

Practitioners' Corner

Parents' views on teaching comprehensive sexuality education to their young children in Zimbabwean schools¹

Thaddeus (Teddy) Mahoso, Baisago University, Zimbabwe

Roy Venketsamy, University of KwaZulu-Natal, South Africa

Zijing Hu, University of Johannesburg, South Africa

ABSTRACT

There is an increase in child sexual abuse among young learners in Zimbabwe (Mahoso, 2020), therefore, there is an urgent need for comprehensive sexuality education to be implemented. This study aimed to establish the views of parents on teaching comprehensive sexuality education (CSE) to young children in primary schools. Most schools in Zimbabwe are avoiding teaching topics on CSE. This resulted in young learners being deprived of age appropriate CSE knowledge and their rights and responsibilities informed by the ecological theoretical framework. A qualitative approach within the interpretivist paradigm was applied with a case study design. Data were gathered using a semi-structured interview schedule. Purposive sampling was used to select 10 parents. The study revealed that parents' cultural and religious beliefs impacted their views. Parents believed that sexuality education content is taboo and against their norms and values. They indicated that CSE content would encourage sexual activities among children. The study recommended continuous education on the importance of CSE and intensive advocacy campaigns to be initiated by all stakeholders. Parents should become involved in the development of a CSE curriculum framework for primary schools. Parents and teachers should work together to support the teaching of CSE to children.

Keywords: comprehensive sexuality education, parents, learners, child sexual abuse

INTRODUCTION

Africa is the continent with the highest rate of child sexual abuse globally (United Nations Educational, Scientific and Cultural Organisation [UNESCO], 2023). In Africa, the United Nations International Children's Emergency Fund [UNICEF] (2014) estimates that almost 95 million children experience abuse annually. According to the Guest Editorial in the South African Medical Journal (2018), the Optimus Study of SA revealed that sexual abuse of children is widespread with 36.8% of boys and 33.9% of girls reporting some form of abuse. Child abuse is one of foremost public health challenges currently facing many African countries and therefore the authors believe there is a need for an intervention programme to minimise child sexual abuse. According to the United Nations Population Fund [UNFPA] (2015), this continent has the most significant number of new HIV infections which has been increasing as a result of inappropriate knowledge and understanding of comprehensive sexuality education (CSE). There is a

¹ Date of Submission: 10 October 2023
Date of Review Outcome: 24 November 2023
Date of Acceptance: 9 February 2024

definite need for a nationwide campaign to curb this phenomenon and education appears to be a suitable means of knowledge and empowerment (Venketsamy & Kinnear, 2020). Therefore, the authors argue there is a need for a comprehensive sexuality education to be implemented across the African continent. According to UNESCO (2015b), most African countries have been gaining support to teach CSE from the United Nations Integrated Task Team (UNITT). These countries are continuously being supported to develop a CSE curriculum that is contextualised, age-appropriate and meets the needs of the community (Venketsamy & Kinnear, 2020).

According to Venketsamy (2018), Nyamanhindi (2015) and Muridzo and Malianga (2015), child sexual abuse is escalating phenomenally in Zimbabwe. On average, 13 children are raped daily (Mugabe, Chingombe & Chinyoka, 2016) and hundreds of young girls are sexually abused (Nyamanhindi, 2015). Sexual abuse is not isolated to young females alone. Boys are also victims of sexual abuse in Zimbabwe, and the abuse rate matches that of girls (Mugabe et al., 2016). Childline (2015) and Muridzo, Chikadzi and Kaseke (2018) has indicated that children as young as two weeks have been victims of sexual abuse in Zimbabwe, and the numbers are increasing daily. Feltoe (2017) cites the lack of knowledge and education regarding sexual abuse as the leading cause in Zimbabwe. Tshabalala and Khosa (2014) agree that young children in Zimbabwe are unaware of abuse and do not report the incident to their parents. For this reason, the authors agree with Nkoy, Venketsamy and Sing (2022) that the introduction of CSE in the school curriculum will empower young children to make decisions and communicate abuse taking place against them.

Tshabalala and Khosa (2014) state that in Zimbabwe, most parents lack the knowledge and understanding to explain sexuality education content to their young children. Furthermore, their cultural beliefs and value system impact their philosophy on the teaching of sexuality education content (Mugabe et al., 2016). According to Luko and Van Dyk (2015), another challenge is that teachers need more knowledge and understanding of content to teach CSE content to young children, thus avoiding any topic relating to CSE. Mugabe et al. (2016) argue that if CSE content is age-appropriate and consented by parents, young children will become aware of sexual abuse and unwarranted inappropriate behaviours. Childline (2015) believes that awareness and education will encourage young children to make decisions about their bodies and report incidents to trusting adults.

AIM OF THE STUDY

This study aimed to investigate the views of Zimbabwean parents regarding teaching CSE to their young children. The objective of this study was to help determine strategies that could be employed to encourage parents in Zimbabwe to support the teaching of CSE to their young children. This paper also envisages to contribute towards eradicating child sexual abuse by empowering young children with the appropriate knowledge and skills through educations, such as communication (inform an parents or adults if they are being abused), assertiveness (learn to say no, if they are uncomfortable around people) and decision-making (they can decide to protect their bodies by seeking help).

LITERATURE STUDY

Comprehensive Sexuality Education

Comprehensive Sexuality Education (CSE) focuses on the holistic education of children, especially the emotional, cognitive, physical, and social dimensions of sexuality (World Health Organisation [WHO], 2010). It was introduced in 2000 into the school curriculum to minimise learners and students receiving confusing and misleading information on sex, sexuality, gender, and relationship (Kirby, 2011). Comprehensive Sexuality Education is described as a curriculum-based process of teaching and learning (Kinnear, 2018). CSE focuses on what knowledge children need to know. It also recognises the need for the development of skills, values and attitudes that will empower them to (i) understand and ensure the

protection of their rights throughout their lives, (ii) consider their choices and how these will affect their well-being, (iii) realise their health, well-being and dignity and (iv) develop respectful social and sexual relationships later in their lives (UNESCO, 2018).

CSE further aims to help children develop respectful social relationships, consider other people's rights, and value gender equality (Swedish International Development Cooperation Agency [SIDA], 2016; UNFPA, 2014). It is based on scientific evidence; hence, it provides medically accurate information to learners in a way that matches their age (Ketting & Ivanona, 2018; UNESCO, 2014).

CSE is cognisant of learners' culture and is also called abstinence-plus education (UNFPA, 2014; UNESCO, 2018) because it goes beyond teaching children about abstinence-only to include teaching about rights and gender disparity (UNESCO, 2023; Khau, 2012). It is taught to young learners to develop communication and critical thinking skills, leading to assertiveness and good decision-making skills (UNFPA, 2014). All these competencies are expected to help children avoid being sexually abused or sexually exploited (Kinnear, 2018). Kirby (2011) states that CSE also envisages empowering learners and students with the knowledge, attitudes, skills and values to make independent, appropriate and healthy choices in their sexual lives.

Kinnear (2018) and Venketsamy (2018) state that sexuality education is a life-long process of acquiring information and forming beliefs, values and attitudes. It aims to contribute to behaviour change, including reducing unprotected and unwanted sex and reducing harmful behaviour, including sexual offences such as assault and abuse. UNESCO (2009) posits that sexuality education is rights-based, culturally-influenced, age-appropriate and scientific information needs to be curriculum-based.

The need for CSE in Zimbabwean schools

Child abuse is rife in Zimbabwe, according to the University of Edinburgh (2016), a report from Childline Zimbabwe stated there was a total of 15446 reports of child abuse. Fifty-four (54%) were about abuse to children and their need for help. The statistics revealed 39% children were sexually abused, 25% neglect, 22% physical abuse and 12% suffered emotional abuse (University of Edinburgh, 2016). For this reason, the authors believe that CSE in Zimbabwe has become a necessity due to increased child sexual abuse (Mahoso, 2020). Muridzo and Malianga (2015) state that child sexual abuse refers to any sexual act that involves children. According to the Criminal Law (Sexual Offences and Related Matters) Amendment Act, 2007 (Parliament of South Africa, 2007), Maviya (2019) and Childline (2015) agree that child sexual abuse also includes exposing children to pornography, having sexual activities in the presence of children or making sexual remarks to a child. Hall and Hall (2011) state that the escalating rate of child sexual abuse in Zimbabwe should not be ignored because it negatively impacts the development of children. Maviya (2019) believes that this increase is due to myths about being cured of HIV/AIDS if infected individuals engage in sexual activities with young virgins. Despite this myth of being cured of HIV/AIDS when an infected person engages in sexual activities with a young virgin, Mhlanga (2016) state that these perpetrators infect young innocent victims, and they are never cured of HIV/AIDS.

When young children are abused, they are often unaware that they are being abused. Therefore, CSE should be taught so that children become aware of 'good touch' and 'bad touch'. According to the Department of Basic Education [DBE] (2016) in South Africa all children should be taught CSE content to be equipped with knowledge, skills and attitudes that are pivotal in protecting themselves, thereby preventing them from contracting HIV/AIDS infections, sexually transmitted disease and delay sexual debut to prevent teen pregnancy. Mhlanga (2016) states that it should be noted that Zimbabwe is replete with cultural beliefs that promote child sexual abuse; hence, the need for CSE to empower and make young children aware of the need to be protected. Bowman and Brundige (2014) highlight the following myths in Zimbabwe, it is believed that sex with a virgin can boost animal fertility and other forms of

wealth, such as acquiring more money, and that it can promote plenteous harvest to crop farmers. These myths and false beliefs that incite people to abuse young children to gain prosperity (Mahoso, 2020).

Mhlanga (2016) maintains that Zimbabwean parents have a culture of not reporting sexual abuse. Such cases are swept under the carpet (Feltoe, 2017) because victims may be stigmatised if it is brought to public knowledge; hence, out-of-court settlements have been opted. For these reasons, the researcher believes there is a need for the implementation of CSE in Zimbabwean schools. If young children are made aware and given appropriate knowledge of the abuse, they should be encouraged to report these incidents.

The situation of children in Zimbabwe concerning child sexual abuse is worsened because most children do not know what sexual abuse involves. According to Feltoe (2017) and Mhlanga (2016), most children are unaware they are being abused and do not report these incidents for fear and punishment. Furthermore, Feltoe (2017) argues that these children do not know where and to whom these incidents should be reported. Mhlanga (2016) and Mahoso (2020) further state that most children are abused by their custodians whom they trust. Due to fear, these young children do not report the abuse.

Venketsamy (2018), Feltoe (2017) and Mugabe et al. (2016) agree that most teachers and parents are ignorant of sexual abuse among young children. Mahoso (2020) found that those who are aware are afraid to report these incidents. In their research, Mugabe et al. (2016) and Nkoy et al. (2022) found that some parents and teachers cannot identify signs and symptoms of sexual abuse. This further widens the vulnerability gap of children to sexual abuse. Failure to report sexual abuse means that the victimised early-grade children are never tested for HIV after being sexually abused, yet some perpetrators are HIV positive (Mugabe et al., 2016).

Deb (2018) and Mhlanga (2016) agree that all parents must protect their children within a community. However, times have changed, and some adults have become nonchalant about children being abused. He further states that these adults in the community do not attempt to report the incident or take responsibility to protect these children (Mhlanga, 2016). Feltoe (2017) states that, unlike in South Africa, in Zimbabwe, child sexual abuse often goes unreported, thus allowing perpetrators to continue abusing children. This reveals that young children are given little or no protections against sexual abuse in Zimbabwe (Bowman & Brundige, 2014); therefore, the authors believe that children need to be educated on the issue regarding CSE content.

Although Zimbabwe has laws that criminalise child sexual abuse, these laws are not effectively implemented, thus creating gaps that perpetrators of child sexual abuse capitalise upon (Mantula & Saloojee, 2016; Mhlanga, 2016). One of the challenges is the lack of proper training of police officers to deal with child sexual abuse (Mhlanga, 2016). Police officers in Zimbabwe lack knowledge and understanding of the appropriate actions to be taken (Mhlanga, 2016). According to Mantula and Saloojee (2016), policy implementation is also stifled by financial constraints in Zimbabwe and a lack of material resources to implement these policies. For example, child sexual abuse awareness campaigns require vehicles, posters, keynote speakers, and other resources to reach out to every child to make them aware of sexual abuse. However, due to financial constraints and a lack of commodities, these campaigns cannot materialise; thus, young children in rural areas are kept uninformed (Mantula & Saloojee, 2016).

Another reason for introducing CSE in Zimbabwe is to curb forced child marriages (Muridzo & Malianga, 2015). Mahoso (2020) and Mushohwe (2018) state that most young children are forced into cultural marriages at a very tender age in most rural communities in Zimbabwe. Furthermore, in the Zimbabwean culture, those individuals caught abusing young children are required to marry these children. Often, these children are forced to enter a loveless marriage with their abuser (Mushohwe, 2018). These young children are expected to stay in an unhappy marriage for the rest of their lives, enduring a traumatic lifestyle (Muridzo & Malianga, 2015).

Furthermore, in Zimbabwe, child marriage is coupled with a tolerance of child prostitution (Mushohwe, 2018). The tolerance of child prostitution is due to the lack of clear policies in Zimbabwe, according to the findings by Mahoso (2020). It is believed that children engage in sexual activities due to poverty (Muridzo & Malianga, 2015). Katsande (2012) states that in Zimbabwe, many children are vulnerable to sexual abuse due to a lack of parental guidance and support on sexuality education. Kurebwa and Kurebwa (2014) found that most abused children are from child-headed households. These children have lost their parents to HIV/AIDs, or their parents have emigrated to other countries to pursue better job opportunities due to the economic recession in Zimbabwe. Children from child-headed families lack education on sexuality and are exposed to abuse by their caregivers (Kurebwa & Kurebwa, 2015). Katsande (2012) states that perpetrators usually target children from child-headed families since they are defenceless due to the lack of an adult in this family to protect them. If CSE is provided to them, they will become knowledgeable and skilled, and this will empower them to protect themselves since they will know to whom and how to report their abuse (DBE, 2016). Another cause of child sexual abuse is the media and the internet.

Some children in Zimbabwe have access to the internet through modern technology such as laptops and cell phones that they navigate and access pornography (Simuforosa & Rosemary, 2015). After watching, children develop misconceptions that may lead them to abuse each other. This justifies the need for CSE for these young children in Zimbabwe. Simuforosa (2015) found that some children are abused by adults who are authority figures to them. Such people as teachers and guardians to these children take advantage of their positions to abuse children sexually.

Parental resistance to the provision of CSE to early-grade children

In most African nations, parents do not want CSE to be offered to their young children due to cultural prohibitions. It is viewed as taboo to teach young children about sexuality (Browes, 2015; Khau, 2012). This belief also exists among parents in Zimbabwe (Mugweni & Gwirayi, 2011). If any attempt is made by anyone, especially teachers to teach CSE to young children, parents in Zimbabwe intercept it, similar to other parents in Africa and beyond (Khau, 2014; Nyarko et al., 2014). In Zimbabwe, CSE content is supposed to be taught in upper grades and secondary schools under the subject Guidance and Counselling. However, teachers avoid teaching topics related to sexuality education because of cultural prohibitions (Gudyanga, De Lange & Khau., 2019).

Gudyanga et al. (2019) advise that most parents in Zimbabwe are uncomfortable to hear that their children are taught sexuality education content. These parents claim that they were not taught about CSE when they were young, and consequently, they expect the same for their young children. They believe that CSE will defile children's thinking about sex and sexuality education (Lukolo & van Dyk, 2015). Kinnear (2018) found that when a child asks a question about sexuality, parents respond by discouraging the child from asking questions of that nature or responding by providing unclear answers. They respond this way because they believe it is taboo to talk about sexuality with young children (Nyarko et al., 2014); hence, they are unwilling to allow anyone to do what is taboo to their culture and value system. Simuforosa and Rosemary (2015) claim that some parents in Zimbabwe were victims of sexual abuse when they were young; hence, they view child sexual abuse as normative behaviour. Consequently, such people do not see the need to intercept child sexual abuse, and as a result, the parents become perpetrators of child sexual abuse too.

Besides viewing CSE to young children as taboo, some parents in Zimbabwe believe that CSE encourages young children to experiment with sex (Nyarko et al., 2014). UNESCO (2015b) argues against this view. CSE is about empowering young people in their holistic development. According to Ketting and Ivanova (2018), this is a myth because several research-based pieces of evidence indicate that CSE is efficacious in controlling child sexual abuse and promoting good health among young children. According to DBE

(2016), knowledge of CSE is an awareness of avoiding sexual abuse, thus minimising the chances of contracting sexually transmitted infection and HIV/AIDS.

Khau (2012) states that in Zimbabwe, some teachers claim that parents prohibit them from teaching sensitive CSE topics in the early grades. They believe sensitive topics should be taught when children are much older and in higher grades, universities and colleges. As a result, there is a high incidence of non-teaching of CSE content in the early grades in Zimbabwean schools. Nyarko et al. (2014) state that if teachers attempt to teach CSE content, they are often reprimanded and taken to task by parents, community and religious leaders. Teachers are often threatened with unemployment or with their lives if they teach CSE content (Khau, 2012). Nyarko et al. (2014) agree that teachers are caught in a problematic situation regarding teaching CSE to their young learners in schools. These issues widen the gap between continuous child abuse and young children's lack of empowerment and knowledge.

Role of parents in the protection of children

Parents are the ones who bring children into existence (Giddens, 2009; Haralambos & Holborn, 2010); hence, it is their responsibility to protect them as stipulated by the United Nations Conventions on the Rights and Welfare of the Child (UNCRC). According to UNCRC, all children have the right to be protected from all forms of abuse (Child Welfare Information Gateway, 2016). Parents need to take cognisance of their child and their rights to be protected. According to the African Charter on the Rights and Welfare of the Child (ACRWC) (Child Welfare Information Gateway, 2016), every parent is obligated and responsible to ensure their children are safe and protected from harm or abuse. Deb (2018) argues that it is the parent's responsibility to protect their children. The researcher agrees with Kirby (2011), who argues for implementing CSE into the curriculum in the early grades. Knowledge and age-appropriate content will help protect children from abuse. It will empower them with the necessary skills, namely decision-making (to report the incident or not), communication skills (to talk to an adult about the abuse), assertive skills (to be able to say 'no' to the perpetrator) and interpersonal skill (to share their experience with a trusting adult).

Lukolo and van Dyk (2015) view parents as the primary agents of socialisation for their children. Consequently, they take the teaching of CSE to these children and intervention in sexual problems of their children as the primary responsibility of these parents. Gudyanga et al. (2019) also agree that parents should be responsible for working collaboratively with teachers to provide CSE to their children. However, Lukolo and Dyk (2015) state that most parents and teachers lack the knowledge and understanding to advise on or teach CSE content. The ability to provide accurate information on CSE demands a sound knowledge of the biological functioning of the human body (Kirby, 2011). Mahoso (2020) states that most parents in Zimbabwe do not possess the appropriate knowledge and understanding to explain basic sexuality education to their young children. However, both Deb (2018), and Kinnear (2018) agree that due to the lack of knowledge about sexuality education parents fail or avoid communication with their children on issues of CSE.

THEORETICAL FRAMEWORK

Bronfenbrenner's ecological theory informed this study. According to this theory, human beings are influenced by their ecological systems. Bronfenbrenner identifies five ecological systems: microsystem, mesosystem, exosystem, macrosystem, and chronosystem (Paquette & Ryan, 2015). For this study, the microsystem is the focus (Figure 1). This system includes the home, parents, siblings, peers, school values system, and religious values. Parents are the primary caregivers of their children and are therefore responsible for their care and protection (Deb, 2018). Young children belong to a family (microsystem), encompassing the family's belief system, norms, values and religion. It is within this system that children are expected to be safeguarded and protected. Essa (2014) agrees that parents are indispensable stakeholders in their children's education. Young children interact and learn from their parents and

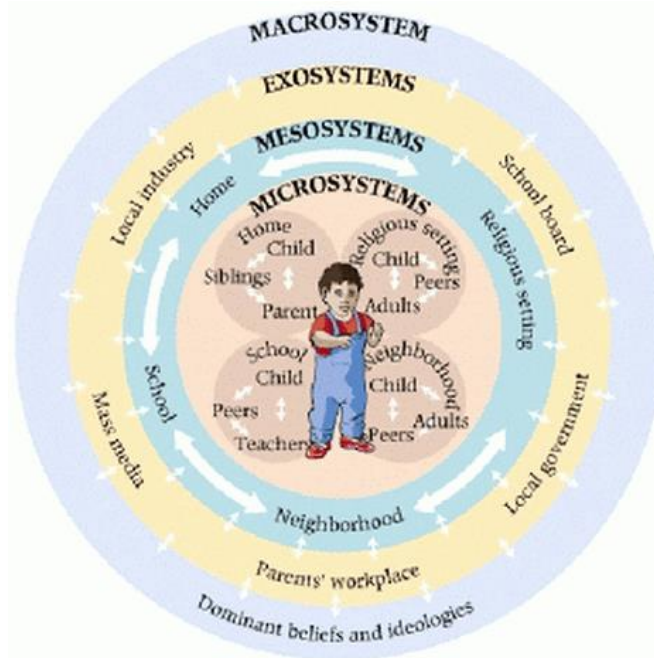
siblings within this microsystem. They begin to adhere to the norms and values their parents, teachers, and others instilled. Bronfenbrenner argues that if this system is based on mutual trust and acceptance, young children will grow into responsible adults without fear or intimidation. Morrison (2015) states that the microsystem is significant when it comes to the teaching of CSE in schools. Parents play a significant role in accepting or refusing to allow their children to learn age-appropriate content on CSE. He further states that parents' perceptions, beliefs and values regarding CSE influence their decisions over protecting their children from abuse.

Figure 1:

Bronfenbrenner's ecological model

Source: Knapp, Losert, Malmrose, Mullins et al., (n.d)

<http://education-portal.com/academy/lesson/urie-bronfenbrenner-biography-theory-quiz.html>



METHODOLOGY

The qualitative research approach located within the interpretivist paradigm was applied to elicit participants' views on teaching CSE in the early grades in Zimbabwean schools (Edrissingha, 2018). This method offered an opportunity to explore and make meaning of the participants' views, beliefs, values and motives for their attitudes towards teaching CSE in the early grades (Bryman, 2012). Purposive sampling was used to select only parents with young learners in the early grade classes (Grades R, 1-3) in Zimbabwean schools (Bryman, 2012; Maree, 2015). Although the researcher sent out fifteen (15) consent forms to parents, only six (6) parents voluntarily consented to participate in the study (Maree, 2015). The case study design was chosen because it allowed for an in-depth study, which was crucial in understanding the phenomena (Yin, 2011). It accommodated the use of semi-structured interviews, which enabled participants to elicit the required information easily. It satisfied the subjective nature of interpretivism (Maree, 2015).

Semi-structured interview

The semi-structured interview suited this study because of the sensitivity of CSE issues. It allowed the researcher to interact personally with participants, one at a time, creating an atmosphere of privacy.

Consequently, trust prevailed, which led to the elicitation of the required information from each participant (Maree, 2015; Yin, 2011). The semi-structured interview also enabled the researcher to solicit details from participants. Interviewees were also able to ask for clarifications to the questions.

Data Analysis

Data analysis was inductive. The recordings made during the individual interviews assisted in inductive analysis (Bloor et al., 2002). The data were analysed using the thematic approach (Guest et al., 2012; Creswell, 2009; Boyatzis, 1998). Multiple data sources such as interviews and documents were compared to search for common themes to ensure trustworthiness (Mncube & Dube, 2019; Creswell, 2009).

Ethical considerations

The participants obtained informed consent for the ethics code of conduct. The researchers guaranteed participants' anonymity, confidentiality, and privacy. The researcher applied for ethical clearance to undertake the study from the Faculty of Education's Ethical Committee of the University of Pretoria and the Ministry of Primary and Secondary Education in Zimbabwe. Participants were not forced or coerced to participate in the study. Participation was voluntary, and confidentiality was guaranteed. Informed consent was sought from each participant in writing. They were informed that they could withdraw from the study at any given time without explaining themselves or their reasons. The researcher used pseudonyms to report the findings. The codes P1-P6 refer to parent 1, parent 2, to parent 6.

DISCUSSION OF FINDINGS

The analysis of data that were collected led to the emergence of the following themes:

- Parents' knowledge and understanding of CSE
- Factors that prohibit the teaching of CSE to children in early grades
- Views of parents regarding teaching CSE in the early grade

Parent's knowledge and understanding of CSE

During the interview, the researcher asked parents to explain their understanding of CSE. This question aimed to gain an in-depth knowledge of parents' understanding of the concept. This question helped to reveal what parents knew and understood about CSE. Their knowledge and understanding are reflected in the quotes below. Most parents indicated that

They have not heard about comprehensive sexuality education. However, they all heard of sexuality education. Therefore, according to them, comprehensive sexuality education is about sex education and teaching young children about sex. This would mean that their young children will learn how sex activities and how to 'make babies'.

We don't want our children to learn about sex education because they will want to experiment with sex. We can't let them fall pregnant when they are so small.

Our children are very small, and they must first learn to read and write instead of learning about sex education. When they grow up, they can learn about that. This is not the time for them to learn about sex when they are so small.

From the above response, there is evidence that most parents did not have a clear understanding of CSE and that CSE is not only about sexuality education. According to SIDA (2016) and UNFPA (2014), CSE is described as a curriculum-based teaching and learning process that focuses on the emotional, cognitive, physical and social dimensions or aspects of sexuality. It further encompasses the process of teaching

and learning about aspects of sexuality education to help learners acquire knowledge, skills, attitudes and values that can enable one to recognise health, well-being and self-respect.

The researcher took the opportunity to explain to parents that CSE is not about teaching only sex education and reproduction. It is more than sexuality education. Some of the topics in the CSE curriculum, as outlined in the International Technical Guidance on Sexuality Education, are focused on the overall well-being of learners. These topics include relationships, family, my body, healthy eating, bullying and age-appropriate sexuality education (UNESCO, 2009). To gain clarity on participant's understanding of CSE, parents shared the following sentiments:

Oh, so CSE is not only about sex education and having sex. It is more about the health of our children and how to make friends. It is not about making love and having sex.

CSE is about helping our children to learn about their bodies and how to take care of their bodies like bathing, eating healthy foods, exercising and making sure that they can take care of themselves.

Now I understand what CSE is about, it is about helping our children to protect themselves. It is also about our children telling us if anything bad happens to them.

Through the process of probing, the researcher was able to provide some understanding of CSE to parents, which was greatly appreciated. This sentiment was echoed by P2, who said:

Thank you, sir, for making this so clear to me. All the time, I thought it was about sex education, and I was really scared and worried. Now I know CSE is not only about sex education, and if the teacher is going to teach my child CSE content, then they will take into consideration my child's age and understanding.

According to Paquette and Ryan (2015) in the microsystem of Bronfenbrenner's theory, parents and children interact with each other within a safe space. Young children feel protected and safe around their parents and immediate caregivers. The authors believe that for this reason, parents must empower themselves with knowledge of CSE so that they can protect their children against harm and ensure their safety at all times.

Factors that prohibit the teaching of CSE to young children in Zimbabwe

The second question the research probed into was the factors that prohibited parents from agreeing to implement CSE content in the early grade curriculum. To this question, most parents fervently articulated their beliefs on what CSE entails and their cultural, religious and moral values as factors impacting their agreement. In the theoretical framework, religious factors are essential to the microsystem. Parents usually educate their children according to religious and cultural values. For this reason, it is evident that parents ardently adhere to the teachings of their religious leaders. They further indicated that they were highly influenced by their religious leaders and the doctrines of their religion. The quotes below articulate the views of parents regarding the factors that motivated them to disagree with implementing CSE in the curriculum (Venketsamy & Kinnear, 2020).

Three parents, P2, P3 and P6, indicated that their belief system did not allow them to agree to the implementation of CSE in the early grades:

We grew up in a culture where talking about sex education to young children is taboo. Sex is only spoken by adults who are married. Our culture does not allow us to talk about sex. When children are older, then they can learn about sex. We believe from our parents and ancestors that it is wrong to talk about 'private matters' – the reference is to sex education.

Regarding sex talk, P1 stated:

At our church, the leader or pastor is very strict. He does not like us to talk or bring up the topic of sex education. He tells us that it is wrong for parents to talk about sex education to their young children.

In her response, P4 indicated:

My pastor says that only he can talk to the youth about sex education. It is wrong for schools to start telling children about sex education in the early grades. They are too small. It is for this reason that I don't agree that my child should learn about sex education. My pastor says it is morally wrong for teachers and parents to talk to their children about sex. It is not proper in the African culture and I may ask the parents not to attend the church anymore.

In her response, P5 stated:

In our culture, sexuality education is regarded as education for adults. Whenever people want to talk about it, children are asked to go and play away from adults. Even in churches, when adults want to talk about anything that relates to sexuality, the junior Sunday school teachers are asked to take children out of the church and entertain them with other things.

From the above discussion and the participants' voices, there is evidence that the Zimbabwean culture does not allow teaching CSE to young learners. Furthermore, Mahoso (2018) found that due to religious and cultural beliefs in Zimbabwe, parents do not discuss sexuality education with their children. Nkoy et al. (2022) found that in most cultures, 'sex talk' is for adults only. Giddens (2009) states that in Zimbabwe, if any parents go against the cultural and religious norms and values, these parents are not welcomed into their religious gatherings. For fear of being ousted, most parents are complacent and abide by their elders' and religious leaders' rules and conditions (Venketsamy, 2018). According to the meso-level in the ecological model, religious leaders have a great influence on parents. Mahoso (2018) states that in Zimbabwe, it must be recognised that the socio-cultural and religious values of the community would influence how CSE can be implemented since the very concept of CSE is taboo among community leaders. UNESCO (2023: 9) reports that

CSE content must respond appropriately to the specific context and needs of young people to be effective. This adaptability is central to culturally relevant programming and includes understanding cultures' messages about gender, sex and sexuality.

Another issue raised by parents is the 'cultural church convention' that significantly influences parents and their views on implementing CSE in schools. The participant mentioned that children are driven away from adults whenever church members want to deliberate on issues that relate to sexuality. Muridzo and Malianga (2015) state that churches have much control over the Zimbabwe community and the children's education. They have a significant influence on parents and the decisions they must make. As a result of the steadfast doctrines and belief, the implementation of CSE is a far cry in Zimbabwe. Therefore, the authors believe that child sexual abuse will continue to rise due to allegiance to the church rather than protecting their children.

Views of parents regarding the teaching of CSE in schools

In the final question to parents, the researcher asked parents their views about teaching CSE in schools. Their initial reaction was that of surprise, reluctance and apathy. After a lengthy discussion on what CSE entails and a clear understanding, the participants realised that CSE is not only about sex education but also about the holistic development of young children's well-being and this statement aligns with UNESCO (2015b) which articulates that CSE is a holistic and comprehensive approach to the teaching of sexuality education. Most parents agreed that

If the content is not only about sex education but the well-being of our children, then we do not have a problem. What we would like to do is to become part of the school that is developing the

lessons for the children. As parents, we would like to know what the teachers are teaching our children. We don't want them to teach them about having sex, but rather how to take care of their bodies, make friends, eat healthily, exercise and stop bullying others in school.

Parent 2 stated:

I don't mind my child learning CSE content so long as this will help my child to know when they are being abused. They must be able to know the difference between good touch and bad touch.

Parent 5 stated:

If CSE is about teaching our children to speak out, tell someone that they are being abused, and learn to say 'no' when they don't like how they are being touched, then this will be a good lesson for them to learn. However, if they are going to teach about sex and having sex, then I am not going to allow my child to learn.

The views shared by most of these parents present a very positive view towards teaching CSE. Simuforsosa (2015) agrees that parents must become educational partners and be consulted regarding CSE content. Kirby (2011) concurs that for each grade, the CSE content must be age-appropriate, contextually relevant, and address current issues. Both Venketsamy and Kinnear (2020) conclude that countries that intend to implement CSE must develop policy guidelines and detailed scripted lesson plans for teachers so that they teach what is scripted and relevant for a particular grade. Kirby (2011) argues that CSE can only be successfully taught with the consent of parents and other stakeholders. All stakeholders must become involved in the conceptualisation of the programme before it is implemented. DBE (2016) articulates that all policies and programmes aligned to CSE must be appropriately advocated, teachers must be capacitated, and parents and other stakeholders must be consulted so that there is uniform acceptance for implementation.

RECOMMENDATIONS

This study found several challenges among the people of Zimbabwe regarding teaching CSE to young learners in schools. Some of the challenges cited by the participants were religious factors, culture, parents' attitudes, ancestral belief norms and values. Since the community is deeply entrenched in these value systems, Mahoso (2020) stated that parents are reluctant to engage in sex education with their children despite the increased child abuse in Zimbabwe (University of Edinburgh, 2016). Emanating from the findings and discussions above, the researcher proposed the following recommendations: Zimbabwe needs to, first and foremost, begin with a consultative forum that encourages the participation of teachers, parents, religious leaders and community leaders in developing a framework for the inclusion of CSE into the curriculum to minimise and eradicate child sexual abuse. Robust communication and consultation should be encouraged with different views for and against implementing CSE in schools.

Another recommendation is to organise capacity-building workshops for all relevant stakeholders to allow the teaching of CSE age-appropriate content. These workshops should enlighten participants that CSE is not about sexuality education but about the well-being of young children. The focus should also be on informing parents that CSE is about developing life skills such as decision-making, communication, assertive skills and interpersonal skills. These skills will empower young children to communicate incidents of abuse without fear or intimidation. Through the CSE programme, young children will also become aware of what is abuse and non-abuse.

Finally, it is recommended that both the school and parents should become partners in education, especially regarding CSE. Schools should inform parents that each grade will have its age-appropriate content. As children progress to higher grades, the content will be aligned accordingly to meet their needs. For example, young children will be taught about their bodies in the early grades, while in higher

grades, learners will be taught about the body's biology. The scripted lesson plans on CSE will have continuous sequence and progression.

CONCLUSION

There is ample evidence about child abuse in Zimbabwe that warrants the teaching of CSE to young children. This study found that parents are highly influenced by their religious and cultural values in Zimbabwe. Although there is a high rate of child abuse, parents believe that the teaching of CSE, especially sexuality education, is the responsibility of the religious leader. Several cultural factors have also been found to be prohibitive to the provisioning of CSE to young children. Teaching CSE in Zimbabwe is regarded as taboo. Due to the lack of knowledge and understanding of CSE, initially, participants were reluctant about teaching CSE to young children. However, when they began to understand that CSE focuses on the holistic development of learners, they were more accepting and accommodating of their children being taught CSE age-appropriate content. Parents agreed that their young children will learn appropriate communication skills (they would report incidence of abuse), assertive skills (they will learn to say 'no' when they experience inappropriate behaviours) and decision-making (they have the right to make decisions about how they feel). Parents agreed that they should protect their children and that the skills they would learn through the CSE programme would help protect them (children) from harm. Therefore, this study reflects the need for CSE to be taught to young children in primary schools. However, parents in Zimbabwe are encouraged to cooperate and work collaboratively with teachers to implement CSE to eradicate child abuse. The need for advocacy for providing CSE to young children has been recommended, as well as workshops to educate parents on the significance of teaching CSE to young children. This is expected to help these parents develop a positive attitude toward teaching CSE to young children to reduce child sexual abuse in Zimbabwe.

REFERENCES

- Bloor, M., Frankland, F., Thomas, M. & Robson, K. (2002). *Focus group in social research*. London: Sage.
- Bowman, C. G. & Brundige, E. (2014). Child sexual abuse within the family in Sub-Saharan Africa: Challenges and change in current legal and mental health responses. *Cornell International Law Journal*, 47(2), 234-297.
- Browes, N. C. (2015). Comprehensive sexuality education, culture and gender: the effect of the cultural setting on a sexuality education programme in Ethiopia. *Sex Education*, 15(6), 655-670.
- Bryman, A. (2012). *Social research methods*. New York: Oxford University Press.
- Child Welfare Information Gateway. (2016). *Determining the best interests of the child*. Washington, DC: Department of Health and Human Services, Children's Bureau.
- Childline. (2015). *Child sexual abuse*. Poster. Harare: Childline.
- Childline Zimbabwe. (2010). *An analysis of child abuse cases reported to Childline Zimbabwe in the period December 31st, 2008 to January 1st, 2010*. Harare: Childline.
- Creswell, J. W. (2009). *Research design: A qualitative, Quantitative, and Mixed method approach*. United States of America: Sage Publications.
- Deb, S. (2018). Role of the Family in Child Protection. In *an Empirical Investigation into Child Abuse and Neglect in India. Burden, Impact and Protective Measures. Child Abuse and Neglect: An Introduction*, 1-40. Singapore: Springer.

Department of Basic Education. (2016). *Integrated Strategy on HIV, STIs and TB 2012-2016*. Pretoria: Government Printers.

Essa, E. L. (2014). *Introduction to Early Childhood Education* (7th ed.). New York: Wadsworth.

Feltoe, G. (2017). Strengthening our law on child sexual abuse. *Zimbabwe Electronic Law Journal* 2(1), 51-56.

Giddens, A. (2009). *Sociology* (6th ed.). Oxford: Polity Press.

Gudyanga, E., De Lange, N. & Khau., M. (2019). Zimbabwean secondary school guidance and counselling teachers' teaching sexuality education in HIV and AIDS education curriculum. *Journal of Social Aspects of HIV/AIDS* 16(1), 35-50.

Hall, M & Hall, J. (2011). The long-term effects of childhood sexual abuse: Counseling implications. <http://counselingoutfitters.com>

Haralambos, M. & Holborn, M. (2013). *Sociology: Themes and perspectives* (8th ed.). London: Collin Harper Publishers.

Katsande, W. (2012). *Violence and abuse in child-headed households causes effects and remedies: A case study from Mashonaland East province, Zimbabwe*. New Hampshire: Southern New Hampshire University.

Ketting, E. & Ivanova, O. (2018). Sexuality education in Europe and Central Asia: State of the art and recent developments. Cologne: Federal Centre for Health Education.

Khau, M. (2012). Sexuality education in rural Lesotho schools: Challenges and possibilities. *Journal of Sex Education*, 12(4), 411-423.

Kinnear J. (2018). *Strengthening comprehensive sexuality education within the curriculum in the early grades*. Unpublished thesis. University of Pretoria, South Africa.

Kirby, D. (2011). *A Way Forward: Recommendations to the South African DBE to Design and Implement an Effective HIV Education Curriculum that reduces sexual risk for HIV*. Scotts Valley, CA: ETR Associates.

Knapp, T. Losert, E. Malmrose, A., Mullins, E. & Newman, P. (n.d). Bronfenbrenner's Bioecological Model. *Education-portal.com*. <https://educ3040fall13.weebly.com/>

Kurebwa, J. & Kurebwa, N. Y. G. (2014). Copying strategies of child-headed households in Bindura urban of Harare, Zimbabwe. *International Journal of Innovative Research and Development*, 3(11), 236-249.

Lukolo, L. N. & Van Dyk, A. (2015). Parents' participation in sexuality education of their children in rural Namibia: A situational analysis. *Global Journal of Health Science*, 7(1), 35-45.

Mahoso, T. (2020). Ecosystemic factors affecting comprehensive sexuality education in early grades in Zimbabwean school. Unpublished PhD thesis. University of Pretoria, South Africa.

Mncube, V. & Dube, B. (2019). Reconceptualising teacher professionalism to address school violence: a quest to end corporal punishment. *The Independent Journal of Teaching and Learning* 14(1), 86-101.

The Teaching and Learning Office of the HEI is acknowledged for the valuable support and funding provided to conduct the research. We also wish to thank all the participants for taking the time to participate in the study, as well as Dr Sachin Suknunan for assistance with data analysis.

- Mantula, F. & Saloojee, H. (2016). Child Sexual Abuse in Zimbabwe. *Journal of Child Sexual Abuse* 25(8), 866-880.
- Maree, K. (2015). *First steps in research*. Pretoria: Van Schaik.
- Maviya, N. V. (2019). *Comprehensive sexuality education*. Harare: Plan International. <https://www.gfmer.ch/SRH-Course-2019/adolescent-health/pdf/AH1-Natasha-Veronica-Maviya.pdf>
- Mhlanga, J. (2016). Child sexual abuse in Zim: Call for action. Retrieved 2 February 2023 from <https://www.newsday.co.zw/2016/09/child-sexual-abuse-zim-call-action/2>
- Morrison, G. (2015). *Early childhood education today* (13th ed). London: Pearson.
- Mugabe, M., Chingombe, S.I. & Chinyoka, K. (2016). Psychosocial effects of child sexual abuse on the academic performance of Grade Seven learners in Gweru Urban, Zimbabwe. *Journal of Emerging Trends in Educational Research and Policy Studies*, 7(4), 255-263. <https://hdl.handle.net/10520/EJC196825>
- Muguwe, E. & Gwirayi, P. (2011). The effectiveness of mechanisms and guidelines for implementing the AIDS action programme in Zimbabwean secondary schools. *Journal of Sustainable Development in Africa*, 13(3), 199-214.
- Muridzo, N. & Malianga, E. (2015). Child sexual abuse in Zimbabwe: Prevention strategies for social workers. *African Journal of Social Work*, 5(2), 41-62.
- Mushohwe, B. (2018). Child prostitution in Zimbabwe and a tragedy of the victim by choice. An overview. *Zimbabwe Electronic Law Journal*. https://zimlil.org/zw/journal/2018-zelj-01/%5Bnode%3Afield_jpubdate%3Acustom%3AY/child-prostitution-zimbabwe-and-tragedy-
- Nkoy, L., Venketsamy, R. & Sing, N. (2022). Parents' views on teaching comprehensive sexuality education in the early grades: a South African case study. *Journal for the Child Development, Exceptionality and Education*, 3(2), 71-85.
- Nyamanhindi, R. (2015). *Hidden in plain sight: Child sexual abuse in Zimbabwe*. Retrieved 12 February 2023 from <https://www.herald.co.zw/hidden-in-plain-sight-child-sexual-abuse-in-zimbabwe/>
- Nyarko, K., Adentwi, K. I., Asumeng, M. & Ahulu, L. D. (2014). Parental attitude towards sex education at Lower Primary in Ghana. *International Journal of Elementary Education*, 3(2), 21-29.
- Paquette, D. & Ryan, J. (2015). *Bronfenbrenner's Ecological Systems Theory*. https://dropoutprevention.org/wp-content/uploads/2-15/07/paquetteryanwebquest_-20091110.pdf
- Parliament of South Africa. (2007). *Criminal Law (Sexual Offences and Related Matters) Amendment Act, 2007*. Pretoria. Government Printers.
- SIDA, (2016). Health: Both a Prerequisite and an outcome of Sustainable Development. Stockholm: SIDA.
- Simuforosa, M. & Rosemary, N. (2015). Causal factors influencing girl child school dropout: A case study of Masvingo District secondary schools. *Journal of Educational Policy and Entrepreneurial Research*, 2(1), 51-57.
- Simuforosa, M. (2015). *Child sexual abuse by teachers in secondary schools in Masvingo district in Zimbabwe: perceptions of selected stakeholders (Doctoral thesis)*. University of South Africa: Pretoria.

South African Medical Journal. (2018). The prevalence of child sexual abuse in South Africa: The Optimus Study South Africa. *S.Afri. med. Journal*, 108(10). <http://dx.doi.org/10.7196/samj.2018.v108i10.13533>

Tshabalala, T. & Khosa, M. (2014). Awareness of various forms of child abuse: Pupils' attributions – A case study of Gomadoda cluster. *Asian Journal of Social Sciences and Management Studies*, 1(1), 23-28.

UNESCO. (2012). *Comprehensive sexuality education: The challenges and opportunities of scaling-up*. Paris: UNESCO.

UNESCO. (2013). *Sexuality education: A ten-country review of school curricula in East and Southern Africa*. Paris, New York: UNESCO.

UNESCO. (2015b). *Comprehensive sexuality education in teacher training in Eastern and Southern Africa*. Paris: UNESCO.

UNESCO. (2018). *International technical guidance on sexuality education: An evidence-informed approach*. New York: UNESCO.

UNESCO. (2023). *Violence in schools in Africa: prevalence, impacts and potential solutions CSE in Eastern and Southern Africa*. Paris: UNESCO.

UNFPA. (2014). *Operational Guidance for Comprehensive Sexuality Education: A Focus on Human Rights and Gender*. New York: UNFPA.

UNICEF. (2014). *Hidden in plain sight: a statistical analysis of violence against children*. <https://data.unicef.org/resources/hidden-in-plain-sight-a-statistical-analysis-of-violence-against-children/>

United Nations Educational, Scientific and Cultural Organization (UNESCO). (2009). *International technical guidance on sexuality education – An evidence-informed approach for schools, teachers and health educators*. Paris: UNESCO.

United Nations Population Fund (UNFPA). (2015). *The evaluation of comprehensive sexuality education programmes: A focus on the gender and empowerment outcomes*. New York: UNFPA.

University of Edinburgh (UoE). (2016). *Childline Zimbabwe and the United Nations Children's Fund (UNICEF) Zimbabwe. A Secondary Analysis of Childline Zimbabwe Data*. Harare: UNICEF.

Venketsamy, R. (2018). Challenges experienced by Black teachers teaching Comprehensive Sexuality Education in schools. *Journal of Educational Studies* 17(1), 20-43.

Venketsamy, R. & Kinnear, J. (2020). Strengthening comprehensive sexuality education in the curriculum for early grades. *South African Journal of Childhood Education*, 10(1). <https://doi.org/10.4102/sajce.v10i1.820>

World Health Organization (WHO). (2010). *Standards for Sexuality Education in Europe: A framework for policymakers, education and health authorities and specialists*. Cologne: Federal Centre for Health Education. https://www.bzga-whocc.de/fileadmin/user_upload/WHO_BZgA_Standards_English.pdf

Yin, R. K. (2011). *Application of case study research: Qualitative research design and data gathering techniques*. Pretoria: Van Schaik.