by Khumo Masege (@kmhealingagain) and Dr Zenda (@dr.gynae), revealing their unique yet complementary approaches to sex education. Through a detailed analysis of captions, hashtags, on-screen text, and other visual and narrative techniques, it is evident that these influencers utilise the affordances of TikTok to maximise accessibility, engagement, and educational impact.

Masege’s emotionally resonant storytelling, combined with her accessible language and personal narratives, creates a safe and inclusive space for discussions on topics such as LGBTQ+ issues, mental health, and trauma. Dr Zenda’s approach, rooted in medical expertise and clarity, ensures accurate, evidence-based information, presented in a way that is both digestible and authoritative. Together, their use of multimodal elements—ranging from graphics and infographics to captions and hashtags—not only enhances their content’s reach but also fosters a sense of trust and community among their audiences.

The chapter has also highlighted the challenges of delivering comprehensive sex education on TikTok, including the limitations of the platform’s brevity and potential oversimplification of complex issues. Despite these constraints, Masege and Dr Zenda demonstrate how digital platforms can transcend traditional boundaries of sex education by addressing topics often ignored in formal curricula and reaching diverse audiences in innovative ways.

Chapter 7: Conclusion

7.1 Summary of key findings

This study has highlighted the growing significance of TikTok as a platform for delivering sex education, particularly in a South African context. The research focused on two prominent influencers, Dr Mpume Zenda (@dr.gynae) and Khumo Masege (@kmhealingagain), and examined how their approaches contribute to advancing sexual health education in ways that traditional media often fails to achieve.

In doing so, the study evaluated the social role that TikTok can play in comparison with media-based edutainment on sexual health as well as its potential and limitations. Dr Zenda and Khumo Masege’s content on sexual health appears to be much more personal and interactive as well as culturally relevant than traditional media. The brief, accessible, responsive content, popular format short form video speaks to youth in understandable ways: as Dr Gynae says, “This makes it easier for my followers to understand and apply this knowledge in their daily lives”.

7.1.1 TikTok as a platform for interactive and personalised learning

A key finding was TikTok’s capacity to deliver sex education in a manner that feels personal, relatable, and culturally relevant. The platform’s format—short videos combined with dynamic visuals and audio—makes it easier to break down complex topics into simple, engaging messages. Both Dr Zenda and Masege effectively use TikTok’s interactive features, such as responding to comments, hosting live QandA sessions, and leveraging on-screen text, to engage with their audiences directly. This interactivity not only makes learning accessible but also fosters a sense of community and dialogue that traditional media struggles to replicate.

7.1.2 Expertise and storytelling as complementary strengths

The two influencers offer distinct yet complementary strengths in their content. Dr Zenda draws on her professional expertise as a medical practitioner, delivering accurate, evidence-based information on topics such as contraception and menstrual health. Her professional background

enhances her credibility, making her a trusted voice for viewers seeking reliable advice. In contrast, Masege employs storytelling to share personal experiences, particularly around LGBTQ+ identities and mental health. Her openness and vulnerability resonate deeply with followers, creating a space where viewers feel understood and encouraged to seek guidance. This blend of professional expertise and personal storytelling enriches the educational value of their content, addressing both factual and emotional dimensions of sexual health.

7.1.3 Filling gaps in traditional sex education

The study underscored how TikTok addresses critical gaps left by traditional sex education. In South Africa, Comprehensive Sexuality Education (CSE) often encounters cultural resistance and institutional challenges, leaving many young people with unanswered questions. TikTok creators such as Dr Zenda and Masege fill these voids by offering content that is inclusive, accessible, and culturally sensitive. Topics such as LGBTQ+ issues, consent, and mental health—often marginalised or inadequately covered in formal curricula—are central to their work. By normalising these conversations, the influencers empower their followers to make informed decisions and challenge prevailing stigmas.

7.1.4 Challenges and limitations of the platform

Despite its potential, TikTok is not without its limitations. The platform's short-form video format can lead to oversimplification, making it difficult to address nuanced topics comprehensively. Furthermore, TikTok's algorithm often favours sensational content, which can amplify misinformation at the expense of educational material. Both influencers expressed frustration with this dynamic, noting the challenges of countering widespread myths while competing with viral but inaccurate videos.

Privacy concerns also emerged as a significant issue. Many users hesitate to engage openly with sensitive content for fear of exposure, with comments such as, "I worry about who can see my interactions with this content," illustrating the need for stronger privacy protection. This highlights an ongoing tension between accessibility and the stigma surrounding discussions of sexual health in digital spaces.

7.1.5 Community engagement and impact

A standout finding was the importance of community engagement in enhancing the effectiveness of TikTok-based sex education. Both Dr Zenda and Masege have built trust and fostered supportive environments through empathetic responses and interactive discussions. Followers often share personal stories or ask deeply personal questions, which the influencers address with care and respect. This approach not only increases the educational value of their content but also strengthens the sense of connection within their communities. By engaging directly with their audience, the influencers ensure that their content remains relevant and responsive to their followers' needs.

7.1.6 Implications for future sex education initiatives in South Africa

These findings are of prime importance for sex education in the future, at least in South Africa. Digital platforms such as TikTok offer an unparalleled opportunity to engage with younger audiences, whose preferences and behaviours increasingly diverge from traditional media consumption. The elements of immediacy and interactivity that characterise TikTok makes it even more relevant and impactful because it enables real-time answers for the concerns and questions that young people put forward, enhancing the relevance and impact of the educational content.

Nevertheless, the risks associated with misinformation on digital platforms cannot be ignored. As Dr Zenda lamented, "It is frustrating to see videos spread like wildfire regarding myths on contraceptives or STIs, while accurate information struggles to gain traction." Ensuring the reliability of content requires collaboration between trusted content creators and public health organisations. Verified creators such as Dr Zenda and Khumo Masege exemplify the potential for partnerships to mitigate misinformation and deliver evidence-based knowledge to a wider audience.

7.2 Recommendations for leveraging digital platforms for effective sex education

Recommendations for sex education by TikTok include the following.

1. Relationship with trustable influencer: collaborate with trustworthy influencers who are aware of issues and can pass on the right information regarding sexual health; reliable and knowledgeable TikTokers who have acquired an understanding with their audience to communicate complex topics like Dr Kwanele and Khumo Masege.

2. Digital literacy: TikTok enables adolescent learners to engage critically with the types of information available on the internet. It will enable discrimination between credible sources and unreliable and less-informed resources or poor misclassifications. The development of digital literacy makes users capable of making informed judgments about their sexual health. According to Fowler et al. (2022), digital literacy is the key to guide teens on how to separate truthful information on the internet from the sea of misinformation.

3. Algorithmic transparency and content moderation: Algorithmic transparency and effective content moderation are essential to ensure that TikTok provides reliable and educational content. Greater transparency about how TikTok's algorithm prioritises and promotes content would help users better understand why they see specific videos, allowing them to make more informed decisions about the information they engage with. TikTok should strengthen its content moderation processes to identify and remove sensational, misleading, or false information about sexual health. These steps are crucial to creating a safer and more trustworthy platform for disseminating accurate sexual health education.

4. Measures towards privacy and security: Information about the user should be kept confidential; therefore, measures towards privacy and security should be enhanced, particularly concerning users' sexual well-being. This can be enhanced by the creation of anonymous accounts or privacy settings such that a user can access some content with no exposure risk.

5. Hybridisation with traditional media: While digital platforms such as TikTok are an excellent offering, they should not be considered in isolation from other media. Incorporating TikTok content with traditional media initiatives would ensure that an extended and diversified audience group can obtain sexual health education and would reduce inequality amongst different sections of the audience.

Both traditional and social media have for some time played a central role in enlightening people on health issues. An inclusive approach towards mediated sex education might be conceived through the proper leveraging of the strengths of traditional and electronic media, along with alliances and connections formed with influential leaders who can be trusted and

who consider the needs of the youth of today and have the capacity to address the complex realities of sexual health in contemporary times. This would provide a springboard for further studies and efforts directed toward enhancing the use of digital venues for public health education so that all young people would receive suitable and relevant information on sexual health. In this context, the implications of TikTok for the implementation of CSE in schools warrant careful consideration.

TikTok's ability to present complex and often stigmatised topics in engaging and accessible formats offers significant opportunities to supplement school-based CSE programmes. By fostering immediacy, relatability, and interactivity, TikTok has the potential to bridge gaps left by conventional curricula, particularly in reaching young people who might otherwise find classroom discussions alienating or inaccessible. However, the critical nature of the content presented on TikTok—shaped by the personal experiences and perspectives of influencers such as Dr Zenda and Khumo Masege—must be acknowledged. This content is not neutral; it carries the power to challenge entrenched norms, question societal taboos, and promote social justice. For example, by addressing issues such as consent, LGBTQ+ representation, and reproductive rights, TikTok can act as a counterbalance to heteronormative and patriarchal biases often embedded within traditional educational frameworks.

The criticality of TikTok content lies in its ability to do more than merely disseminate information. It constructs new discourses that challenge oppressive structures and empower young people to advocate for their own sexual health and rights. This aligns with the transformative goals of CSE, which seek not only to impart knowledge but also to cultivate attitudes and values that promote gender equality, respect for diversity, and informed decision-making. Integrating the interactive and socially engaged aspects of TikTok into CSE implementation could help modernise the curriculum, making it more resonant and impactful for today's youth.

However, such integration requires robust strategies to ensure that the content aligns with evidence-based standards and ethical considerations. TikTok's platform algorithms, content moderation, and the potential for misinformation remain challenges that must be addressed to safeguard the integrity of sex education delivered through digital means. Furthermore, the social justice implications of this approach demand attention. As TikTok amplifies marginalised voices and fosters inclusive narratives, it also highlights the disparities in access

to digital platforms and digital literacy, raising questions about equity in the implementation of CSE.

Ultimately, TikTok's role in supporting CSE demonstrates the transformative potential of digital media when leveraged thoughtfully. It offers a dynamic space for young people to engage with critical content that addresses their lived realities while advocating for broader societal change. These intersections of education, media, and social justice provide a fertile ground for further research and innovation in advancing comprehensive and inclusive approaches to sexual health education.

7.3 Conclusion

This research underscores the growing influence of TikTok in shaping contemporary sex education, particularly among South Africa's youth. While digital platforms provide opportunities to engage with new audiences and address gaps in traditional curricula, they also pose challenges related to misinformation, privacy, and inclusivity. By combining the strengths of digital and traditional media, fostering collaborations with credible influencers, and prioritising user safety and literacy, sex education can be made more effective and equitable.

As the findings of this study suggest, the success of digital sex education initiatives hinges on their ability to adapt to the evolving needs of today's youth while navigating the complex realities of the digital age. Future research and practice should build on this foundation, exploring innovative strategies to maximise the potential of platforms such as TikTok in promoting public health education that is accessible, reliable, and impactful.

Appendices

Appendix A



Rhodes University Human Research Ethics Committee
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22 July 2024

Ms. Bianca Mclean

Email: g19m0609@campus.ru.ac.za

Review Reference: 2024-7411-8895

Dear Ms. Bianca Mclean,

Re: Human ethics renewal application: Navigating taboos and tension: South African medical professionals construction of sex education on TikTok

Researcher: Ms. Bianca Mclean

Supervisor(s): Ms. Kayla Roux, Dr Priscilla Boshoff

This letter confirms that the above Annual Report has been reviewed and **APPROVED** by the Rhodes University Human Research Ethics Committee (RU-HREC). Your Approval number is: 2024-7411-8895

Approval has been granted for 1 year. An annual progress report will be required in order to renew approval for an additional period.

Please ensure that the Human Research Ethics Committee is notified should any substantive change(s) be made, for whatever reason, during the research process. This includes changes in investigators. Please also ensure that a brief report is submitted to the ethics committee on the completion of the research. The purpose of this report is to indicate whether the research was conducted successfully, if any aspects could not be completed, or if any problems arose that the Human Research Ethics Committee should be aware of. If a thesis or dissertation arising from this research is submitted to the library's electronic theses and dissertations (ETD) repository, please notify the committee of the date of submission and/or any reference or cataloguing number allocated.

Sincerely,

Dr Janet Hayward

Chair: Rhodes University Human Research Ethics Committee, RU-HREC

cc: Ethics Coordinator

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