

It's time we had a talk about sex, say SA schoolkids

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Children in sub-Saharan Africa are highly aware of the sexualised world they live in and are at dire risk falling pregnant or contracting HIV/Aids or both as teenagers if they are treated as mere innocents, a recent Human Sciences Research Council (HSRC) and Cambridge University study has found.

And children themselves say they want to discuss sex -- because they see evidence of it all around them in any case.

More than 89 000 South African schoolgirls were already pregnant or fell pregnant between July 2009 and July 2010, according to the Statistics SA General Household Survey 2010: Focus on Schooling report. The report was made available on the national department of basic education's website last week.

"We must stop thinking that if kids don't know about sex it will protect them against diseases and pregnancy," Sharlene Swartz, research director of Human and Social development at HSRC, told the *Mail & Guardian*. "Knowledge protects them. And we need to know about young peoples' multiple know ledges which then need to be incorporated in how we teach them about sex, love, Aids and relationships."

"Studies all over the world show that [children who are exposed to sex education will delay their sexual debut](#) by two years ... sex education does not lead to experimentation," she said.

She was speaking after the launch of the sex education book *Old Enough to Know* in Pretoria on Monday. The book is based on work by researchers from the HSRC, Cambridge University, and the Aga Khan University in Tanzania who analysed the sources and content of pupils' community-based sexual knowledge and how these interact with sex and Aids education programmes in schools.

The research was set against the backdrop of sub-Saharan Africa being the region of the world most severely impacted upon by HIV/Aids and HIV-related education as a "social vaccine".

In 2008, 5.2-million people in South Africa were HIV-positive, according to the HSRC's national HIV Prevalence, Incidence, Behaviour and Communication Survey.

During the first phase of the collaborative study, research was conducted in eight schools in Kenya, Tanzania and South Africa in consultation with 125 pupils around the age of 12, 45 teachers and 40 stakeholders including parents and religious leaders.

The research discovered that pupils had a "fairly sophisticated" knowledge of sex and were exposed to prostitution, pornography, transactional sex and drug abuse in their homes and communities.

The problem was highlighted on Tuesday when a video of a [Sowetan school girl being gang-raped](#) by a group of teenagers surfaced.

The girl went missing on March 25 and last week a cellphone video emerged of her being raped by at least seven people between the ages 14 and 20, said warrant officer Kay Makhubele.

Binti*, a 12-year-old pupil from a Kenyan school spoke about drugs and sexual practice in her community.

"When they inhale these substances, they don't wait to get a room, they get any man and start having sex in public ... I see them outside our house and in the football field. It means the children know what sex is, because they see it."

Researchers encouraged pupils to make videos and take photographs of the things they saw in their homes and neighbourhoods. Among the media sent in by pupils were photographs of drug abusers, prostitutes and pornographic posters. They also photographed magazines, teachers, friends and books when asked to show from whom they learnt about sexuality.

The study discovered that pupils wanted to be able to participate in sex and HIV/Aids education in schools. They wanted the opportunity to have questions answered and misconceptions explored. They wanted dialogue.

Naledi*, a 12-year-old South African pupil said: "There is no need for teachers to be shy... they must talk to us because Aids ... it is the most infectious disease in South Africa. They must be firm when they talk to us."

But the study also found that teachers' had their own challenges in answering such calls. They lacked training, clear guidelines and confidence in how to provide sex education -- and faced cultural barriers including the norms of not speaking about sex to children.

"It was very clear that teachers were experiencing religious, parental and cultural sanctions," Swartz said.

"In South Africa, for example, teachers were very afraid that if they gave too much information to their pupils they would be in trouble with parents. They were confronted with the view of 'we don't use words like that because it's not our culture'."

An interesting comparison that arose during the research showed that South African pupils wanted "more physical activism around Aids".

"South African pupils wanted to attend things like candlelight vigils and marches. They had heard all about the Treatment Action Campaign. They wanted to do physical activist things," Swartz said.

She believed this to be rooted in South Africa's strong tradition of activism. "We didn't see that at all in other countries," she said.

The second phase of the study saw researchers going back to those same schools as well as schools in three other countries: Botswana, Ghana and Swaziland.

Here an intervention in schools was initiated in order to encourage discussions about sex and HIV/Aids.

Curriculum Development Groups (CDG) were run in schools as an experiment. They comprised of four pupils (chosen by their peers), the class teacher, two representatives from the local community, and a consultant from a non-governmental organisation (NGO), for example.

The groups met twice a term with the aim of bringing together out-of-school and in-school knowledge, encouraging meaningful discussion about sexual matters and finding out what pupils wanted to learn and how they wanted to be taught.

Researchers found that some of these groups learned to talk together meaningfully and responsibly and that there was a "powerful possibility of change which could transcend cultural barriers and lead to the emergence of new pedagogy and curricula".

Speaking at Monday's launch, Professor Leickness Simbayi, executive director of the HSRC HIV and Aids programme, welcomed the study saying that the 10-14 age group was largely marginalised in HIV/Aids research but was a "critical age in which to intervene".

He questioned many parents' attempts to ignore their children's awareness of sex saying: "Let's think about what it must be like to live in a single-room house in an informal settlement with one's family".

"Many parents think their children are fast asleep but end up having sex while their children watch."

*not their real names

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