Secondary School Teachers' Attitudes towards Provision of Sexual and Reproductive Health Education to Learners with Deafness in Tanzania

Lwimiko Salum Sanga¹, Mwajabu K. Possi² & Joyce Sifa Ndabi³

^{1 & 3} School of Education, University of Dar es Salaam-Tanzania

³ Mbeya College of Allied Sciences, University of Dar es Salaam – Tanzania

Email¹: lwimikosanga@gmail.com

Abstract

This study explored the attitudes of secondary school teachers towards provision of Sexual and Reproductive Health Education (SRHE) to secondary school learners with deafness in Tanzania. A small-scale survey design was used. Six regions and seven secondary schools with learners with deafness were purposively sampled. Similarly, 30 Biology and Civics teachers were purposively recruited for the study in which a questionnaire was used to gather data. The findings indicated that teachers had a negative attitude towards the provision of SRHE with the mean score of 37.83. Additionally, Kruskal–Wallis *Test showed no statistical difference on age* (p = .252), sex (p = .778), teaching experience (p = .67), levels of education (p = .185) and religion (p = .884). The study concludes that the attitude of teachers towards teaching SRHE to learners with deafness was negative due to lack of training on deafness and SRHE. The study recommends to the government and relevant institutions to provide both pre – and in-service training on sexuality issues in secondary schools.

Keywords: attitude, deafness, education, reproductive health, sexuality

Introduction

The world has experienced cultural practices that affect the communication between old and young generations on issues related to sexuality (Mlyakado, 2013; Mprah, 2013; Sanga, 2013). Lack of communication on sexuality issues has mainly been due to cultural beliefs. For example, it is unethical to discuss sexuality issues especially between young and old people and family members (Coyle, Anderson & Laris, 2016). As such, a hot debate emerged on whether or not Sexual and Reproductive Health Education (SRHE) should be taught in schools and in public (Shawishi, 2014; Sule et al. 2015; Yanka, 2016). The debate led to establishment of sexuality topics in schools in many African countries (United Nations Educational Scientific and Cultural Organization [UNESCO], 2015; UNESCO & United Nations Population Fund [UNFPA],

2012). The UNESCO and UNFPA offered a guideline on how sex education should be provided in schools. Each country adopted the guideline and used it in accordance with the cultural beliefs of each country. Similarly, the name for sexuality education differed from one country to another. Some countries called it sex education, others called SRHE, others called it life skills, some called family life skills and others called it sexual and relationship education (UNESCO & UNFPA, 2012). However, in Tanzania, SRHE topics were incorporated in Civics and Biology subjects in secondary schools. The subjects deemed relevant as they contained topics related to human rights, culture and human anatomy.

The provision of SRHE to secondary school learners is as important as any other education content. In developed countries, SRHE has been given a due respect and implementation as it has been identified to be one of the most important contents to help adolescents make informed decisions on sexuality (Yanka, 2016). It is only in the last three decades that SRHE has gained much attention in developing countries due to the advent of HIV/AIDS (Groce et al., 2013). Moreover, the SRHE content was not equally provided to all youth, for instance, girls seemed to benefit more than boys. On the other hand, learners with disabilities especially those with deafness were disadvantaged because most of the communities had a negative attitude towards their ability to learn and sexual interests (Anderson, Chu & Xu, 2013; Furguson, 2014).

Teachers' attitude towards provision of any education affects their intention to implement it. Similarly, attitude towards learners with deafness either fosters or limits teachers' intention to teach them. Attman (2008) examined various definitions of attitude including conscious and unconscious mental views developed via cumulative experiences. Another definition of attitude is that of a complex mental state which involves beliefs, feelings, values and dispositions that lead people to act in certain ways. Attitudes have three components which are cognitive or knowledge, affective or emotional development, and behavioural tendency.

According to Awaru (2020), SRHE is a product of discourse systems and practices which are increasingly intensive. They are not natural reality but form supervision and control to individuals. Due to such discourses, teachers differ from each other in teaching and learning process (Khairutdinova, Selivanova & Abidildina, 2016). The reasons for such differences are caused by their knowledge on the subject matter, skills they possess, experience in the teaching career and attitudes they have. In teaching SRHE, teachers' attitude differs due to religious affiliation, age, gender, level of education and teaching experience. These variations are the ones which form teachers' interests in

teaching SRHE. Attitude comes with a belief that there are no specific rules or objective ways to follow when teaching. It is again impossible for human beings with different backgrounds and experiences to do things in the same way (Bezerra & Maida da Costa, 2016).

It has been reported that older teachers were less likely to teach SRHE comfortably due to the culture of silence (Swanson, Puchner & Klein, 2012). The sex of the teacher might affect his/her attitude towards provision of SRHE because culturally male learners were trained by male specialists and girls with female specialists (Kapinga & Hyera, 2015; Shawishi, 2014). Teachers need to adjust themselves to be able to teach SRHE to both boys and girls in the same class including learners with deafness. The teaching experience is another factor associated with the attitude towards provision of SRHE to learners with deafness. It is expected that more experienced teachers would have a positive attitude as they have been teaching it for some time. However, the provision of SRHE has been affected by the attitude that teachers have which is connected to cultural beliefs. In some contexts certain teachers still have a belief that SRHE should not be taught in public (Donkor & Lariba 2017).

Previous studies conducted in Tanzania indicated that teachers had a positive attitude towards teaching SRHE (Bilinga, 2012; Kapinga & Hyera, 2015; Mkumbo, 2012). In order to have an effective SRHE in secondary schools, teachers need to have a positive attitude towards both learners with deafness and SRHE. However, the attitude of Biology and Civics teachers towards provision of SRHE to learners with deafness remains unknown. As such, this study explored the attitudes of secondary school teachers towards the provision of SRHE to learners with deafness in Tanzania. Two research questions were set to extract the required data:

- i. What are the attitudes of secondary school teachers towards the provision of SRHE to learners with deafness?
- ii. How are socio-demographic factors such as education, religion, age and sex associated with teachers' attitudes towards the provision of SRHE to learners with deafness?

Provision of SRHE

Unlike other educational programmes, SRHE encounters barriers in its implementation due to cultural and religious beliefs, and a negative attitude towards people with deafness (Kapinga & Hyera, 2015; Yankah, 2016). People with deafness were not involved in the teaching and learning of sexuality issues in the traditional educationbut also during colonial and post-colonial education with a belief that they were useless in the community. The fact that in African

traditions teaching of SRHE is a taboo affected the freedom of teaching it to a large community including learners with deafness. Another factor was religious beliefs held among religious believers that having sexuality information at young age would make learners initiate sexual intercourse out of wedlock which is a sin (Allen, 2015; Groce et al., 2013). Similarly, negative attitude towards learners with deafness which is associated with the thinking that such learners cannot learn effectively affects their learning pace and success.

Additionally, studies have indicated that there are challenges in passing sexuality knowledge from old to new generations as the topics are regarded a taboo in many societies (Mkumbo, 2012; Odebode, 2019; Salami, 2015; Yanka, 2016). In a study conducted in Bawku Municipal district in Ghana by Donkor and Lariba (2017), it was found that parents were unable to make time to discuss sexuality issues with their children, which in turn lead to teenage pregnancies. Parents withheld information about sexuality with a belief that children do not know anything about sex. Similarly, Salami (2015) in a study conducted in Niger-Delta, Nigeria, found that sexuality issues were regarded as a taboo. Concluding from these findings, parents are regarded as the first teachers of their children. However, culture has moulded them not to communicate on sexuality issues. Teachers at school are expected to communicate on sexuality issues without biases developed from their culture. The discussion on sexuality becomes difficult when an old person wants to communicate with young ones.

In Tanzania, SRHE started as Family Life Skills in 1995 but later on it was integrated into Civics and Biology in 2005. In these two subjects some topics related to sexuality issues are incorporated. Therefore, Biology and Civics teachers are expected to provide such education in accordance with the syllabus. Studies have shown that teachers agreed that sexuality education should be taught in both secondary and primary schools. Moreover, teachers were not comfortable in teaching some of the topics such as homosexuality and mentioning names of genitalia. They expressed discomfort because culturally such topics cannot be discussed publicly especially between the young and old generations. On the other hand, people with disabilities were not involved in any training related to sexuality as they were deemed unfit and asexual. As such, negative attitude towards the ability of learners with deafness was developed.

Deafness and sexuality education

Different scholars have provided different definitions of deafness. Some define deafness as a condition whereby a person cannot hear anything at all and usually they are unable to detect sound despite the highest volume possible (Dominica, 2012; National Institute on Deafness and other Communication Disorders [NIDCD], 2015) while others define it as hearing ability that precludes

successful processing of linguistic information through audition, with or without a hearing aid (Hallahan, Kauffman, & Pullen, 2012). Generally, people with deafness have impairment in hearing but have some residual hearing. The causes of deafness are linked to the location of the problem within the hearing mechanism (Hallahan, Kauffman, & Pullen, 2012). As such, Hallahan, Kauffman and Pullen (2012) categorize the causes of deafness into three groups, namely conductive, sensorineural and mixed. A conductive hearing impairment occurs when there is an interference with sound transfer along the conductive pathway of the middle or outer ear. The problems in the inner ear lead to sensorineural hearing impairment. Then, the combination of the two leads to mixed hearing impairment. More specifically, deafness can be caused by ear infections and long-term exposure to loud noises like high-frequency sounds (NIDCD, 2015).

Generally, literature suggest that it was believed that youth with disability cannot control their sexuality, are oversexed and have uncontrollable sexual urges and they do not have sexual feelings, and are childlike (Groce, et al., 2013). More specifically, learners with deafness were not involved in all forms of education due to the nature of their disability. It was believed that they cannot comprehend what was being taught. However, a number of studies have proven that people with diverse disabilities are sexually active (Groce, et al., 2013)

Attitude towards teaching SRHE to secondary school learners with deafness

The attitude of teachers towards teaching SRHE to learners with deafness is very important as it guides their intention to teach effectively or not. Therefore, according to Attmann (2008) attitude refers to conscious and unconscious mental views developed via cumulative experiences. Gazzaniga and Heatherton (2003) regard attitude to occur when objects or ideas are evaluated to indicate like or dislike towards them. Attitude is learnt from socialization process and is characterized by having an object, direction, consistency and occurs within a situation. However, attitudes are not static they keep changing (Attmann, 2008; Gazzaniga & Heatherton, 2003). Generally, studies have indicated that attitude of both teachers and learners towards SRHE in Tanzania is positive (Bilinga, 2012; Kapinga & Hyera, 2015; Mkumbo, 2012). Teachers' and learners' positive attitude entails the need for continued provision of SRHE in schools in Tanzania. The positive attitude that teachers and learners have predicts the teachers' intention to teach SRHE in schools and learners readiness to acquire knowledge and skills related to sexuality.

Mkumbo (2012), in a study on teachers' attitudes towards and comfort about teaching school-based sexuality education in Sengerema and Kinondoni which involved 198 respondents, revealed that 92.2% of teachers in Kinondoni and 90% of teachers in Sengerema had a positive attitude towards teaching of

SRHE in schools. The study presents data from primary schools teachers and it is not reported whether teachers of learners with deafness were involved in the study. However, the data presented offers an insight for the current study which focuses on secondary school teachers and learners with deafness.

Additionally, Bilinga (2012) conducted a cross-sectional survey in Morogoro which involved 390 respondents including teachers, parents, pupils and heads of schools. It was reported that teachers and pupils had positive attitude towards SRHE and they believed that it would reduce the spread of HIV and STIs and early pregnancies. Although the study did not capture information on learners with deafness, it provides the general view of teachers and learners' attitude towards SRHE.

Methodology

A small-scale survey design was used to explore secondary schools teachers' attitude in provision of SRHE to learners with deafness. Small-scale survey is conducted to a small area and sample. Small-scale survey design was appropriate as it allowed the researcher to collect quality information from different regions quickly and inexpensively (Ary et al., 2010; Cresswell, 2013). Small-scale survey allowed the researchers to collect information from a small number of Biology and Civics teachers and six regions with secondary schools with learners with deafness.

The study was conducted in six purposively sampled regions (Iringa, Kilimanjaro, Mtwara, Mwanza, Tabora, and Tanga) in Tanzania with inclusive secondary schools having learners with deafness. Teachers from seven secondary schools were involved in the study. Moreover, the study involved 30 Civics and Biology teachers who were purposively recruited. About 22 of teachers were males while eight were females. There is a limited number of Biology and Civics teachers in secondary schools especially Technical Secondary Schools where Biology subject is not a core subject for all the learners whereas a student has to take either Geography or Biology. This makes fewer Biology teachers at each school. Likewise, Civics subject is one of the subjects with only a few periods per week. Only two periods of 40 minutes each are allocated for Civics for each class. As such, only a few teachers are also allocated for each school. The teachers were purposively selected because they were teaching subjects that contain SRHE topics. Due to the limited number of Biology and Civics teachers in inclusive schools having learners with deafness, all teachers teaching Civics and Biology at each selected school participated in the study. The study used a questionnaire to collect information on secondary school teachers' attitude towards the provision of SRHE from teachers. The closed ended questions were relevant because they provided a self-rating for teachers

in relation to their attitude towards provision of SRHE to secondary school learners with deafness (Ary et al., 2010; Cresswell, 2013). The Likert-Scale type of questions was used to measure teachers' attitudes towards the provision of SRHE to learners with deafness in secondary schools. The Likert type questions consisted of "Strongly agree = 5, agree = 4, undecided = 3, disagree =2 and strongly disagree =1". The questionnaire with 17 items was adopted from the Attitudes Scale (Shippen, et al., 2005). The scale had both positive and negative items. The positive items were enthusiastic, anxious, comfortable, interested, confident, pleased, accepting, prepared and happy. The scale was reversed for feelings like scared, angry, unwilling, nervous, weak, annoyed, resistant and pessimistic. The scores for negative items were reversed to obtain the actual scores for each item. The minimum expected score was 17 and the maximum was 85. Therefore, in order to obtain the total scores the 17 items were multiplied by five and then divided by two which were the positive and negative attitude. In other words, scores between 1% and 50% were reported as negative while scores between 51% and 100% were reputed positive. The questionnaire was directly administered by the researchers. Reliability in Cronbach's Alpha obtained was 0.79 for the attitude scale which had 17 items.

The Chi-square (χ^2) statistical tests were conducted to examine the relationship between teachers' attitude and age, sex, education and religion. Then, χ^2 tests were computed for each item and the levels of statistical significance were also obtained. Additionally, non-parametric statistics were conducted using Kruskal-Wallis Test to ascertain the statistical difference in attitude at various levels of each socio-demographic characteristic. Non-parametric statistics were used due to the small sample of teachers which could not allow parametric analysis to be run. Non-parametric statistics allowed generalization of the findings to Biology and Civics teachers only. These statistical analyses were performed with the help of Statistical Package for Social Sciences (SPSS) version 22, computer-assisted programme.

Findings and Discussion

Socio-demographic Characteristics of Respondents

It was deemed important to gather information on the socio-demographic characteristics of the respondents so that their experiences in SRHE could be captured. The demographic information included the variables of sex, level of education, religious affiliation, and teaching experience. The demographic characteristics of the respondents are as summarized in Table 1.

Table 1: Teachers' Socio-demographic Characteristics

Demographic variables		Male		Female		Total
	f	%	f	0/0	f	%
Age						
25-29 years	1	3.3	2	6.7	3	10
30-34 years	10	33.3	2	6.7	12	40
35-39 years	5	16.7	1	3.3	6	20
40-44 years	4	13.3	2	6.7	6	20
45-49 years	1	3.3	0	0	1	3.3
50-54 years	1	3.3	1	3.3	2	6.6
Level of Education						
Diploma	2	6.7	0	0	2	6.7
Bachelor	19	63.3	7	23.3	26	86.6
Masters	1	3.3	1	3.3	2	6.6
Religion						
Muslim	5	16.7	2	6.7	7	23.3
Christian	17	56.7	6	20	23	76.7
Experience in teaching Bio	logy and C	Civics				
1-3 years	2	6.7	2	6.7	4	13.4
4-6 years	6	20	1	3.3	7	23.3
7-9 years	8	26.6	2	6.7	10	33.3
10-12 years	3	10	0	0	3	10.0
13+ years	3	10	3	10	6	20.0

N = 30; f = frequency; % = percent

As shown in Table 1, about 12 of the teachers were between 30-34 years of age, making the largest number of the respondents in their category. About 26(86.6%) of teachers had Bachelor Degree in Education. On the other hand, majority of teachers were Christians 23(76.7%). It was also found that most of the teachers 10(33%) had experience of teaching in secondary schools between seven and nine years followed by 7(23.3%) teachers who had taught between four and six years. Finally, 6(20%) teachers had the teaching experience of above 13 years.

Teachers' Attitudes towards Provision of SRHE to Learners with Deafness

The study examined attitudes of teachers towards teaching SRHE to learners with deafness. The attitude of teachers towards learners with deafness and teaching SRHE is of great importance because it tells whether the teacher will teach effectively or ineffectively. Attitudes can be affected by factors such as age, sex, religious affiliation and cultural practices. The total scores summary is provided in Table 2.

Table 2: Teachers' Attitudes Total Scores

Level of attitude	Range of scores	Frequency/ percentage	Minimum	Maximum	Mean	Std. Deviation
Negative	17-51	29(96.7)	18	52	37.83	9.165
Positive	52-85	1(3.3)				

As indicated in Table 2, the actual lowest total score for this scale was 18 and the maximum was 52. The mean score was 37.83 which indicated a negative attitude towards teaching SRHE to learners with deafness. Moreover, the majority of teachers 29(96.7%) had a negative attitude as compared to only one (3.3%) teacher who had a positive attitude towards teaching SRHE to learners with deafness. The negative attitude can be associated with low knowledge due to lack of pre-and in-service training on teaching SRHE and teaching learners with deafness, cultural and religious beliefs, and limited exposure to people with disabilities. Teachers' negative attitude in the current study predicts their decreased intention to teach SRHE in schools especially to learners with deafness.

The findings in the current study are consistent with findings of Oluremi (2016) who found a significant difference between the attitude of mainstream and special teachers to students with special needs. The reason given for the difference was the training and exposure to special education courses by special needs teachers. Nonetheless, the findings are rather inconsistent with findings from several previous studies conducted in Tanzania and elsewhere. For example, they are inconsistent with those of Kapinga and Hyera (2015) which indicated that teachers had positive attitude towards the teaching of SRHE in schools as it was believed that SRHE would promote good health. Favourable attitude towards teaching learners with deafness result from a number of factors such as proper training on dealing with learners with disabilities, availability of teaching and learning resources, conducive environment, government support and positive community attitude towards learners with disabilities. However, the attitude of teachers in the previous studies were related to teaching SRHE

in general as opposed to the current study which related it to the teaching of the same specifically to learners with deafness. Accordingly, disparity in the findings is perhaps mainly due to the nature of the participants that were involved in the studies.

Association between Socio-demographic Factors and |Teachers' Attitudes towards SRHE

The study examined the factors such as education, religion, teaching experience, age and sex and their association to teaching SRHE to learners with deafness. These factors were examined to find out if they had any effects on the attitudes of teachers towards teaching SRHE to learners with deafness in secondary schools. The level of education might be associated with competence, confidence, and efficiency in teaching SRHE to learners with deafness in secondary schools. Teachers' religious affiliation was expected to affect teachers' attitude towards teaching of SRHE to learners with deafness. On the other hand, religion comprises strong beliefs which are very difficult to be changed. However, in this study, teachers' religious affiliation was reported to have no effect on their attitude towards teaching SRHE. The age of teachers was expected to affect their attitude towards teaching SRHE to learners with deafness. In this study, age was reported to have no effect on the attitude of teachers towards teaching SRHE to learners with deafness. Table 3 provides a summary of cross-tabulation data.

Table 3: Relationship between Teachers' Attitudes and Socio-demographic Factors

Teachers' demographic characteristics	value	Asymptotic Std. Error	Approx. T	Approx. Sig.
Sex	.500	.177	2.148	.032*
Age	.556	.177	3.560	.000*
Teaching experience	.600	.134	3.303	.001*
Level of education	.750	.217	1.826	.68
Religious affiliation	.714	.202	2.013	.44

^{*}Statistically significant at p < 0.05

Table 3 indicates that, three of the five demographic characteristics which are age (T5, 30) = 2.148, p = .032), sex (T1, 30) = 3.560, p = .000) and teaching experience (T4, 30) = 3.303, p = .001) were statistically significant, while two demographic characteristics level of education (T2, 30) = 1.826, p = .68) and religious affiliation (T1, 30) = 2.013, p = .44) were not statistically significant.

From this finding, it can be suggested that being a male or female teacher has nothing to do with teaching SRHE because all the teachers have to accept the teaching of SRHE to learners with deafness in secondary schools. Teachers also should understand the needs of learners with deafness in terms of biological, emotional and social changes during adolescence. Understanding the needs of learners makes it possible for teachers to handle any issues without putting gender as a barrier. This finding supports the findings of Turhan (2020) who found that gender had effect on academic motivation (n = 22, p < .001). This finding is also similar to that of Kovács (2019) who reported a significant difference in Hungary between the male and female teachers' towards taking part in training related to the development of students with special needs' personality. However, this finding presents a different trend to that of Onoyase (2018) who reported that there was no significant difference in the attitude of male and female teachers towards the teaching of SRHE in Nigeria. The current finding also differs with that of Khanifah, Isigiyarta, Lestari and Udin (2019) who reported that gender had effect on students' ethical perception in Indonesia. The difference in attitude of male and female teachers in provision of SRHE in other countries might be attributed to a number of factors such as culture of silence and interests to attend various training sessions on SRHE.

Similarly, religious affiliation did not indicate any statistical differences on teaching SRHE to learners with deafness in secondary schools (n = 30. p = .44). However, this does not mean that religious affiliation has no effect on the provision of SRHE. The current finding tallies with that of Adebode (2019), who found no significant difference between religion and teaching of SRHE in Nigeria. The finding in the current study are also essentially similar to that of Tortolero et al (2011) who pointed out that there were no significant differences that were observed by religious affiliation or religious attendance and provision of SRHE. Religious affiliation remains an independent entity while the individual teacher remains an independent person who can mediate between the religious needs and the needs of teaching SRHE to learners with deafness in secondary schools.

Further, the current findings indicate that, there is statistical significant difference in teaching SRHE to learners with deafness between less and more experienced teachers. The finding of this study is closely similar to that of Arrah and Swain (2014) who pointed out a significant difference in teaching sexuality issues between experienced and less experienced teachers. The possible reason for this phenomenon is the availability of SRHE content on the media as given by Ooserhoff, Müller and Shephard (2017). The argument is that young teachers are more likely to obtain information on sexuality on media than experienced teachers. On the contrary, Onayase (2018) established that there

was no statistical significant difference in the attitude of less experienced and experienced teachers towards the teaching of sexuality. Apparently, newly employed teachers are more likely to be exposed to media such as YouTube, instagram, Facebook, twitter, magazines, and other social media where they get a lot of information including those on SRHE. Moreover, newly employed teachers are also not having a very wide gap in age with learners as compared to the more experienced teachers. Thus, young teachers are less likely to fall victims of culture of silence in discussing sexuality issues.

Additionally, to ascertain the statistical difference in attitude at various levels of each socio-demographic characteristic non-parametric statistics were conducted using Kruskal-Wallis Test. The higher the median the negative attitude the group had towards teaching SRHE to learners with deafness. Older age group (50-54 years) had a more negative attitude. Similarly, less experienced teachers (1-3 years) and Diploma holder teachers had a more negative attitude as all of them had higher mean scores than the other groups in their categories. The findings are reported in Table 4.

Table 4: Kruskal-Wallis Test on Total Attitude

Socio- demographic characteristics	Rank	N(30)	Mean rank	Chi-Square	df	Assymp. Sig.
Age	25-29 years	3	20.33			
	30-34 years	12	13.83			
	35-39 years	6	15.83	6.603	5	.252
	40-44 years	6	11.33			
	45-49 years	1	20.50			
	50-54 years	2	27.25			
Sex	Male	22	15.77	.080	1	.778
	Female	8	14.75			

Socio- demographic characteristics	Rank	N(30)	Mean rank	Chi-Square	df	Assymp. Sig.
Teaching experience	1-3 years	4	21.00			
	4-6 years	7	13.07			
	7-9 years	10	14.55	2.329	4	.675
	10-12 years	3	17.17			
	13+ years	6	15.67			
Level of education	Diploma	2	22.50			
	Bachelor	26	15.65	3.379	2	.185
	Masters	2	6.50			
Religion	Muslim	7	14.93	.039	1	.844
	Christian	23	15.67			

As indicated in Table 4, a Kruskal-Wallis Test revealed no statistically significant difference in attitude levels across the six different age groups (Gp1, n = 3: 25-29 years, Gp2, n = 12: 30-34 years, Gp3, n = 6: 35-39 years, Gp4, n = 6: 40-44 years, Gp5, n = 1: 45-49 years, Gp6, n = 2: 50-54 years) $\chi^2(5, n = 30) =$ 6.603, p = .252. The older age group (50-54 years) recorded a higher median score (Md = 27) than the other five age groups which reported less than 21. Similarly, Kruskal-Wallis Test revealed no statistically significant difference in attitude levels across the two different sex groups (Gp1, n = 22: males, Gp2, n = 8: females) $\chi^2(1, n = 30) = .080, p = .778$. The male group recorded a higher median score (Md = 16) than the female group which reported 15. More specifically, Kruskal-Wallis Test revealed no statistically significant difference in attitude levels across five different teaching experience groups (Gp1, n = 4: 1-3 years, Gp2, n = 7: 4-6 years, Gp3, n = 10: 7-9 years, Gp4, n = 10= 3: 10-12 years, Gp5, n = 6: 13+ years) $\gamma^2(4, n = 30) = 2.32, p = .67$. The less experienced group (1-3 years) recorded a higher median score (Md = 21) than the other four experienced groups which all recorded less than 17. Moreover, Kruskal-Wallis Test revealed no statistically significant difference in attitude levels across three levels of education (Gp1, n = 2: Diploma, Gp2, n = 26: Bachelor, Gp3, n = 2: Masters) $\chi^2(2, n = 30) = 3.37, p = .185$. Teachers with a Diploma level of education recorded a higher median score (Md = 22.5) than the other two levels of education which recorded less than seven. Finally,

Kruskal-Wallis Test revealed no statistically significant difference in attitude levels in the two different religious groups (Gp1, n = 7: Muslim, Gp2, n = 23: Christian) $\chi^2(1, n = 30) = .039$, p = .884. The Christian group recorded a higher median score (Md = 16) than the Muslim group which recorded 15.

It was perceived that older teachers would feel uncomfortable teaching sexuality issues which are regarded a taboo in many societies. The findings indicated that older age group (50-54 years) recorded a higher median score (Md = 27) than the other five age groups which reported less than 21. Previous studies showed that older people were not communicating with young generation on sexuality issues but they did not indicate the levels of significance (Donkor & Lariba, 2017; Sanga, 2013). The change in pattern of communication on sexuality can be attributed to a number of factors including exposure to media and adults' concern on the health of young people. Due to increased diseases such as STIs and HIV/AIDS many adults including teachers seem to be concerned with health of adolescents especially those with disabilities. Kruskal-Wallis Test report indicates that teachers with diploma had a more negative attitude of teaching SRHE to learners with deafness as contrasted to their counterpart Bachelor and master's teachers. The current findings can be explained in relation to the perceived behavioural control as it has been explained in the Theory of Planned Behaviour. Given that teachers are aware of the content, cultural and religious influences in teaching SRHE, and that the curriculum requires them to teach SRHE, then they are trying to get rid of negative beliefs. Teachers believe that they have knowledge, resources and ability to teach SRHE to learners with deafness.

Conclusion and Recommendations

Biology and Civics teachers' negative attitude towards provision of SRHE to learners with deafness affects their intention to teach it properly. Negative attitude towards provision of SRHE to learners with deafness closes a door for Biology and Civics teachers to learn sign language and be able to communicate with learners with deafness. Among other factors, the negative attitude of Biology and Civics teachers towards provision of SRHE to learners with deafness is associated with lack of training and beliefs that people with deafness are asexual and cannot be taught and comprehend what is being taught. This is a myth which has been proven to be wrong. Learners with deafness can learn effectively and efficiently when relevant pedagogies and resources are used.

The study recommends to the government to provide both pre-service and in-service training to teachers on SRHE and deafness to improve teachers' attitude towards provision of SRHE to learners with deafness. The attitude of teachers towards provision of SRHE to learners with deafness is likely to be

positive if they are equipped with relevant knowledge and skills of teaching it. A need for training teachers on SRHE and on pedagogy used in teaching learners with deafness is inevitable. As the training continues gradually with time teachers will develop a positive attitude towards learners with deafness and providing SRHE comfortably. It can be deduced that, if teachers will have a positive attitude in provision of SRHE to learners with deafness, then they will provide SRHE without hesitation. Additionally, special attention should be paid to learners with deafness in improving the provision of SRHE to them by ensuring the availability of teaching and learning resources in secondary schools.

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