

“BUT NOT AS DETAILED AS INCLUDING TEACHING THE PRIVATE PART”: MALAYSIAN PRESCHOOL TEACHERS’ UNDERSTANDING ON THE IMPLEMENTATION OF SEXUALITY EDUCATION IN PRESCHOOLS

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ABSTRACT

This article aimed to discuss the implementation of sexuality education in the preschool context in Malaysia based on preschool teachers’ understanding. Past studies have reassured that teachers have played an important role in ensuring the success of early childhood sexuality education program. Numerous local and Asian studies have highlighted that due to the lack of training and limited access on sexuality related resources, the implementation of this program in preschool level remained vague. To close the gap, interviews were conducted to discover Malaysia preschool teachers’ content knowledge and delivery on sexuality education in the early years. Ten qualified and experienced preschool teachers from Klang Valley were recruited as the study respondents. Content analysis was employed to extract emerging themes based on the interview scripts. Findings have revealed that the respondents showed a varied understanding about sexuality education in early childhood context, where their thoughts were found heavily confined by the social and cultural norms acquired through their previous experiences, current cognitive understandings and comfort level. The analysis has also expressed a potential risk of misinterpretation on children’s sexual behaviors among the preschool teachers, due to their insufficient knowledge on children’s sexual development. Further to that, the local early year sexuality education was found to be delivered informally within children’s routine in preschool, serving as reminder when necessary rather than pre-planned activities. This study is expected to provide implication to aid useful evidences in enhancing current sexuality education program in the preschool context, and devising comprehensive teachers training module for betterment.

Keywords: sexuality education, content knowledge, teaching delivery, preschool teachers

INTRODUCTION

Sexuality is a concept that has various interpretations in the field of social science. Sexuality was viewed as reproductive and genital behavior which it often referred as part of hygiene aspect as reflecting to its biological definition (Welbourne-Moglia & Moglia, 1989). However, since World Health Organization advocated a more holistic definition to sexuality education, this view has been broadened to also include cognitive, emotional, social and

interactive aspects that enable children to learn on having respectful and safe relationships with others (World Health Organization, 2006). In short, sexuality has become essentially part of human life from conception and continues throughout the entire life cycle (Couchenour & Chrisman, 2008). However, in Malaysia, sexuality is viewed as a taboo (Jerome, 2008) and thus is a controversial topic.

Sexuality education began to receive attention from the Malaysian government in the late 1900s. Syahirah and Dina (2017) noted that sexuality education was once integrated in school syllabus by Ministry of Education (MOE) since 1989 for secondary school and then extended to primary school in 1994. Instead of a specific subject named sexuality education, MOE integrated this program into a variety of subjects such as science, biology, religious and moral studies as well as health and physical education (Mazlin et al., 2013). When Sexuality Education was introduced from 2003 to 2005, it was found that the term “sexuality” had negative public perception. Hence, the term *Pendidikan Kesihatan Reproduksi dan Sosial* (PEERS) has been used since 20 December 2006 and placed under Physical Fitness and Health Education and since 2011, has been taught as an independent subject (Salmi et al., 2017).

Among the objectives of having sexuality education in mainstream educational system are to increase knowledge on sexual reproductive health as well as to curb sexual issues such as baby dumping, sex outside marriage, unwanted pregnancies, unsafe abortion and sexual abuses. However, the statistics show an increasing number of social issues among adolescents. The latest Malaysian Population and Family Survey (MPFS) in 2014 (National Population and Family Development Board [NPFDB], 2017) indicate that Malaysian adolescents have inadequate knowledge of their reproductive organs, where 55% of them are aware of the transmission of HIV/AIDS through sexual actions, and 73% know about sexually transmitted diseases (STDs) through sexual intercourse. In addition, the numbers of unwanted pregnancies keep increasing as well with estimation around 18,000 under-aged girls falling pregnant every year in Malaysia (NPFDB, 2017). A survey conducted by Ministry of Health (MOH) in 2015 found that most of the female youth lacked sexual reproductive health knowledge and worse, claimed to have learned about the term “sexual” from online sources instead of the school curriculum.

In 2016, Malaysia was tragically shocked by a case of a British paedophile, Richard Huckle who committed 71 counts of child sex offences mostly on Malaysian children from 2006 to 2014 (The Star, 2016). This case had led to further improvements in sexuality education, whereby child health and experts suggested to incorporate sexuality education for preschoolers as part of a prevention program for young children from becoming sexual abuse victims (Harian Metro, 2016, as cited in Salmi et al., 2017). As a result, MOE introduced the PEERS program in the newly revised National Preschool Standard-based Curriculum (NSPC) (MOE, 2017). PEERS focuses on educating young children aged 4-6 years old the different physiology of a boy and a girl; safe, unsafe and uncomfortable touches; hygiene manners; and techniques to protect own selves from unsafe and uncomfortable touches.

Due to culturally-taboo term, information on sexuality education is scarce particularly in the local context. In fact, the available information where the study is conducted is limited to secondary school teachers (Azizah & Chan, 2009; Ihwani et al., 2016). That lack of attention given in investigating preschool teachers’ state of understanding on sexuality education is especially evident as there is extremely limited study conducted to examine the preschool teachers view on sexuality education. This is despite having sexuality education

course in the syllabus. On top of that, Zarina and Azizah (2019) claimed that implementation of sexuality education in preschool is still vague due to the factors such as lack of training to teach sexuality education and unavailability sexuality-related resources. To fill this gap in the early childhood sexuality education literature, especially in the Malaysian context, this study was conducted with the aim to gain a comprehensive understanding on the implementation of sexuality education in preschools.

Research Questions

The following research questions have been formulated as a basis for this study;

- i) What is teacher understanding about sexuality education for preschool children?
- ii) What are the appropriate sexuality education content for preschool children?
- iii) How do teachers deliver sexuality education program to preschool children?

Literature Review

Today, children in early years starting to express curiosity about sexuality. It is typical to see sexualized behaviors among young children, as this is identified as part of children's normal psychosexual development. For example, touching their own genital parts, asking about the differences between the anatomy of boys and girls, and trying to see others' genital parts, are some of the common sexual behaviors among preschool children (Birol & Gomecli, 2010). Therefore, early childhood teachers need to be vigilant to not misinterpret children's curiosity about their body. Failure to interpret would make children feel ashamed of their natural curiosity and be labelled as 'problematic' (Lesley-anne et al., 2017).

Understanding about own body including their genital parts by learning to respect own and others' body further helps young children to create a self-positive body image (Kellogg, 2010). Hayes (1995) recommended for sexuality education to be started at the young age through parents and continued by early childhood teachers. However, there are voices that oppose this decision, as it is thought to be too early to introduce sexuality education for preschoolers. Some believe that it is inappropriate to begin sexuality education during preschool years, as this deprives children of their innocence. Also, there is the misconception that further exposure to sexuality education may stimulate the children's curiosity, which eventually directs them to their own sexual experimentation (Siti Syairah & Ruzianisra, 2012).

On the other hand, it has been found that children who receive less sexuality education may have higher opportunities to be sexually abused (Abdulahmeed, 2013). This low level of sexuality education in addition to public misconception may be a contributing factor to the annual increase of sexual child abuse cases in Malaysia. Royal Malaysian Police Department statistics as cited in Norazla and Mohd Farok (2018) showed that child sexual abuse cases were recorded from 2010 to May 2017 with 3176 cases a year on average. Children between the age of 7 to 13 years old are the most vulnerable to be sexually abused (Finkelhor, 1994), with more than 20% of children sexually abused before the age of 8 (Snyder, 2000). Therefore, appropriate sexuality education needs to be developed in line with the recommendation by Yafie (2017) that suitable sexuality education would be able to minimize the possibility of children being sexual abuse victims.

The values and beliefs held by different cultures influence the perception of its cultural group members on different issues. In most Malaysian cultures, any matters related to sexuality tend to be discussed privately. According to Zahra Fazli et al. (2014), parents neglect their roles to provide sexuality education for their children and expect teachers to deliver it. Whereas, teachers also feel reluctant to teach it, as this has placed them in a vulnerable position regarding their personal and professional values (Mchunu, 2007). Consequently, children are being left without proper guidance, which put them at risk of getting information through irrelevant resources.

Thus, the decision to extend PEERS program from primary school to preschool is seen as one of the preventive measures taken by government to empower young children with sexuality knowledge and reduce their chances to be the sexual abuse victim. However, the barriers arise when most of the teachers realized that they have minimal information on sexuality knowledge especially for the preschool classroom (Oktavianingsih & Ayriza, 2018). Past research found that even a qualified preschool teacher who took several courses on child development during their training did not take any formal courses on child sexual development (Balter et al., 2016). Another study that involved 450 teachers from preschools to high school levels conducted in Malaga and Spain, revealed that these teachers never received any formal training on child sexuality education (Márquez-Flores et al., 2016). Consistent with a local study that focused on interviewing experts and professional peoples in sexuality health in Malaysia, Zahra Fazli et al. (2014) highlighted that MOE agreed that the teachers are insufficiently equipped to teach sexuality education. In addition, many of them are quite conservative, which may further delimitate the dissemination of accurate information to the children.

METHODOLOGY

Research Design

This study adopted a qualitative approach to collect subjective experience of the participants through semi-structured interview. According to Denzin and Lincoln (2000), qualitative research defined as '*consists of a set of interpretive, material practices that make the world visible*'. Due to its interpretive ability, qualitative research was deemed to be well suited to this study that focuses on investigating sexuality understanding.

Sampling and Participants

The participants of this study were recruited using purposive sampling. This non-probability sampling method permitted the handpicking of participants for a specific purpose to ensure that they satisfy the needs of this study (Cohen et al., 2007). The criteria for inclusion were location, qualification and experiences. The preschool teacher must be a qualified early childhood teacher working in the Klang Valley area and has at least 3 years of teaching experience. Ten preschool teachers were identified and ranged between the ages of 23 and 50 years old. Initially, preschool teachers from both public and private preschools in the Klang Valley were recruited. However, due to the Covid-19 pandemic regulations and movement restrictions imposed by the government, only teachers from private preschools responded and agreed to participate.

Procedure

Due to the sensitive nature of this topic and the need for sharing of personal beliefs and values, approval from the university's scientific and ethical review committee was obtained before the research was conducted. Emails were sent and telephone calls were made to the local education department to obtain approval to recruit public preschool teachers. As for private preschool teachers, instant messaging and telephone calls were made to recruit and obtain the consent of the participants. The interview protocol was designed earlier to ensure the smoothness of the interview sessions. Semi-structured interviews were conducted between July and September 2020 with compliance to the new normal standard operating procedure recommended by government. The interviews were conducted in English with each lasting around 30 to 50 minutes. Recording of interviews were made once consent was obtained. Below are some of the main interview questions asked;

- i) Based on your knowledge or awareness, what do you understand about sexuality education for young children?
- ii) What do you think the sexuality education content that should be taught to preschool children?
- iii) What is the method that you use to deliver sexuality education to preschool children?

Data Analysis

The interviewer transcribed all the recorded interviews. All the text-based data were then imported into the NVIVO Qualitative software. Emerging codes from the interviews were discovered through content analysis. The analysis followed through the four stages of content analysis which includes decontextualization, recontextualization, categorization and compilation (Bengtsson, 2016). Then, the emerging codes between researchers were crosschecked to ensure reliability. After that, the codes were merged to generate three broader themes that form three major findings of this study: 1) the understanding of sexuality education, 2) the content of sexuality education being taught and 3) the methods of delivering sexuality education.

RESULTS

Results are summarized in three major themes that reflect preschool teachers' status of sexuality education implementation in local preschools.

Teachers' Understanding of Sexuality Education

First, the understanding of preschool teachers on sexuality education during the preschool age. Three main domains of sexuality education understanding were derived from the analysis, which are gender differences, protecting own body and sexual reproduction.

Learning about gender differences was found to be the first domain that formed teachers' understanding on sexuality education. Eight of the teachers understood that teaching children about the difference of being girls and boys are part of sexuality education:

TR8: Children need to know about their growth, for instance the change of their body, period and difference between genders.

However, their views on gender differences focused on proper relationship between girls and boys, such as distancing across different genders and avoiding unnecessary touches between girls and boys:

TR6: Knowledge about sexuality education for children should be given focus in school and at home to produce children who know how to take care of body health and avoid any touches between girls and boys.

Secondly, seven of the teachers opined that protection is one of the essential domains in sexuality education. Empowering children to be able to protect themselves is very important, as this would prevent them from being the innocent sexual abuse victims:

TR9: It including like knowing our own private parts, educating children to protect themselves from harmful situations.

TR4: ...and another we can teach on the overall basic thing. Okay, like aaa...as I told you strangers, protection, awareness, all this...

Interestingly, out of seven, five of them specifically emphasized that children should protect themselves from strangers by not being easily touched or getting close:

TR10: I think is teaching children how to protect themselves from the stranger and learn the body parts.

TR5: ... they have to know what the good touch and bad touch are and they have to avoid themselves from the strangers.

These statements suggest that these teachers' knowledge of sexual abuse threats mainly stem from unknown people, namely strangers.

Lastly, sexual reproduction information such as the structure of the reproductive part, where does a baby come from, and little knowledge about conception had contributed to some part of teachers' understanding on sexuality education:

TR6: This sexuality education is letting children know what is sexual which is the process of how human conception occurs.

TR8: For instance, how will you explained little sperm will "swim" from daddy's body and go into mummy's body to find "little oval" ... it takes time for children to understand.

Content of Sexuality Education being Taught

The analysis identified three main teaching domains relevant to sexuality education namely, educating on appropriate social behaviors, teaching the names and functions of body parts, and healthiness and protection skills relating to sexual violence. The following sections discuss each of the mentioned domains along with its analysis evidences.

Teaching of appropriate social behaviors was found to be the most prominent sexuality education domain based on the analysis. Within this domain, nine teachers emphasized that the teaching of “gender difference” was essential. This includes to advice boys and girls to separate the use of toilet/bathroom/changing room, foster the awareness of privacy (do not peek on others going to toilet, do not expose their bodies), respecting the opposite gender by keeping an appropriate distance, no hugging/kissing/touching friends of the opposite gender):

TR2: They need to know boy and girls are different...certain behaviors that boys and girls can't do together (separate toilet, can't take bath together).

TR7: When among the friends, boys and girls are not allowed to sit side by side, touching, and that's all they need to know...

Majority of the teachers highlighted that educating children by telling them boys and girls are different is essential. This indicates the reinforcing of children's gender identity through cultivating a sense of being a boy or a girl, as well as gaining a sense of belonging towards their social group (girl/boy group) (Zucker & Bradley, 1995; Halim & Ruble, 2010). As such, these seem to be the hidden “social rules” to follow in their preschools.

The second aspect of sexuality education domain that was identified is the teaching of body parts. Eight teachers have reported that children were being educated in knowing their body parts:

TR9: The most is the introduction of body parts, those involve common features like head, eyes, ears, hand, legs. Also, we have some relevant picture books to use...

TR8: We only have materials to teach body parts, but not as detailed as including teaching the private part, just common one.

The teaching of body parts was taught to children within a Science curricular, based on the NPSC as instructed by the government. Eight of the teachers mentioned that their children learn the names of “general”/ “common” body parts, including such as hair, head, neck, eyes, mouth, body, leg, hand and others. Among the ten participants, two reported that they only teach the common body parts. Six of the teachers teach both common and private parts, and among them only two teach their children the proper names of the private parts. The other four teachers seemed to just “touch and go” on the topic, mostly focusing on educating children that private parts are “sensitive parts” that cannot be touched carelessly and cannot be touched by/exposed to others.

Teaching the healthiness and skills related to sexual violence protection was the third sexuality education domain based on the analysis:

TR4: This we need to educate our kids...do not trust anyone on that thing, touching physical...cannot believe this person, you cannot have the contact...we never know what is the perception of this people towards this kid, so we need to educate them, it's very important.

Seven teachers stated that the children are reminded of the need to avoid getting in touch with strangers. They educate the children to not simply touch their private parts, to not let a stranger touch their body and private parts, “good touch, bad touch”, and to not talk to and accept anything from strangers. Other than that, teachers also create children’s awareness to protect own self by covering their bodies and wearing underpants. Mainly, all these contents were conveyed as reminders through verbal communication.

Methods of Delivering Sexuality Education

Overall, majority of the preschool teachers reported that sexuality education program was held informally in their preschools and two major domains identified in connection with the methods of delivery. These were verbal communication and peer sharing.

The teachers stated that the schools do not incorporate any sexuality education as a part of their syllabus, but they believe that it is important for them to educate their children regarding this. Due to the unavailability of formal resources and point of reference, the teachers would communicate the basic knowledge to their children as the need arise:

TR5: So far, we don't have any resources and just a basic thing only we teach the kids, when they're changing clothes.

The teachers communicate the sexuality education knowledge mostly in the form of boundaries and reminders. They agreed that relevant advices were given to children constantly when dealing with sexuality issues that happened in the preschools. These communications were found to occur frequently occur during play and bathroom breaks:

TR4: We will educate our kids informally like you cannot be in toilet. When you are changing, you cannot be together.

TR8: We will tell the children that boy and girl need to keep a distance. But sometime when children getting playful, they tended to forget about it. So, have to remind them always.

In addition to informal method of verbally communicating sexuality education verbally, it was also found that young children will share their knowledge on sexuality with their peers. Peer sharing in this context involves a child reminding their classmates of the boundaries when they interact:

TR10: Some of the children come to school will share to the friend example can't touch each other.

DISCUSSION AND IMPLICATIONS

The analysis on sources of sexuality education knowledge received by preschool teachers seems to be consistent with past analysis conducted by Johari et al. (2012) which reported that most of university students remembered that sexuality education that was held in secondary school were clearly explained through Science subject, but the scope was limited to knowing about sexual organs, reproduction system and conception process. Hence, it is not surprising to know that part of these preschool teachers understanding about sexuality education was also focus on “sex matters”, leading to the perception that it is too early for preschool children to have sexuality education. Besides, minimal number of teachers mentioned that parents, especially mother had verbally taught them about sexuality education matters. This result supports previous findings by Salmi et al. (2017) that stressed parents did not have adequate knowledge and are reluctant to talk about sexuality matters to their children, hindering the role of parents as the first educator in young children sexuality education.

The lack of standard resources used for sexuality education teaching is evident, as most of the participants claimed that information was delivered based on their previous experience from parents, school and friends. This explains the variability in local early childhood teacher’s perceptions on sexuality education content. This also confirms the findings from an earlier study that found how teachers understanding of sexuality education was confined by their current knowledge, experiences, self-beliefs and values that they have internalized through social norms (Mchunu, 2007). Although the participants reportedly covered three sexuality education aspects in teaching, such information was found to be general, teaching was mostly unstructured, and most teachers did not perceive this topic to be essential to the extent of being included in the formal early childhood education program. The analysis also expresses a risk that teachers might have misinterpretation on children’s sexual behaviors and needs as all these teachers may not possess adequate knowledge on children’s sexual development. For instance, teacher’s perceived touching of private part as bad behavior and labelling it as a potential sexuality issue.

Additionally, local early childhood education teachers perceive teaching children to run away from threats as important, as most of the teachers referred to these threats, including “talking to stranger”, “touching from stranger” or “taking sweet from stranger”. In fact, none of them mentioned threats could be from people who are familiar to the children. According to a report on child sexual abuse statistics, 90% of children who were the victims of sexual abuse knew their abuser and only 10% were abused by a stranger (Whealin, 2007; Finkelhor, 2012). This indicated that local teachers are not updated with the local sexual abuse statistics, which shows that child abuse predators are usually people from a trusted relationship, like parents, family members, caregivers, teachers and others (Guat & Choo, 2016). Conversely, majority of the teachers were telling children to avoid from strangers, with few teachers emphasizing on teaching children to recognize inappropriate touch from peers and adults, and practically how to react to self-help when encountering harmful situations. This may present a risk of children indirectly interpreting that “following” or “touching” from familiar adults is fine.

In the case of sexuality education content to preschool children, this finding was consistent with a recent study conducted in Indonesia, initiated by Budi Astuti et al. (2017) who investigated early childhood teachers’ perceptions on sexuality education in Selman Regency, Indonesia. Their study has suggested that early childhood teachers have perceive

that there are six sexuality education domains deemed important for young children. These domains are, 1) teaching on self-identify in terms of the gender roles, for instance, name of gender, ways of dressing and grooming (female put on makeup and jewellery, while male do not); 2) introducing gender in terms of genital organs, its shapes and names, 3) relationship based on norms between male and female, 4) introducing reproductive organs and its functions, including explaining body parts cannot be touched by others 5) general healthiness like personal hygiene, nutrition, and clothing, 6) protection skills including avoiding contact with strangers, not letting others to simply touch their body parts, strategies to get away from threats, teaching children to recognize inappropriate sexual behaviors via age appropriate aids like poster, films and videos (Budi Astuti et al., 2017). These outcomes have contributed to add knowledge of Asian early childhood teacher's perceptions towards sexuality education teaching. The findings of the current study and past study by Budi Astuti et al. (2017) have both reveal that Asian early childhood education practitioners seemed to emphasize educating gender identity and diversity through requesting children to practice acceptable gender norms, recognizing the outfits, genders names, wearing, and others. In terms of the teaching of body parts, both findings have consistently reported that teaching in relation to genital organ was a social taboo.

Besides, this current finding was also consistent with Iyer et al. (2014) meta-analysis that looked at the barriers to HIV and sexuality education in schools among Asian countries. They found that social-cultural factor is one of the most cited barriers to effectively implement sexuality education in schools in countries across different the Asian region, including Indian, Thailand, Indonesia, Malaysia, the Philippines and others. This restricted the open discussion of sexual health within the school communities. The meta-analysis also reported Asian adults as reluctant in providing relevant information, talking and guiding youth on this topic. Hence, the learning of sexuality in school was at older age, within the Science and Biology curricula in Asian countries. This phenomenon has contributed to what has been understood by most of the participants in this study that sexuality education, that even for preschool-aged children, sexuality education should include knowledge on reproduction and structure of genital parts.

Although sexuality education is a part of the content of the NPSC, preschool teachers in this respect may not necessarily conduct or include this area of education in their daily formal lesson. This study revealed that sexual education information was taught to children informally within children's routine in preschool, serving as reminders when necessary rather than as pre-planned activities. According to Ho and Funk (2018), on-the-spot guidance and reminders are considered as a crucial part of guidance strategy in supporting young children's development. Indeed, it is undeniable that these differentiated guidance approaches if compared to the formal method of educating young children could be more beneficial. As young children's development is complex and there are numerous factors that can influence their learning, this indicates the need to use various methods rather than a straightforward approach (Ang, 2014).

Even so, the appropriate sexuality education lesson should be planned purposefully and by intention rather than incidental. In such planning, the teachers must have a clear goal and ways to accomplish it. They are required to understand the sexuality development of children and to be aware of specific knowledge and skills the children require in order to master the content areas (Epstein, 2014). Intentional teaching is often associated with better learning, social and emotional outcomes (Heidemann et al., 2019). Besides, an effective

preschool program is one that has a combination of both child-and adult-guided activities (Epstein, 2014) for more meaningful learning experiences.

CONCLUSION

This study provides insights to the understanding of the preschool teachers. Local preschool teachers seemed to possess positive attitudes towards the delivery of sexuality education-based information to young children. However, the content that preschool teachers thought suitable for young children is heavily focused on the safe and less sensitive topics such as gender differences and general body parts. The informal sexuality education approach used by the participants could be further enhanced if there were clear, structured planning and suitable resources that could assist the preschool teachers in the implementation of culturally and developmentally appropriate sexuality education. In addition, parents should also be invited to as active collaborators to establish better consistency at home and school.

While the research provides better insights to the sexuality education conducted in Malaysia, it does not represent the practices in all preschool as there were no inputs from the public preschools. More research is needed to further validate the findings of the research. Observation of how the teachers communicate their knowledge on sexuality education to the young children would provide the researcher more natural information. Besides, the perspective of the young children should be explored in order to gain insights to the effectiveness of the delivery and impact of the informal approach used in sexuality education. As such, more efforts should be exerted understand the current practice in preschool to ensure better practice in sexuality education among young children can be promoted.

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ETHICAL APPROVAL

This study has been approved by the UTAR Scientific and Ethical Review Committee [U/SERC/133/2020]. Informed consent was obtained from all participants.

CONFLICT OF INTEREST

There is no potential conflict of interest reported.

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