

Major Issues of Contention in the Implementation of Comprehensive Sexuality Education (CSE) to Learners with Disabilities in Zambia

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Abstract

The educational curriculum of Zambia has since 2013 embraced the teaching of Comprehensive Sexuality Education (CSE) to learners of diverse backgrounds. Learners with disabilities are required to access the general curriculum, including the CSE component. However, at the time of this study in 2020, it was not known how the CSE component of the curriculum was being implemented to learners with disabilities in special and inclusive schools and what obstacles act as a hindrance to CSE implementation to learners with disabilities. To cover this gap, we took a qualitative approach to study the obstacles to the acquisition of comprehensive sexuality education skills among learners with disabilities from 2020 in Zambia's five provinces. Education key informants from the Ministry of General education, curriculum development and higher education institutions, and parents, learners with and without disabilities participated in the study. Data were collected between September and October 2020. Data was analysed thematically. The study established that there were several barriers to the acquisition of CSE skills among learners with disabilities with included traditional and cultural barriers, contradictory educational and local policies and lack of support for CSE requisites among others. However, there is a strong desire among learners to learn CSE in schools. We recommend capacity building of teachers on inclusive pedagogy that could break through cultural barriers; provision of appropriate teaching and learning materials and digital inclusion to enhance CSE curricula access to learners and young people with disability; and wider stakeholder engagement especially parents to increase programme support and consistency in sensitisation messages for the benefit of learners and young people living with disabilities.

Key words: *Disability, Comprehensive Sexuality Education, Sexual Reproductive Health, Inclusive Education*

Introduction

The success of the curriculum is largely dependent on the perceptions stakeholders have towards the nature of the curriculum under implementation. Negative perceptions usually derail curriculum implementation and most likely such a curriculum does not yield the intended outcomes. Zambia introduced the comprehensive sexuality curriculum through the 2013 curriculum framework to address behavioural issues that relate to early pregnancies, sexual abuse and other vices that impede learners' progress in education. According to UNESCO, (2017), CSE is a curriculum issue

covering sexual and reproductive health issues, which may include sexual and reproductive anatomy and physiology; puberty and menstruation; reproduction contraception, pregnancy and childbirth; and STIs, including HIV and AIDS taught over a lengthened period of time or throughout ones education rather than a one-off intervention. The term comprehensive is used to amplify the breadth and depth of topics taught and the consistency by which the content is delivered to learners over time. CSE aims to impart knowledge and skills for health and well-being of learners regarding their sexuality, human rights, healthy and respectful family life and interpersonal relationship, personal and shared values, cultural and social norms, gender equality, non-discrimination, sexual behaviour, violence and gender-based violence (GBV), consent and bodily integrity, sexual abuse and harmful practices such as child, early and forced marriage) and female genital mutilation/cutting (UNESCO, 2017). Thus, it prepares the child to fit in a society where both the good and bad exists. In Zambia, the Ministry of General Education recognises CSE as an avenue for equipping learners with knowledge, skills, values, and positive attitudes about their reproductive health and sexuality for their benefit and that of society (MESVTEE, 2013). The curriculum framework of 2013 emphasises that Reproductive Health is essential in helping learners appreciate the functions of their bodies and knowing how to handle issues of sexuality and implores on learning institutions to strive towards ensuring that CSE forms an integral part of curricula at various levels of education: primary, secondary and teacher training institutions. The CSE curriculum framework shows topics such as changes at puberty, managing menstrual cycle, Social: desire to be more independent, be with friends, attention to appearance, romantic feelings/dating, Emotional: mood changes Physical (internal): Menstruation, ejaculation, Enlargement of testicles, breasts in girls, hair, underarm odour, acne, Variations in the onset of puberty and length of the menstrual cycle at grades 5,6 and 7 (Ministry of Education, Science, Vocational Training and Early Education, 2014). Whether the topics should be taught at the levels there in requires the guidance of the contributions of educational psychologists in curriculum development.

However, in 2020, there emerged an up-roll against CSE by the Zambian Clergy, Traditional leaders (Lusaka times, 2020) and some parents, indicative of lack of engagement in the CSE curriculum development. For learners with disabilities, lack of engaging stakeholders on their well-fair is denying them their mouthpiece. Every child regardless of disability has the right to information. This study established that CSE in general is not a new phenomenon to Zambia and its traditional society because a lot of its content has been taught before in science subjects and that traditional societies also teach girls and boys through various traditional initiations to prepare them for adult life when they reach puberty. The concern raised in this study is that of age-appropriate content delivered to learners at primary school level. Parents in this study, like Chief Chitimukulu's (Lusaka Times 2020) suggest that the Zambian traditional community is not necessarily against CSE but the age at which it is

introduced. To some extent, this suggests that consensus needs to be reached to address the concerns by parents, religious leaders and the traditional leadership.

Statement of A Problem

A limited number of studies have been conducted in Zambia on the implementation of CSE in schools. A study by Nyimbili, Mainza, Mumba, & Katunansa (2019) on the involvement of teachers and parents in providing CSE and found that parents supported the idea of teaching children CSE although the responsibility to teach CSE was given to teachers as parents found CSE too sensitive to teach their children at home. The study further established that teachers and parents faced cultural barriers to teach sex-related aspects such as pregnancies, childbirth and sex itself to young children. Zulu, Blystad, Marte - Haaland., Michelo & Haukanes's, (2019) conducted a study exploring how teachers perceived the CSE curriculum and the practice of discretion when implementing the CSE in mid-level schools in Nyimba district in Zambia. The study established that teachers used discretionary approach in teaching CSE in rural Zambia, choosing what they thought was to be taught and leaving what they felt they were uncomfortable with. Cultural limitations constrained teachers teaching of CSE leading to holding-back information from learners. Owing to cultural roles as parents, teachers also felt teaching CSE to learners whom they considered as their children was against their norms. According to the study, teachers lacked guidance on the implementation of the CSE curriculum (Zulu et al 2019). Individuals with disability are more at risk of sexual abuse and exploitation, unwanted pregnancies and contracting sexually transmitted diseases such as HIV and other STIs (Treacy, Taylor & Abernathy, 2018), due to lack of access to information that enables them to make wise decisions. Learners with disabilities are the most vulnerable in terms of abuse because people take advantage of them owing to many reasons. Of all these studies conducted, none focused on learners with disabilities. The challenges of teaching CSE to learners with disabilities may not be the same as those ordinary teachers may face. A study by Chola (2020) on the implementation of CSE to learners with Visual Impairment in Mporokoso, found that learners found it difficult to discuss sexual content openly in class while teachers had challenges delivering CSE content to learners with visual impairment using ordinary teaching methods. This study delved into how stakeholders viewed as the major issues of contention implementation of CSE curriculum in special and inclusive schools in Zambia.

Objectives

The objectives of the study were to;

1. Examine stakeholders' attitudes towards the implementation of CSE to learners with special educational needs in special and inclusive schools in Zambia.

2. Describe areas of the CSE curriculum that were easier to teach.
3. Provide an in-depth description of the main themes that affect the implementation of CSE in teaching learners with disabilities.

Theoretical Framework

This study is pinned to the social learning theories; one of Levy Vygotsky – the Social Cultural Theory and Albert Bandura’s Social Learning theory. From Levy Vygotsky’s perspective, one’s culture is so much related to the way they behave. Culture is broad but it is a way of life, equally a way different groups of people bring up or rear their children. Although cognitive factors maybe at play in influencing one’s behaviour as Bandura would call it, we learn our behaviours from our social settings, by interacting and modelling the so-called significant others (David, 2019). There is no doubt that young people’s behaviour is a replica of their own societies and upbringing and if we are address issues that affect the way of life among young people, we must address our own cultural aspects which influence such behaviour. The reactions towards CSE curriculum introduction that informed the statement of the problem for this study showed resistance backed by the strong cultural values of the Zambian community. It may be true also that adolescents, who are the consumers of the CSE curriculum content may equally be affected by the cultural beliefs in the communities they live in. Thus, a study of the culture of the people to which the children being studied belong to needs to be well understood before enacting programmes that aim to control their behaviour. The acceptance or rejection of the CSE curriculum by learners may depend on how the school curriculum is structured in relation to the cultural values of the community.

Literature Review

Learners, children, and adolescents with disabilities have the right to information, information that can empower them to counter sexual abuse and other forms of violation to their right to a health living. “Lack of accurate information leaves young people with disabilities vulnerable to sexual victimization or to being viewed as a sex offender and leads to difficulty achieving the healthy relationships that many desire” (SIECUS, 2021:9). However, it appears implementing CSE is more challenging owing to various factors which include culture and religion among others (Wangamati 2020; Zulu et al, 2019; Nyimbiri et al, 2019). While acknowledging the role CSE plays in equipping young people with sexual and reproductive health information, Wangamati (2020) notes that implementing CSE is very challenging because of community resistance, CSE implementers’ rigid organisational structures and culture, inadequate financing of programmes, poorly trained and overworked instructors, and exclusion of out-of-school children and young adults. Such challenges hinder universal access to information to learners and individuals with disabilities.

The other challenge to teaching CSE in Southern Africa that Wangamati (2020) observes is the overwhelming workloads of teachers in African schools, suggesting that some community members should rather be used to offer sexuality education lessons to learners. Classroom congestion is almost a natural feature of Zambian classrooms and questions really linger how inclusive education flourishes in the Zambian school environment (Muzata, Simui, Mahlo, & Ng'uni, 2021). However, the point that Wangamati (2020) brings out, of involving community members could be worthy considering, although the barrier of cultural restrictions in teaching CSE by community members could be limiting. This, however, should not deter the use of community members for as long as research would help to learning of CSE through an integrated CSE curricula that considers indigenous African knowledge and practices on sexuality education (Wangamati; 2020). In many cases, the school curriculum is already choked. The addition of CSE makes teachers feel overburdened. Teachers need the support of parents, departments of education, fellow educators and members of the community (Reus, Hancock, Henken, & Brakel, 2015). Like any other theme where teachers give assignments, CSE themes should as well be completed through assignments by members of the community and parents. However, a study in Zambia by Zulu et al (2019) reports parents going to report teachers who give some CSE assignments to the school administration saying such topics cannot be given to parents to help their children. Barriers in communication and language surely act as barriers to the teaching of CSE, not only to learners without disabilities but also those with disabilities (Reus, Hancock, Henken, & Brakel, 2015). For learners with disabilities who depend on sign language; the deaf, signing words considered insults, though is culturally accepted by the deaf is quite restrictive to non-deaf users of sign language (Muzata, 2010).

Keogh, Stillman, Awusabo-Asare, Sidze, Monzo, Motta, et al. (2018) noted several challenges to the implementation of CSE but one challenge unique to this study that other studies did not reveal is the inadequate rating given to assessment of CSE content when CSE is integrated in other content subjects. Zambia's model of teaching CSE is through carrier subjects such as science, civic education, religious education, Home economic, and social studies, making stakeholders wonder whether the teaching of the subject is taken seriously through other content areas. UNESCO (2020) observed that teaching CSE through carrier subjects makes it receive a raw deal in terms of coverage and perpetuates its mal alignment. In a study by UNESCO (2020) teachers reported challenges of blending CSE thematic areas while at the same time attending to the diverse needs of learners with disabilities.

The available literature ponders more on the challenges. This study went further to establish acceptability of CSE by stakeholders and specifically for learners with disabilities in special and inclusive schools.

Methodology

This study adopted a qualitative approach and the phenomenological design to learn about how stakeholders experience the implementation of CSE to learners with

disabilities in Zambian special and inclusive schools. The qualitative approach was appropriate because there was need to provide an in-depth description of major contentious issues that affect the implementation of CSE in Zambian schools. The fewer studies reviewed only list the challenges facing CSE implementation without providing insight descriptions of the very contentious factors in the implementation of CSE. The study collected data from key stakeholders such as teachers, parents, learners, college lecturers and key informants from the Ministry of General education at national, provincial and district levels. Data were collected from four provinces namely Lusaka, Northwestern, Central, and Southern provinces. Interviews and focus group discussions were used as data collection methods. They were the most appropriate tools for collection of in-depth information for the study as they involved interacting with participants in the natural settings to describe their experiences in the implementation of CSE to learners with disabilities. The table below shows the distribution of participants.

Table 1: Sample distribution

	Category	Method	Number
1	College lecturers	Interviews	4
2	School teachers	Interviews	15
3	Learners	Focus Group discussions	7
4	Parents	Focus Group discussions	11
5	Key informants	Interviews	14
Total			51

There was adequate representation of participants in the study from each province. Where there appears to be disparities in terms of distribution was a result of failure to gunner participants in some provinces. Data were analysed using the framework analysis. The five-step framework analysis followed were familiarisation, identification of theme, Indexing, charting and mapping (Srivastava and Thomson, 2009). In the Familiarisation step, researchers try to understand the themes and later select the main themes in the second stage. According to Creswell (2013) familiarisation is an on-going stage from the time of interviews. While upholding ethics by explaining the purpose of the study and asking for consent, all our data was recorded on sonny mp3 audio recorders. During familiarisation, researchers listened to audio recorded interviews and transcribed them. In the same step, the main and sub themes were identified and later indexed for easy referencing. Charting was then done to marry identified content or selected ideas to the themes they belonged. A final mapping was done to come up with the real players inhibiting the effective implementation of CSE in teaching learners with disabilities.

Findings and Discussion

The findings of this study have been presented through verbatim excerpts highlighting the key areas of contention in the implementation of CSE to learners with disabilities in Zambia. Three key themes have guided the presentation namely: stakeholders' attitudes towards the implementation of CSE to learners with disabilities, areas that stakeholders found easier to teach learners and the main themes of contention in the implementation of CSE to learners with disabilities. A discussion section follows each of the main themes to help create focus on identified contestable issues. The key questions that the study answered were:

1. How do stakeholders describe their attitudes towards the implementation of CSE to learners with disabilities in Special and Inclusive schools in selected provinces?
2. What areas of CSE do stakeholders perceive as easy to deliver when teaching learners with disabilities in Special and Inclusive schools in selected provinces?
3. How do stakeholders describe the most contentious issues inhibiting the implementation of CSE to learners with disabilities in Special and Inclusive schools in selected provinces?

Stakeholders' Attitudes Towards the Implementation of CSE to Learners with Special Educational Needs in Special and Inclusive Schools in Zambia

Generally, the attitude towards the teaching of CSE was positive. Stakeholders hold similar positive views about the value of teaching CSE content to learners with disabilities. Several reasons were given for teaching CSE content to learners with disabilities.

Vulnerability

Participants felt that learners with disabilities were more vulnerable and more at risk of being abused sexually than other learners or young people without disabilities. Thus, they stressed the need to provide as much knowledge and skills as possible on CSE to learners with disabilities. Some selected sentiments are presented below:

Personally, I feel the role of sexuality education is very vital to children with special education needs because sometimes our children become very vulnerable to society, so they are supposed to be aware (Teacher, Lusaka, 26.10.2020).

I have been getting reports of most of our learners being abused, they have been abused you know people take advantage of them especially those with intellectual disabilities. So most of them are abused and because they are abused they cannot tell who has abused them and we just get reports just like that (Key Informant 1: MoGE 08.10.2020)

Children with disabilities have got the highest risk of contracting HIV, being abused, gender based violence, bullying, they are more at risk that's why

CSE is more needed for that group because they will open up to the community and know about abuse (Key Informant 2: MoGE 09.10.2020)

Yes, because these children are vulnerable such that they can be abused and not report, again when these disabled children mature they tend to have a high sexual drive compared to the normal ones hence the need for CSE in that they will know how to control themselves if they are taught (Parent 2, FGD 28.10. 2020, Chilanga).

There are some situations which leave us with no options but to discuss that with our children, especially us with children who are disabled. For instance, my daughter was once raped that has made me to be talking to her about sexuality so that nothing like that happens to her again. If I talk to her she will take it serious knowing that at school it was talked about and parents also are talking about it as such they will attach importance to what is being talked about (Parent 4, FGD 28.10. 2020, Chilanga).

From the participants' responses, we observe a wealth of understanding of the coverage of CSE where even issues of bullying and gender-based violence have been identified by participants as CSE related affecting learners with disabilities.

Involvement in sex

The other reason stakeholders felt learners with disabilities needed to be taught CSE was that like other ordinary learners without disabilities, learners with disabilities equally willingly engaged in sexual activities, most times without knowledge of the repercussions. The following sentiments were echoed by participants:

For me I think CSE is a good thing, and it is very important because from my experience before I even formally started lecturing, I taught students with disabilities for a very long time and I noticed that they are sexually active, but they really don't understand their bodies. I feel CSE is a good thing because it will give them the values and skills to use for a better life. CSE will also empower them to make informed decisions in life, thereby having a better life (Lecturer, 21.10.2020).

The other thing is that people may not know that there are a lot of activities even in boarding schools for learners with disabilities amongst themselves; there is sex which is taking place there. And many people think that young people with disabilities don't engage in those activities, but they do (Key Informant 1: MoGE, 08.10.2020).

The verbatim excerpts above are highlighting myths that persons with disabilities may not be involved in sexual activities. The need for CSE, although the emphasis should not basically or solely be on sex, it appears indulgence in sexual activities is the main concern for CSE according to stakeholders' views.

The Moral Responsibility

Participants also noted that it was basically a moral responsibility that if other learners without disabilities were exposed to the CSE curriculum, they equally needed to learn the same content.

If other learners are being taught under Comprehensive Sexuality Education, it is just right that they are given that information (MoGE 3: 11.10.2020).

It must be there also in special schools because we are all living in the same world. What every child is exposed to the disabled child is also exposed to. So why should they be excluded? What is affecting other children affects them also. These days' children are being abused. Even us with children with disabilities we are more worried because are likely to take advantage of our disabled children (Parent 5, FGD – 26.10.2020 Lusaka).

This is an issue of equalisation of opportunities and equal exposure to the curriculum that all learners are entitled to. It is a moral responsibility that no one should be left behind or be exposed to danger when another group is protected.

Defeating Myths

Some parents openly explained how old beliefs impacted fear in young people as they were growing with fear to indulge in sex.

This CSE is very important to our children in that back then when we were growing up, we were told that if you make love to an opposite sex your hands will be very long and your tammy will blot out but this time around the generation is changing and they should be taught so that they are aware of dangers of not taking care of oneself (Parent 1, FGD 28.10. 2020, Chilanga).

Parents appreciated the times they were living in where taboos dominated their lives but recognised that times had changed, and their children needed to know the truth about life.

Protection against diseases and unplanned pregnancies

Participants, who included learners, explained that CSE was important in empowering young learners with knowledge of how to protect themselves from sexually transmitted diseases and unplanned pregnancies. The following excerpts were selected to represent the general views of learners and parents:

We need more information because it will be easy for us not to engage in sexual activities or abuse. Teach us more in what the law says so that it is easier for us to know more. It will help even with friends with bad habits, we will know who to avoid and who to hang out with (Learner 4 from FGD 1, Central province- 22/10/2020).

As a mother of teenage children, the most important area is unwanted pregnancy because I have grown up daughters and sons. The fear I have is unwanted pregnancy for my daughters. If they know these issues through comprehensive sexuality education, then they will be able to protect themselves. Even sons can also easily impregnate girls, so it is important if such issues are addressed to them so that they know how to take precaution (Parent 2, FGD – 22.10.2020 Solwezi).

Table 2 shows selected responses from learners on the importance of comprehensive sexuality education:

Table 2: Selected responses from learner FGDs

<i>R6: I think the best is to add more information for us to learn about sexuality education. For example we need information that can help me understand or be aware of sexuality education.</i>
<i>R8: it is important to learn more different topics and how we can avoid and abstain</i>
<i>R1: for example it is important to teach us how to use condoms so that we understand fully or even practice how to use it</i>
<i>R2: we need more information and it will help us to teach others on sexuality education, the dangers</i>
<i>R5: for example a girl maybe she plays around sexually with different men and she admires different things, we need such topics and how to avoid sexual intercourse.</i>

From the findings, CSE is important because it would help adolescents with disabilities to know about the dangers of engaging in early sex and avoid teenage pregnancies. Parents appreciate CSE from this perspective especially for their children with disabilities who may be easily taken advantage off. Adolescents with different disabilities face different disability specific challenges that prohibit them from accessing the CSE curriculum content. For instance, many learners with profound hearing loss (deaf) in Zambia usually enrol late in school. Late enrolment is usually necessitated by lack of screening and assessment services (Muzata, 2021). Thus, late enrolment means learners are also introduced to CSE curriculum content late, ultimately when the learners are already matured and exposed to sexual risks such as sexually transmitted diseases and early pregnancies. A study by Muzata (2010) reported learners as old as 27 years in grade 11 at one of the schools in Copperbelt Province. UNICEF (2016) reported several factors that influenced parents' failure to enrol their children early in schools in the United Union of Comoros. Factors included the financial and additional needs of children with disabilities. Late identification, screening and assessment also accounted for late enrolment. The aspect of vulnerability for persons with disabilities cannot be understated. Sexual abuses that are influenced by beliefs that having sex with a person with a disability cures some

diseases such as AIDs (Kelly, 2008; Muzata, 2021) have left many persons with disabilities victim. The need for CSE for persons with disabilities can therefore not be overemphasised.

Areas Easier to Teach

The study identified areas that were easy to teach. The easiness does not lie in the complexity of the material or concept being presented to learners but in the manner of presentation and how comfortable teachers were to teach selected CSE related content. Thus, a general picture of the findings shows that stakeholders found it easy to teach aspects of body anatomy, life skills, family relationships, rights, values and attitudes among other aspects which did not infringe on the cultural beliefs and values of the teachers. The excerpts show the areas stakeholders found easier.

Anatomy, puberty, and reproduction are easier to deliver especially when it comes to curriculum based content. However, reproduction relating to prevention through service providers is being shunned by teachers because of culture (Lecturer, College 1; 21·07. 2020)

Life skills because these are already in our syllabus so the teachers are conversant with the materials because these are carrier subjects. So really they don't have challenges in these topics because they are there in the syllabus so they just add in the carrier subjects. When you talk of sexual and reproductive, anatomy, these are already in biology, this is what they are learning, this is what teachers are delivering, so they are not delivering any new thing but they are used to delivering such lessons it doesn't give them pressure or complications. These are things they have been doing from time to time so it's very easy for them to deliver the lesson (Key Informant @ MoGE, 22·10. 2020; Southern)

They found it easy to teach the changes in the body parts, how the breast grows, the chest grow, it was very easy for the teacher to explain (Learner 6, FGD 5, Southern)

We have got topics like relationships, values and attitudes, society and human rights, human development and sexual development, these are easy to teach but those that are difficult to deliver are sexual reproductive health is easy to teach but it depends on the teacher, some express themselves very well but others don't because teachers are restricted by cultural backgrounds otherwise all topics are easy to teach (Key Informant @ MoGE, 27.10. 2020; Lusaka).

The findings show that stakeholders have no contentions on the teaching of certain topics such as relationships, values and attitudes, society and human rights, human development and sexual development. Even the knowledge of learners sexual organs could be taught but the concern is on the depth of some topics as well as the age of

the learners. The teaching of life skills was much more appreciated that it would enable children to protect themselves against sexual and other abusive advances.

Description of the Most Contentious Factors that Affect the Implementation of CSE in Teaching Learners with Disabilities

Teaching about the menstrual cycle

What came out are several issues affecting delivery of CSE in schools. There are parts that are well taught with easy while others are not. For instance, teaching learners about the menstrual cycle has usually been characterised with incomplete truths. One stakeholder narrates as follows:

Aspects of menstrual hygiene are not well emphasized. So that is now where CSE comes in to say do not leave the information hanging. When talking about these issues they need to know that they should not abscond from school but be encouraged that during this time maybe it can be a day or two that you have heavy flow that you can stay away from school but the remaining days when they have light menstrual they can still practice good health and hygiene where they buy disposable pads and take adequate bath so all those and the like. So it goes beyond but not just mentioning the concept and the key ideas around puberty (Key Informant –North Western Province; 7· 11.2020).

There is need to break stereotypes by teaching the issue of menstrual hygiene openly to both boys and girls explaining to boys what girls go through so that they appreciate the life cycle of a girl child and learn to appreciate marriage and respect for good health when they marry. However, culturally, it is a taboo to teach boys about menstruation. For learners with some disabilities such as those with visual impairment, its difficult how to make this lesson concrete or tactile for them. Just the topic itself and other topics related to sex organs made even learners uncomfortable when taught by teachers. A grade 8 learner narrates below:

I sometimes find it interesting sometimes I find it embarrassing. Sometimes you find the teacher is talking about things that we have, the private parts but the most interesting is that we get to know more about ourselves, the parts that we have and their functions but sometimes it's embarrassing because when they mention the private parts but the most important thing is that we are getting to know more (Learner –North Western Province; 7· 11.2020)..

From the expression, while the girl appreciates the content, learning the content is done in a hard way, somewhat against the conscious.

In a focus group discussion with six parents, all of them indicated that they were not comfortable talking to their girl children about a menstrual cycle and would rather direct the child to a third part.

I do not feel comfortable; I usually refer my daughter to her aunt (Parent)

We see guidance and counselling teachers, the YWCA also teach the girls on how to take care of themselves. They are guided well on how to accept when they reach that stage as others tend to feel ashamed (Parent)

Our teachers are the best to teach us but also our parents can tell us however some parents feel shy to tell their children because some children have single parents, maybe a girl only has a father and for the girl to tell his father about sexual and everything, it going to be difficult so it is better for the teacher to teach these things (Learner from FGD 2, North Western Province – 8.10.2020).

The issues coming out which inhibit effective delivery of CSE are multifaceted. Even learners understand that family structure impede how best parents can help in teaching their own children the so called sensitive concepts in CSE. Basically parents appear to give CSE teaching solely to teachers. However, teachers are required to involve parents to help their children by giving homework on some topics. With such revelations therefore, it entails that teachers need to be selective of what to give their learners as homework that parents can help their children to avoid such clashes.

Teaching about contraceptives

The other contentious issue in the teaching of CSE that came out was the subject of contraceptives. Most parents were against the teaching of this topic saying it was meant to corrupt their children's morals. One parent says below:

I feel it's not right to teach our children things like abortion and contraceptives because when you make them aware they will want to go and practice. For example, after learning about contraceptives, children will want to try them out. There are cases of 12 year old children being pregnant these days. This is because they are taught about sex at a very early age (Parent1 FGD – Chilanga).

Children will have ideas about sex when they start learning about it early, and they will want to go and practice it. Some children start school early and will be in grade 4 at 9 years. Imagine teaching a 9 year old child about sex and contraceptives. It simply means you are awakening ideas in a child who would want to go and practice sex out there. For the reasons above, I feel CSE should not be taught to our young children in grades 4 and 5 but may be when they get to grade 7 (Parent 2 FGD – Chilanga).

The topic is taught to prevent girls from becoming pregnant at an early age. However, it implicitly permits them to indulge in sex before marriage and parents felt uncomfortable with the whole thing all together. However, other parents did not agree with the views given by two other parents saying:

Like what my friend has said about contraceptives, I feel our children can be taught about them because they need to know how unwanted pregnancies can be avoided. They don't tell them to go and practice, no but they just want them to be aware and have the knowledge. Before this subject was introduced, our children still fell pregnant at an early age. I feel this subject should be introduced for the children to sensitized on drug abuse, unwanted pregnancies as well as self-awareness. Those that will choose to go and practice what they have been taught are just problems. Children differ in the sense that some would and appreciate the knowledge whereas others would learn and decide to do the opposite (individual differences) (Parent 3 FGD – Chilanga)

Sex issues should be more emphasized because most parents have challenges talking about them with our children. Our teenage children should be taught about sex and its consequences if started early and not to those that are still young because the young ones may not even know the meaning and talk about it at very awkward times. Therefore, age should be considered to avoid embarrassing situations. Teach CSE to teenagers only (Parent 4 FGD – Chilanga)

The age at which sensitive CSE content should presented to learners

The age at which CSE is introduced is also another issue of contention in the implementation of CSE in schools

I don't know about other parents but to me I feel CSE is okay, but at least the child should be 13yrs or older. I still feel it's important because from the time I started teaching her, she seems careful and knows how to keep herself safe now. (Lusaka - Parent).

We feel uncomfortable to teach learners some CSE topics because I personally believe that they are too young to know some things (Solwezi : Teacher)

The problem of teaching CSE content to learners who are young is that they may try out things without knowing the problems that will come out. But we are caught up in a difficult situation because children are all-over on social media learning these things (Choma: Lecturer)

From the findings, parents and teachers were more concerned of the age at which CSE is introduced. Although they did not mention the actual age at which it should be introduced, they echoed the need to introduce such content to adolescents rather than younger children in primary school.

Lack of adapted materials specific to disability

There were also barriers specific to disability. Learners with disabilities faced challenges unique to their specific disabilities. These included lack of adapted materials. The following views emerged from stakeholders:

The key challenge is the breakthrough, the language to be used. Because teachers or lecturers will be willing to teach them but if their language is not understood by the learners then there will be no breakthrough. Also, for the visually impaired, the resource materials need to be accessible and adapted to their level for easy understanding (Lecturer, 21.07.2020).

Barriers in communication

CSE faces **barriers of communication** as well. Stakeholders in the implementation of CSE from school, community and hospitals face challenges in communicating with young people with disabilities. The following sentiments reveal the challenges learners with disabilities face in accessing CSE related services:

The people at the clinic don't know sign language so it is difficult also to get information, so here at school it is easier than going to the hospital (Learner 7 from FGD 1, Central province - 22/10/2020).

Language is a problem in short Communication is a challenge, sign language especially. Also, those with hearing impairment, you need to use a lot of concrete and semi concrete models so that will be able to see, feel and hold, without those models, it will be very difficult. In terms of teaching, we use the same strategies except when you use lecturing without any teaching and learning aids, the information will not sink in the learners (Key informant @ MoGE, North Western, 23.10.2020)

For learners that learn through the sense of touch, it was revealed that learning CSE maybe more challenging because they cannot learn most things abstractly and understand them well. Here were some observations from learners with visual impairment in Southern Province:

Madam, like for us visually impaired pupils when it comes to learning like that topic puberty us who are unable to see we have to touch. That's why I am saying it was very difficult because when they teach and mention maybe penis so madam I need to touch it wee....for me to see it I need to touch (Learner 1 from FGD 6, Southern province - 22/10/2020).

Parents' role in teaching CSE was recognised as minimal and in most cases indirect. Due to cultural barriers, parents would not say plainly the issues that would want to communicate to their child. One of the learners narrates:

Yes, like when I was young I didn't use to wear Chitenge but suddenly they started telling you shouldn't wear short skirts, you shouldn't pass here when people are sitting ...aaaaa!... yes they teach us when you reach that stage

of puberty. At home they would tell us not to wear miniskirts, you have to wear a chitenge to show respect to adults and when visitors come home you have to welcome them with respect not in a miniskirt, they tell us how to welcome visitors (Learner 1, FGD 3 – Mufumbwe)

Another learner said:

They say you are grown up person, all those you used to do stop them. One example is when we were young, we used to walk without shirts but now we cannot (Learner 2, FGD 3 – Mufumbwe).

One thing I have discovered with teachers is that they are not shy to tell us about anything, they would go straight to the point unlike parents they would beat about the bush but when you come to school teachers are going to tell exactly what is going to happen saying when you have sex with a man you are going to fall pregnant” but when we come to our parents, they will beat about the bush, and we will not even know what they mean so teachers are the best to consult when it comes to such things (Learner 1, FGD 4 – Solwezi).

Some teachers were also reported to find it difficult to teach some topics. One of the learners narrates as follows:

Like madam, in our class we have boys and girls and the teacher found it difficult to teach puberty because the teacher was shy. It was a female teacher and when teaching the girls she was free but when teaching the boys she was shy (Learner 5 FGD 6, Southern Province)

I trust the teachers in the schools, because what I believe is that children trust and believe their teachers more than they trust and believe parents, even the little ones in pre- school would say, ‘no, teacher said this’ this makes me feel and believe that what they are taught is correct. The children are also taught the dangers so that they know. (Parent – North Western)

From the findings, it is clear that stakeholders observe genuine concerns in the CSE curriculum which need to be addressed based on not only the Zambian culture but also on religion and age considerations of when certain content should be presented to learners. The Ministry of Education, Science, Vocational Training and Early Education (2014) CSE framework introduced 6 themes namely relationships, Values, Attitudes and Skills; Culture, Society and Human rights; Human Development, Sexual Behaviour and Sexual and Reproductive Health. According to the Ministry of Education, Science, Vocational Training and Early Education (2014) the identified themes should compel all users of the framework to describe in details the primary health goals.

These primary health goals include the reduction of unintended pregnancies, STI’s and HIV. This can be achieved by young people

delaying sex debut, reducing frequency of sex, increasing the consistent and correct use of effective contraceptives among out of school youths, going for Voluntary Counselling and Testing (VCT) for HIV, and being vaccinated against Human Papilloma Virus (HPV) and hepatitis B (Ministry of Education, Science, Vocational Training and Early Education 2014:1).

A few unclear contradictions can be noted from the framework goals. Readers and indeed stakeholders should be left to wonder whether reduction in the frequency of sex can stop teenage pregnancies and the contraction of sexually transmitted diseases. While the framework argues that the primary goal is to expose the risks to the youths so that they make wise decisions and avoid engaging in early sex, the framework syllabus goes beyond exposing young people to the said risks. For instance, under the theme human development in grade 5, learners should be taught Sexual and Reproductive Anatomy and Physiology, puberty, and body images. Under the theme, learners are expected to identify the male and female body parts, describe changes at puberty, state the differences in body parts of people and describe self-body exploration.

Table 3: Sample syllabus of CSE

TOPIC	SUB TOPIC	SPECIFIC OUTCOMES	CONTENT		
			KNOWLEDGE	SKILLS	VALUES
5.4.1 Sexual and Reproductive Anatomy and Physiology	5.4.1.1 Features of the human body	5.4.1.1.1 Identify male and female body parts	<ul style="list-style-type: none"> Differences between male and female body parts Body parts are special whether one has disabilities or not 	<ul style="list-style-type: none"> Identifying male and female body parts Observing differences in male and female body parts 	<ul style="list-style-type: none"> Awareness of differences between male and female body parts Appreciating features of the human body Respecting others regardless of their disability
5.4.2 Puberty	5.4.2.1 Changes at puberty	5.4.2.1.1 Describe changes at puberty	<ul style="list-style-type: none"> Social: desire to be more independent, be with friends, attention to appearance, romantic feelings/dating Emotional: mood changes Physical (internal): Menstruation, ejaculation Physical (external): Enlargement of testicles, breasts in girls, hair, underarm odour, acne, Variations in the onset of puberty and length of the menstrual cycle 	<ul style="list-style-type: none"> Communicating changes at puberty Problem solving in coping with changes at puberty 	<ul style="list-style-type: none"> Awareness of changes at puberty and variations in its onset Appreciating good personal hygiene
5.4.3 Body Image	5.4.3.1 Uniqueness of bodies 5.4.3.2 Self-body exploration	5.4.3.1.1 State differences in body parts of people 5.4.3.2.1 Describe self-body exploration	<ul style="list-style-type: none"> Differences in sizes of body parts e.g. Small/big breasts, small/big waist/bums, pimpled/clear faces. Knowledge of one self/self identity and appreciation of personal body parts 	<ul style="list-style-type: none"> Observing differences in individuals 	<ul style="list-style-type: none"> Awareness of one self Appreciating one self

In Zambia, an 11 years old, a learner is expected to be in grade 5. The entry age into grade 1 is usually 7 years. However, some learners enrol late in school and may be older than 11 years by the time they are in grade 5. According to the CSE curriculum, learners at grade five level should learn about menstruation and ejaculation, enlargement of testicles, and breasts among other aspects such as being more independent, being with friends, seeking attention to appearance, romantic feelings/dating, Emotional changes such as mood changes (see table 3; Ministry of Education, Science, Vocational Training and Early Education, 2014). We may not run away from the concerns raised by parents that CSE is introducing children to early sex. Picking a few leaves from the above outline (table 3), while it is appreciable that self-knowledge of menstruation and enlargement of sexual organs is taught, how would one teach ejaculation and romantic feelings and dating? What would such teaching entail? Should learners then eventually become so attentive to any forms of feelings they have? What is meant by self-exploration and how can this be taught to learners under CSE to a grade five? How African or Zambian is this to the teacher teaching it and the recipient? These questions arise from the CSE curriculum and stakeholders apprehensions of teaching some parts of the CSE curriculum. There is certainly need to address parents' and teachers' concerns on the selection of what should be taught to learners. This study therefore agrees with Nyimbiri et al (2019) and Zulu et al (2019), that teachers' selection of what should be taught to learners is perhaps justified. The teachers are also parents in their own rights and understand what is appropriate for a learner.

Teaching of CSE to learners with disabilities has to be tailored to the different needs of specific categories of disabilities. The teaching methods and strategies for delivering the CSE content need to be well modified to deliver the message appropriately without it being misconstrued to be abuse. Teaching and learning aids that should deliver CSE messages should be tailored to specific disabilities. As seen in the findings, learners with visual impairment depend on tactile learning. Self-exploration by touch of their sexual organs would not be culturally appropriate in the Zambian context but modern toys that show human bodies can be used by learners with visual impairment who depend on touch. The use of models can help provide a near real life learning experience to learners although such models may be restricted in some areas. For instance, a model cannot show what ejaculation or penis erection is or how ejaculation occurs. Learners with hearing impairment need teachers with competencies in sign language. However, the findings of this study revealed deficiencies in communication with adolescents who are deaf by hospital staff. Since CSE is a cross cutting issue, all players in the delivery of CSE content need to be trained in sign language (Muzata, 2020). Deaf culture demands open communication and hence the signing of sexual organs and demonstration of how things should be done should not be a secret. Thus, teachers for the deaf or indeed inclusive teachers should be consciously prepared to meet the learning needs of deaf learners in and outside the classroom CSE lessons. Learners with intellectual disabilities need easy to read

materials, pictures and protective wears to avoid easy abuse. Demonstrations of how to dress and how to put on a condom can be done through models. Most importantly, the activities are taught to age-appropriate learners. For learners with intellectual disabilities, chronological age may not really. What should be considered is the mental age. Most importantly, repeated teaching is needed.

Disabilities are quite a broad range of categories, each with its unique needs. Each category poses its own challenges especially where teaching of CSE is concerned. The figure below gives highlights of behaviours for some categories, the likely repercussions of teaching CSE and suggestions for teaching:

Table 4: Table of different types of disabilities

Category	Learning needs	Considerations for CSE learning
Autism	Repetitive behaviours, Perseveration, Resistance to change, inappropriate responses to sensory stimuli, Social skills deficits (Macha, Simui & Muzata, 2020; Treacy, Taylor & Abernathy, 2018) Alarm: <i>Learners may engage in forced sex</i>	Models, visual aids, Skills: Teach negotiation skills, patience
Deaf-Blindness	Lacks both the sense of sight and hearing and depends absolutely on tactile learning	Touch, require trusted confidantes
Hearing Impairment	Cannot hear sound, Limited common sense	Present content visually with illustrations and sign language. Sign objects related to CSE correctly, not figuratively
Intellectual Disability	Not able to understand abstract concepts, slow at social skills, cannot learn from figurative language/metaphoric, cannot generalise and apply to different situations, plays with under age Note: <i>Can engage in sex openly and without protection.</i>	Teach social skills, teach requests, present fewer concepts at a time, teach for every situation even when one can transfer learning, call a spade a spade, exposure to more play
Multiple Disabilities	Depends on available senses	Multiple approaches depending on loss
Physical disability	Quite many	
Learning Disability	Easily distracted, poor at generalisations, challenges with retention and social skills. Muzata, 2021; Treacy, Taylor & Abernathy, 2018)	Provide variety of teaching aids, repeated teaching, hands on where appropriate, practice cues



	Note: <i>May force sex/may be aggressive to others/may lack negotiation/ May easily forget to use condom or other contraceptives.</i>	
Speech or Language Impairment	Failure to understand complex language, metaphors and figurative language are difficult for them, deficits in vocabulary	Use simple and straight forward language
Visual Impairment	Lacks the sense of vision Note: Challenge is on touching their organs which may be offensive	Use the of hearing fully accompanied with touch of what they hear, Use models to touch
Behavioural and emotional disorders	Easily distracted, Inability to cope with stressful situations and changes, Attention problems, Difficulty developing and maintaining social relationships. Note: <i>Demonstrating may turn out to be teaching bad behaviour</i>	Reward good behaviour, withdraw rewards for bad sexual behaviour, and use all senses to teach. Behavioural analysis is critical.

From the table above, it is also worth noting that disability is not homogenous. This means that the needs in terms of CSE delivery also differ. The methodologies used to deliver CSE content to learners with visual impairment would not be the same as those that would be used to teach learners with hearing impairment. Learners with learning disabilities also have a variety of needs depending on the nature of learning difficulty faced. There are learners who would need easy to read content while others would need information presentation in smaller chunks. CSE delivery success for learners with disabilities therefore is more dependent on teacher training and specialised material provision. Teachers need more of skills for teaching each category of disability.

Conclusion

This study has revealed that the implementation of CSE to learners with disabilities in Zambian schools is affected by several factors such as lack of teaching skills, teaching and learning aids that are specific to the delivery of CSE content to specific categories of disabilities. However, the key factors affecting the implementation lie in the culture of learners, teachers, parents and other stakeholders in the Zambian community. Figure 1 shows the key players impacting CSE implementation with learners and teachers being part of a community of parents, religious and traditional leaders whose cultural values do not permit teaching younger children none age and culturally appropriate content. Thus, CSE effective implementation depends on how the cultural values are integrated within the curriculum.

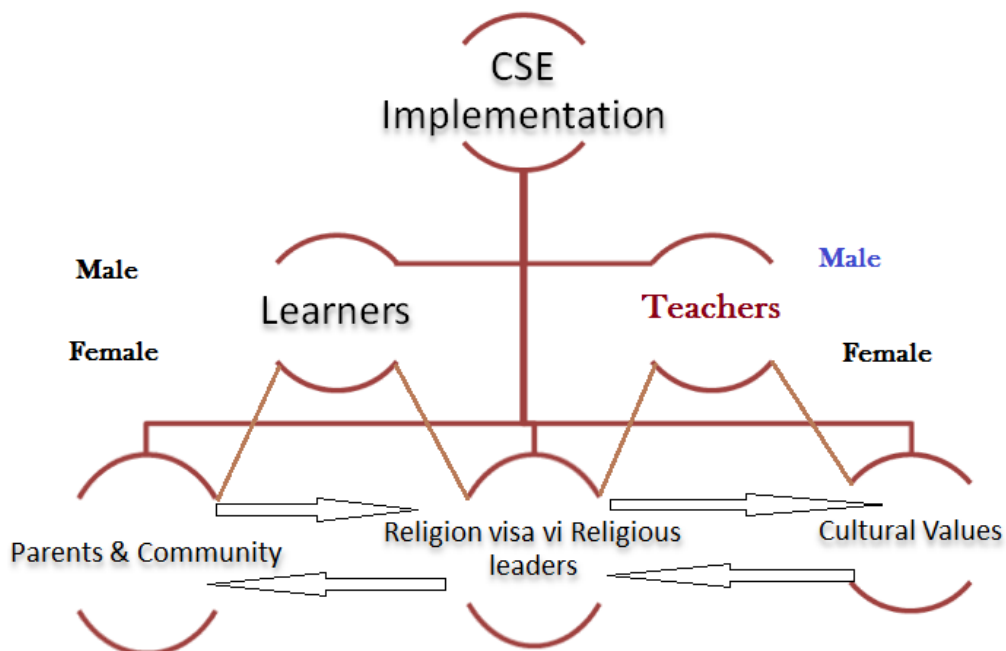


Figure 1: CSE implementation paradox: Muzata KK

From figure 1, we observe a web of interrelated variables among Zambian stakeholders in CSE implementation. Key is that the Zambian community has its own traditions, values and attitudes and how they rear children. Equally, the Zambian community is religious in nature. Constitutionally, Zambia is a Christian nation despite accepting that other numerous religions and a variety of religious teachings occur and are accepted. The learners and teachers are part of the Zambian community. They belong to different religions and cultures, meaning they hold different teachings about child rearing. To expect that persons with different religious and traditional orientations should accept the teaching of the contentious issues of CSE to children in a unison curriculum is to ignore the uniqueness of the subgroups that make up Zambia. CSE teaching in schools cannot succeed in the absence of recognition of Zambian traditional cultures and religion. For as long as the implementers are Zambians, CSE curriculum should consider relevant views of when CSE should be introduced to learners and restructure the manner of presentation to ensure third parties such as grandparents, traditional counsellors and other significant models get more involved than compelling teachers to be the sole architects of CSE implementation. Even then, schools should have specialised personnel to teach such perceived sensitive topics in CSE.

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