
**SEX EDUCATION: AT CHIPADZE AND HERMAIN GMEINER SECONDARY
SCHOOL(S) IN BINDURA, ZIMBABWE: CONTEXTUALIZING GENDER, LEGAL,
HUMAN RIGHTS FRAMEWORKS AND SOCIAL REALITIES**

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Abstract

This dissertation, written by a Magistrate, focuses on sex education within Zimbabwe's Secondary School curriculum currently delivered through Guidance and Counselling (G & C) lessons to male and female students from Forms 1 to 4 (about 13-16 years of age). This sex education programme falls within the broader context of sexual and reproductive health information as enumerated by the SADC Protocol on Gender and Development. Human rights are interrelated and the right to education and health are interwoven. The right to education is viewed as key in the development of young women and should equip them with skills and capabilities that will ensure their eventual economic empowerment. Sex education is conceived for the purpose of this work as equipping individuals with the necessary knowledge and skills to foster healthy and responsible sexuality for the empowerment of young women. The work's main question is: *"Is the current content of sex education specifically designed to reduce the negative outcomes of sexual behaviour of young women, especially unplanned pregnancies, sexually transmitted infections and HIV/AIDS?"* Ultimately, if sex education is neither comprehensive nor relevant in its content, it cannot be effective and young women will remain exposed to today's increasing sexual pitfalls. In answering this and the work's other related questions, the research was conducted using several methodologies (including those of the Grounded Theory and Human Rights approaches) guided overall by the Women's Law Approach, whose primary aim was to capture the voices of women from across the social spectrum (including students, parents, teachers and prostitutes) within the town of Bindura in order to assess whether they speak with one voice on the content of a sex education curriculum. Other data which informed the study included a comprehensive analysis of relevant law and literature (including the teaching materials which inform the current G & C curriculum), court records and interviews and discussions with key personnel within relevant government Ministries, Departments and Organisations as well as the Church. Of the many fascinating findings of the research (all of which are meaningfully presented within their relevant and often interrelated theoretical frameworks), a major finding is that sex education is inadequate in so far as it does not encompass sufficiently relevant information for sexually active teenagers. Abstinence should not be its sole focus as this is erroneous and unrealistic. Barriers, such as culture and religion, are also revealed as stumbling blocks to effective sex education. Based on its findings, the work concludes with recommendations on well-detailed topics that should be included in an updated comprehensive sexuality education curriculum which should be delivered within a conducive learning environment by empathetic and well trained teachers (fully supported by parents) and both established and developed at policy level by the Ministry of Education.

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Declaration

I Miriam Banda do hereby declare that this dissertation is my original work.

Signature

Date

This work is approved for submission towards the fulfilment of the Master’s Degree in Women’s Law my supervisor,

Signature

Date

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Dedication

For my beloved parents, Mr. W. and Mrs. G.M. Banda, for always telling me 'life is what I make it' and for being the wind beneath my wings.

And

For Peter Chihuri, my husband, thank you for understanding and conveniently disappearing when I had to work, you are my blessing.

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My brother and sisters, Lucy, Kudzi and Ernest thank you for supporting me in spirit, I know you always have my back.

Finally, to my son, Tinomuda Wezi Shona Chihuri, you are my inspiration and Mommy loves you dearly!

List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome
CEDAW	Convention on the Elimination of All Forms of Discrimination Women
CDU	Curriculum Development Unit
CESCR	Committee on Economic, Social and Cultural Rights
CRC	Convention on the Rights of the Child
G & C	Guidance and Counselling
HIV	Human Immunodeficiency Virus
ICESCR	International Covenant on Economic, Social and Cultural Rights
MoESC	Ministry of Education, Sports and Culture
NAC	National Aids Council
NGO	Non-Governmental Organization
PED	Provincial Education Director

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Constitution of South Africa 108 of 1996
Constitution of Zimbabwe
Criminal Law Codification and Reform Act 9; 23 (Zimbabwe)
Customary Marriages Act 5; 07 (Zimbabwe)
Domestic Violence Act 5; 16 (2006) (Zimbabwe)
Education Act 25; 04 (Zimbabwe)
National Gender Policy, 2004 (Zimbabwe)
National Policy on HIV/AIDS (Zimbabwe)
Termination of Pregnancy Act 15; 10 (Zimbabwe)

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Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa ('The African Protocol' or 'The African Protocol on Women's Rights')
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The Universal Declaration on Human Rights (1948)
Convention on the Elimination of All Forms of discrimination Against Women (CEDAW) (1979)
Committee on the Elimination of All Forms of Discrimination against Women (Committee CEDAW). General Recommendation No. 24 on Women and Health, paragraph 29, February. 2 1999.
Beijing Platform of Action (1995)
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CHAPTER ONE

1.0 INTRODUCTION

1.1 Introduction

“The realm of sexuality also has its own internal politics, inequities and modes of oppression. As with other aspects of human behaviour, the concrete institutional forms of sexuality at any given time and place are products of human activity. They are imbued with conflicts of interest and political manoeuvre, both deliberate and incidental. In that sense, sex is political.”

The above quotation is by Gayle Rubin (1984) a leading writer on the subject of sexuality. It illustrates how sex and sexuality is deliberately constructed, unfortunately to the detriment of women. The education curriculum as a product of human activity is negotiated and deliberated upon. Because our education sector is not addressing the realities of sexually active teenagers and early pregnancies it is our young women who suffer the most. The lack of protection from unplanned pregnancies and HIV has a profound impact on a teenage girl’s ability to exercise other human rights, such as the right to education, work, participation and development. The argument for sexuality education is anchored on the right to education within the broader spectrum of sexual and reproductive health. In Zimbabwe, in spite of gender-neutral laws and policies, women and girls are often denied equal enjoyment of their human rights by virtue of an inferior status ascribed to them by religion and custom. Women and girl’s right to reproductive health and information is a site for contestation between international human rights law and local social, cultural and religious norms (Hellum et al, 2007). The human rights based approach sets out binding legal standards that oblige state parties to respect, protect and fulfil the bundle of rights that make up women and girls’ right to reproductive choice. Although these rights are embedded in numerous human rights articles, the reality as this research will show, is a far cry from the ideals stated.

1.2 Background to the Research

When I reminisce about my teenage years I cannot ignore the silence over matters of sexuality in my home. I recall the onset of my menstrual cycle and the confusion that reigned supreme. I was a tomboy in my pre-adolescent days and starting my 'period' was traumatic for me. I had no one to talk to, just an overwhelming sense of shame at this 'inconvenience'. So I wrote my mother a letter merely stating my period had started and she was to provide pads for me each month. I wrote a letter because I simply did not know how to approach her with the news that I had begun to menstruate. To my disappointment she complied by quietly placing the pads on my bed every month. In essence, that was my 'talk' with my mother on this rite of passage and natural phenomenon in her daughter's life. Her silence of course on this and other sexual matters spoke volumes about the secrecy that shrouds matters of sexuality. Further, I recall at some point my mother decided to buy tampons instead. Because she had again silently placed the tampons on my bed I felt her apprehension and unwillingness to entertain my questions on the matter. I had no clue how to use them and turned to my friends who in their wisdom (or lack thereof) told me I was going to lose my virginity by merely inserting the dreaded thing! Although rather comical now, this example begs the question: *"Who is talking to our young women about sexual and reproductive issues that concern them? Are young women being given the correct information when it comes to their sexual and reproductive health?"*

As I embarked on the Women's Law Programme I was motivated to interrogate perceptions and attitudes towards issues that affected the girl child. On a personal level, I questioned myself on what can be done to pull down the barriers and start talking to our daughters about sex and sexuality. I can now talk to my mother more openly about sexual matters but perhaps this is attributed to the fact that I am married and from a religious and cultural standpoint I am having 'legal' intercourse. When I asked her why she never spoke to me about sex she stated: *"I knew you would figure it out by yourself eventually."* Fortunately for my mother, she never had to deal with my early pregnancy, a very real phenomenon in this present day and age. Our society dictates our expression of sexuality and accordingly I never voiced my questions or concerns, and, like most girls then, we kept our mouths shut and our legs closed.

1.3 Statement of the Problem

According to the Herald¹, the government-controlled national daily newspaper, recent statistics by the Ministry of Gender and Development show that women comprise 62% of people infected with HIV/AIDS. One can postulate numerous reasons why women constitute the group most infected and affected by HIV/AIDS. Our young women are especially at risk of sexually transmitted infections and pregnancy because of early marriages and not being able to negotiate for safer sex in their relationships. If this is the case are young women adequately informed of the risks involved in risky sexual behaviour? Further, as most parents do not converse with their daughters about sex in general what role does the school play in educating young women about sex?

It is against this background that schools are the one institution in most societies that are regularly attended by young girls. The question to answer is: *“Whether the sex education content of schools is specifically designed to reduce negative outcomes of sexual behaviour for young girls such as unwanted pregnancies, STD and HIV infection?”* Sex education should enhance the ability of young women to make informed choices about their sexuality. Schools are designed and structured to provide both knowledge and skills. In the case of sex education, to what extent do skills such as negotiation, decision making and self-assertion form the core aspects of the curriculum, given the role they play in enabling young women to make informed choices about their sexuality? Other skills include recognizing peer pressure and resisting it and asking for help and seeking advice from organizations and people that offer these services. Ultimately, in terms of the school curriculum, if sex education is not comprehensive and relevant in its content, it cannot be effective and young women will remain exposed to sexual pitfalls.

¹ *The Herald*, 16 September 2011.

1.4 Objectives of the Study

The research needed a particular focus and the objectives assisted in narrowing down the issues that were to be assessed.

1. Analysis of the gaps in sex education and a review of what is not covered in terms of a comprehensive sex education curriculum.
2. Critique the sex education curriculum from a gender perspective.
 - 2.1 Assess whether the sex education curriculum takes into account gender disparities that exist between young men and women such as the fact that young women have a higher risk of contracting sexually transmitted infections including HIV/AIDS because of their anatomy.
3. Analyze whether the sex education curriculum is basic in its conceptualization of sexuality and whether it includes contraceptive and disease prevention methods in its content.
4. Analyze the societal and cultural barriers evident or implicit in the sex education curriculum.
 - 4.1 Assess cultural and societal barriers as impediments to the empowerment of young women.
5. Analyze whether the sex education curriculum meets the standards of international and regional human rights instruments which outline the right to health including sexual and reproductive health in line with Articles 11 (“The Girl and Boy Child”) and 14 (‘Gender Equality in Education’) of the SADC Protocol on Gender and Development.

6. Assess compliance of the sex education curriculum content with relevant provisions in international instruments that deal with the right to education and the right to information.
7. Recommend what should be included in our sex education curriculum to make it more comprehensive for the empowerment of young women.

1.5 Research Assumptions

1. The sex education curriculum in secondary schools is basic in its conceptualization of sexuality and does not include information on contraceptive and disease prevention methods.
2. The sex education curriculum does not take into account the gender disparities that exist between young women and men.
3. The sex education curriculum emphasizes abstinence as the only means of pregnancy and STD prevention while ignoring the realities of early marriages and teen pregnancies.
4. There are societal and cultural barriers evident or implicit in the sex education curriculum that inhibit the empowerment of women.
5. The State's failure to provide relevant and adequate information in its sex education curriculum has profound implications on the girl child in that it violates her right to health, including sexual and reproductive health, in contravention of Article 14 ('Health and Reproductive Rights') of the African Protocol on Women's Rights and Article 11 of the SADC Protocol on Gender and Development.
6. The State ultimately fails in meeting international standards on the right to education and information which require that education has to be acceptable and adaptable to the needs of a changing society as enumerated in Article 13 of the Committee on Economic Social

and Cultural Rights (CESCR) and as interpreted in General Comment No. 13 (1999) by the Committee and as outlined in Article 11(e) and Article 14(2) of the SADC Protocol on Gender and Development.

1.6 Research Questions

1. Is the sex education curriculum in secondary schools basic in its conceptualization of sexuality? And does it include information on contraceptive and disease prevention methods?
2. Does the sex education curriculum take into account the gender disparities that exist between young women and men?
3. Does the sex education curriculum emphasize abstinence as the only means of pregnancy and STD prevention? Does this stance ignore the realities of early marriages and teen pregnancies?
4. Are there societal and cultural barriers evident or implicit in the sex education curriculum that inhibit the empowerment of young women?
5. Does the State's failure to provide relevant and adequate information in its sex education curriculum violate the girl child's right to health, including sexual and reproductive health, in breach of Article 14 of the African Protocol and Article 11 of the SADC Protocol on Gender and Development?
6. Does the State ultimately fail in meeting international standards in terms of the right to education and information as enumerated in Article 13 of the CESCR and as interpreted by the Committee in General Comment No. 13 (1999) and as outline in Article 11(e) and 14(2) of the SADC Protocol on Gender and Development?

1.7 Scope of the Study

There are many proponents of sex education; most argue that it should start at primary school level. Those who advocate for such a stance believe that sex education can be contextualized and become age-appropriate. However, I had to limit the focus of my research, and my target group became students who are attending secondary level school education and between the ages of 13 to 16 years old. Although, secondary education in Zimbabwe continues till Form 6 level when a student is 18 years of age, I found out that in both schools most 'A' Level students do not receive 'sex education' due to their demanding syllabus. My focus then turned to students in Forms 1 to 4, i.e., 'O' Level pupils. However, in limiting my research I do not disregard sexuality education as a lifelong process that should start at the earliest age possible.

Further, the focus was on two schools in the Bindura District of Zimbabwe, mainly Chipadze and Herman Gmeiner Secondary schools. Both these schools are located in a high-density area and are approximately 3 kilometres away from each other. Both schools offer Guidance and Counseling (G & C) as a subject on their timetable. Further, the books used (Books 1-4 in a series called: 'Think About It!') in the aforementioned subject were analyzed in relation to the topic.

1.8 Delimitation of the Study

My area of study was the town of Bindura in Mashonaland Central Province of Zimbabwe. Mashonaland Central is mainly a rural province in which a number of commercial farms are found especially in the Mazowe area. Bindura (shown in the map below) is the capital of the province and the town is approximately 90km from Harare, the capital of the country. I have worked at the Magistrates Court in Bindura since 2005 and I am now a permanent resident there as my husband has lived in the area for most of his life. Agriculture and mining form the economic base and the province is well known for its rich soils.



Figure A: A Map of Zimbabwe showing Bindura the research area

1.9 Definitions of Important Concepts

For the sake of clarification concepts have to be defined that are likely to be confused or misinterpreted. The World Health Organization (WHO) provided the working definition for sexuality along with other related issues such as sexual health and sexual rights (WHO 2002).

Sex:

refers to the biological differences between females and males and sexual equality. Although cognizant of the physiological differences, there is a realization that this should not be an impediment to gender equality. For example, this research topic emphasizes sexuality education for women as a human right as it is women who fall pregnant and are biologically more likely to be infected by HIV.

Gender:

means the roles, duties and responsibilities which are culturally or socially ascribed to women and men, boys and girls. Gender equity around sexuality means respecting both male and female sexuality and sexual needs and rights, and helping both sexes to have fulfilling, safe and non-exploitative sexual relationships.

Sexual and Reproductive Rights:

means the universal human rights relating to sexuality and reproduction, the right to make free and responsible reproductive choices, the right to sexual information based on scientific enquiry, and the right to sexual and reproductive health care (WHO, 2002).

Sexuality:

in this case means the aspects of gender identity that relate to sex. This includes sexual desire and sexual behaviour. For women sex is pre-dominantly about pleasing a man, her husband or partner and about having babies. Hence sexuality often refers to male needs and desires, while women's sexuality is looked down on, ignored, feared and repressed (Jackson, 2000: 88).

Sexuality (Sex) Education:

is described as, the process of acquiring information, forming attitudes, beliefs and values about identity, relationships and intimacy. It encompasses sexual development, reproductive health, interpersonal relationships, affection, intimacy, body image and gender roles. Sexuality education addresses the biological, socio-cultural, psychological and spiritual dimensions of sexuality. This would include developing self-esteem and negotiating and other communication skills, especially for the empowerment of the girl child (Nganda, 2007:56).

CHAPTER TWO

2.0 LITERATURE REVIEW

2.1 Introduction

There have been various articles on the internet on the debate between those who advocate for abstinence-only programs and those who argue for a more comprehensive sex education curriculum. Most of these arguments have centred on developed countries such as the United States. Although there are challenges in sub-Saharan Africa mainly the HIV pandemic, there is scarcely any information in terms of advocating for a more comprehensive sex education curriculum in Africa. The youth are the most critical age group to reach for HIV prevention. About half the population in developing countries is aged 15 and under, thus providing an enormous number of people beginning the sexual active part of their lives. The sexual and reproductive health needs of the youth must be met, despite conservative and cultural resistance. This chapter outlines some of the challenges the youth in Zimbabwe face, and how sexuality education seeks to engage with these challenges.

2.2 Rape

In terms of section 65 of The Criminal Law Codification and Reform Act (The Criminal Law Code) ‘*rape*’ is defined as follows:

Section 65

(1) *If a male person knowingly has sexual intercourse.... with a female person, and at the time of the intercourse –*

(a) *The female person has not consented to it;*

According to the formal law of Zimbabwe, the individual consent of the girl is central when considering whether the crime of rape has been committed. Radical feminists state that female sexuality is appropriated for the sole pleasure of men and it is through sexuality that gender

emerges as inequality (Mackinnon, 1989). Other frameworks such as religion and culture emerge embodying a framework for the regulation of sexuality. In Zimbabwe, the concept of ‘consent’ itself is problematic as there exists a ‘cultural’ attitude that all sex involves a degree of force, particularly the first time, because women are not supposed to say ‘yes’ to sex. This view of ‘culture’ is reflected in the following speech by the Attorney General of Zimbabwe: (Armstrong, 2000:76):

[I]n traditional culture, a good woman is not expected to consent or say yes to sexual intercourse proposed even by her boyfriend or would be husband and at times by her husband where sexual intercourse is taking place for the first time. Our culture expects our women to say ‘no’ even if they mean ‘yes’. Even were a woman intends to consent our culture expects her nevertheless to put up a struggle and resist the overtures. The men too are so culturally attuned to think (the) less of a woman who says ‘yes’ and does so without putting up a struggle. Worse if she should show pleasure in performing the act. The sad result of this cultural behaviour is that in some rape cases a woman’s NO is interpreted to be an emphatic YES. More so in cases where there is an existing relationship like that between a girlfriend and boyfriend.

Our culture or tradition is said to be the source of such norms. Further, female sexual passiveness especially to male overtures is also part of these norms. Because of these norms it becomes difficult to determine whether a girl has actually consented to sexual intercourse. If a girl is not ‘allowed’ culturally to say ‘yes’ – to ‘consent’ – then her ‘no’s become meaningless – they are assumed to mean ‘yes’. Her right to refuse or consent to sex is, in effect, removed (Armstrong, 2000). The crime of rape carries with it preconceived notions of how a female victim should have reacted when she is raped, i.e. scream, kick, struggle and fight back. Recent scientific research shows that this is not correct; rape victims are more likely to react not by struggling, but rather by submitting in order to protect their lives. This behaviour is described as “terror induced, pseudo-calm and detached” (Tamale, 1992:13). When interpreted in a male-dominated court system and combined with ‘cultural’ views of consent, a judicial officer is unlikely to believe there was no consent. This implies a culture which is structured to meet the needs of the masculine imperative. Law then reflects cultural values about female sexuality and the legal system disqualifies women and women’s sexuality.

On the other hand, men are perceived as the dominant partner in most sexual interactions as they initiate sexual activity. Many men then put their personal pleasure first and responsibility,

restraint and respect scores a poor second. It is a common belief, and not unique to Zimbabwe, that men are sexually aggressive and should be initiators in sexual encounters.

These perceptions of female passivity and male force are demonstrated in the first sexual encounter between a couple where there tends to be a physical battle. Armstrong points to images and expressions which imply that a certain amount of force is involved. When the girl is a virgin the man is determined *kuboora* (meaning to pierce or break through). There is a strong imagery created of a violent encounter and the expressions become stronger in slang where the men talk of *kupaza* (to break or destroy) and *kubvarura* (to tear apart) just to mention a few examples. The logical conclusion is that the Shona view sex as a form of invasion and conquest in which the men annihilate the women who are forced to yield and surrender (Armstrong, 2000:79).

The idea of women as passive sexual objects is to be found expressed linguistically in various ways. Feminists have systematically researched the history and current prevalence of sexist terminology in the field of human sexuality. Schulz states that an analysis of the language used by men to discuss and describe women reveals something about male attitudes, fears and prejudices concerning the female sex. Further, that words which are highly charged with emotion, taboo, or distaste do not only reflect the culture which uses them but teach and perpetuate the attitudes which created them (Schulz, 1992:144). In essence, prejudicial language mirrors thinking and generates prejudice and discrimination. The linguistic denigration of women reflects derogatory attitudes towards women and should be challenged through our education system. Shoshana Felman sums up by stating:

“The challenge facing the woman today is nothing less than to reinvent language...to speak not only against but outside the structure.... To establish a discourse the status of which would no longer be defined by the phallacy of male meaning.”

The introduction of comprehensive sexuality education is an opportunity to discuss such topics, as this illustrates the interplay between culture and sexuality. One of the facets of sexuality education is to reduce sexual activity and assist teenagers in the decisions they make concerning sex. Discussions around these topics could focus on open communication and teaching male

students to reject pre-conceived notions about a 'no' being a 'yes'. Consent can be discussed within the context of rape as a criminal offence. An orphan speaking for Women and AIDS in Africa (SWAA) 8th Conference in Uganda in April 2001, asked, (Jackson, 2002, 123):

“You have been teaching us girls to say ‘no’ (to sex) – when will you start teaching the boys to accept the ‘no’?”

A comprehensive curriculum on sexuality could engage young men on their attitudes towards women, promote better understanding as to why men rape women and clear the way for the formulation of more humane social policies, principles and legislative ordinances. There is a need to create awareness of the relationship between the ways people express their sexuality and how this is influenced, dictated and shaped by social attitudes, expectations, norms and taboos. These norms are not static, discussions around sexuality are meant to properly guide the youth in order to promote responsible behaviour and to express their sexual feelings in ways that are not harmful to themselves or others.

2.3 Marriage

Debate around human sexuality and behaviour gives rise to myriad responses. More so when it comes to female sexuality, a number of restrictions describe the experiences of girls and women when it relates to their sexuality. These restrictions rarely apply equally to boys and men. As the debate for recognition of women's rights as human rights has gained momentum, issues concerning sexuality have been pushed to the forefront. One of the challenges with the human rights framework is that even sexual rights can be used to advance the cultural relativist argument. Nyamu – Musembi (2002) states that the radical cultural relativist argument suggests that international human rights, reflect a particular cultural viewpoint, a Western one. Culture, therefore, is viewed as the sole source of the validity of a moral right or rule (Wilson, 1997). More so within the African context, where there exists an interplay between culture and sexuality. In almost all parts and cultures of Africa, all sexual acts that do not fulfil the conditions of marriage and childbearing, are condemned as deviant (Benezeri et al, 1997). This generation of life concerns the whole community and there are sanctions for those who threaten

the perpetuation of the lineage (Mbiti, 1980). Jeater (1993:37) states that whereas African society views sexual acts as a private matter, a person's presentation of sexual self, including reputation and adherence to moral codes, concerned the extended family.

Marriage under traditional Zimbabwean law is a union between families and a way of controlling the sexuality of its members. Sex in a relationship which has not been approved by the family, and which is not done with the intention of marrying is an affront, especially to the control of the family. The customary law offence of seduction, or sexual intercourse with an unmarried girl – that is without the consent of her parents or guardian to her relationship with the boy or man involved, is an offence against parental rights of control over the sexuality and ultimately the marriage of their daughter. Although there is a clear distinction between rape and seduction, in customary law, both offences carry the same penalties. There is thus no need in the cultural context to clearly distinguish the two. This obscures the significance of the girl's consent to sexual intercourse (Armstrong, 2000). Further, *it becomes difficult to differentiate rape from sex*. MacKinnon points out that the fact that courts and juries cannot differentiate between when a woman is raped and when she is 'seduced' should lead us to investigate why they cannot differentiate. In her opinion, they cannot differentiate precisely because there is not much difference; all (hetero-) sex is coercive, as all (hetero-) sex contains an element of violence (whether in the form of physical force or economic power or even love). She adds that it is not helpful for feminists to create *a false differentiation between coercive and non-coercive sex* by calling coercive sex violence, as this presumes there can be no objection to the other (MacKinnon, 1987, 88).

The remedies available to an aggrieved family are damages or simply marrying off the victim of the 'rape' to the perpetrator. The rationale behind awarding damages is that the amount of *lobola* which the family receives will be reduced as the girl is no longer a virgin. The whole family is injured by the girl's loss of virginity as the payment of *lobola* is not only for the benefit of the nuclear family but for the extended family as well. Damage payment is still preferred by families of girls who are victims of rape, especially between the ages of 12 and 18. The problem with the payment of damages is the close affinity to the payment of *lobola*. The payment of *lobola* is said to give men sexual rights over their wives, so families who pay damages may feel they are

entitled to marry the injured girl (Armstrong, 2000:118). The other 'traditional' remedy for rape of an unmarried woman, in addition to damages discussed above, is marriage between her and the man who raped her.

In Zimbabwe, there is no minimum age for a customary marriage, thus customary marriage of a girl between the age of 12 and 18 is allowed. There is a gap in the Customary Marriages Act that does not provide for a minimum age for contracting a marriage. In the research process it emerged that a number of young girls who were cited as victims of statutory rape had been married off to the young men that had committed this offence. The taking of a girl's virginity is traditionally seen as the consummation of marriage. The girls in question are not consulted as to their impending marriage but are merely 'given' to the man's family. Marriage is perceived as an appropriate remedy for rape by communities in Zimbabwe, and continues despite the fact that it is forbidden by formal State law. Armstrong describes that the remedy of marriage is neither protection nor exploitation alone; it is both at the same time. This is because families are motivated by the desire to protect their daughter in traditional terms, and by economic gain and the desire to be rid of the burden of supporting her (Armstrong, 2000, 124). In Shona culture, marriage is a central political institution and as alliances are made between families, individual consent to marry becomes problematic. Culturally, marriage is still seen as of key importance to women, and without it a woman has no foundation in the society. Marriage is necessary, then, to belong to a family, to establish identity and connection. A woman is not considered a full member of the family in which she is born, it is assumed that one day she will marry and leave that family to join her husband's family.

The Shona marriage depicts patriarchal hegemony and perpetuates gender inequality. Young women who are married off at a young age either due to a forced or arranged marriage are unlikely to be able to negotiate condom use with their husbands. It is well known that marriage is a risk factor for HIV. The considerably higher frequency of intercourse within marriage and the much lower likelihood of using condoms places young married women in danger of being infected compared to their still single peers (Watkins, 2010:148). Single women are found to have more sexual agency, when it comes to accepting, refusing, continuing or terminating relationships. One cannot rule out that the wealth of a potential husband may lead a poor family

to force a young girl or woman into this union. Some parents force their daughter(s) into these marriages because they want to be looked after so the daughter becomes a 'pension fund'. Spousal abuse is more common in such marriages because young women are dependent on their husband economically. In most cases these young women are relegated to the domestic arena which is where gender inequality manifests itself in the subordination of women.

Sexuality education provides a platform for discussion on early and forced marriages within the community. The most important aspect is the inclusion of parents in the learning process either through homework that involves discussions with parents that encourage on a broader scale, social awareness. Zimbabwean law protects young girls and women who have either been pledged or forced into marriage. The Domestic Violence Act provides that the pledging of women or girls for purpose of appeasing spirits and the forcing of women and girls into marriage is defined as domestic violence in terms of Section 3(1)². Further, such regional instruments such as the SADC Protocol on Gender and Development emphasize that a marriage should take place with the consent of the parties involved³. The African Charter on the Rights of Women states that state parties shall prohibit and condemn all harmful cultural practices which affect the human rights of women⁴. Further, The Charter also includes the fact that monogamy is the preferred form of marriage but even in a polygamous union the right of women should still be protected⁵.

2.4 Unsafe Abortions

The World Health Organization (WHO, 2004) defines *unsafe abortion* as *a procedure for terminating an unintended pregnancy either by persons lacking the necessary skills or in an environment lacking the minimal medical standards, or both*. Unsafe abortions may also be self-induced using hazardous techniques or using pharmaceuticals without the involvement of a skilled provider or the necessary support. Unsafe abortion puts women's health and lives at risk. According to studies the 15-29 age group contains the bulk of pregnancies and abortions in

² 13 of 2006.

³ Article 8.

⁴ Article 5.

⁵ Article 6.

developing countries (Ahman et al, 2004:10). Unsafe abortion is one of the most neglected problems of health care in developing countries and a serious concern for many women during their reproductive lives. In countries where access to safe abortion methods is restricted, the situation is especially precarious for young women, specifically adolescents, who have in general, little or no access to reproductive information and counselling, and are excluded from contraceptive services.

Respondents in this research acknowledged that most abortions are done in secret and that unsafe abortion is a serious problem. The restrictive laws that prevail in almost all the countries on the African continent are a major cause of unsafe abortion. Zimbabwe has a restrictive abortion law; according to the Termination of Pregnancy Act, pregnancy may be terminated:

- '(1) where the continuation of the pregnancy so endangers the life of the woman concerned or so constitutes a serious threat of permanent impairment of her physical health that the termination of the pregnancy is necessary to ensure her life or physical health, as the case may be; or*
 - (2) where there is serious risk that the child to be born will suffer from a physical or mental defect of such a nature that he will permanently be seriously handicapped; or*
 - (3) where there is reasonable possibility that the foetus is conceived as a result of unlawful intercourse.'*
- (For example, the result of rape, incest, or sex with a minor.)

This law was inherited from pre-independence British colonial laws. Zimbabwean women remain colonized by this outdated law and coupled with the inadequate provision of reproductive health services and information, the consequences are dire for young women. Studies done show an elevated incidence of unsafe abortion in Africa amongst the youngest age group (stated as under the age of 25). The reasons being that much of the sexual activity among adolescents and young adults is unprotected, and initiation of sexual activity more often takes place before marriage. Surveys also show that among those with primary level or no education the percentage of adolescent girls who are sexually active before age 18 is higher than among those with secondary education or higher (Ahman et al, 2004:15). Complications of unsafe abortion cost health care systems a tremendous amount in terms of hospital space, providers' time, antibiotics, blood, and supplies (Pierce et al, 2000). Efforts must be made to prevent unplanned pregnancy

and to provide contraceptive information and services for young women. There is a need for readily available information and family planning services for family planning for young people through sexuality education. It is important that young women are provided with the information on contraceptive use and where to get help when they need these services. The National Aids Council (NAC) recently held a survey in which they solicited the views of the community on the provision of condoms in schools. This debate was carried in local print media and the internet. Most parents felt that the school should be a place of study and should not encourage sexual activity amongst the youth by providing contraceptives. The views expressed by the parents point to a one-dimensional view of what sexuality entails. These views are echoed in Chapter 4, where the views of parents were generally conservative in terms of availing contraception and even discussing contraceptive options for young women within the school system.

Further, the attempt to control rather than educate young people to express their sexuality freely, and in good health, is a violation of their human rights and freedoms guaranteed by numerous regional and international documents. One parent on an online discussion on this issue succinctly stated:

“We should be careful and mindful of putting forward outdated religious conservatism above human rights, health and safety – Teens will have sex whether you like it or not.”⁶

In South Africa, the Choice on the Termination of Pregnancy Act, permits abortion at the woman’s request up to 12 weeks of pregnancy and after 12 weeks in cases of risk to the woman’s health or life, foetal malformation, rape or incest, or if the continued pregnancy would significantly affect the social or economic circumstances of the woman. This law has resulted in increased availability of elective abortion services and a fall in unsafe abortions as more providers are trained and more women become aware that having a safe abortion is legal and possible (Brookman- Amissah, 2004:229).

2.5 HIV and AIDS

⁶ ‘No Condoms In Schools’ Debate on RadioVop, Zimbabwe; accessed online at: www.radiovop.com/index.php/national-news/7659-no-condoms-in-schools-coltart.html

Most developing countries introduced sex education in the 1980s. The emergence of the HIV/AIDS pandemic gave many governments the impulsion to strengthen and expand sex education efforts. For Zimbabwe Guidance and Counselling ('G & C') was first introduced in the early 1990s and it is noteworthy to state that the curriculum has been reviewed three times every five years and has remained virtually the same. There are a series of four books called **“Think About It”** which are used to inform G & C sessions from Form One right through to Form Four. Suffice to say that the message or lessons put across in these textbooks focus on an abstinence-only education. In other words there is very little information to cater for those pupils who are sexually active. Zimbabwe still has a high incidence of HIV infection rates in sub-Saharan Africa. The rate of HIV infection is growing faster among women than men; this demonstrates the unequal power relations between women and men with regard to control of one's sexuality.

Generally because of their different socio-economic, political, legal and cultural status, as well as biology, women are affected by HIV differently from men. Women have less control over their own risk of infection and risk the virus passing from their bodies to a foetus or a baby. In Zimbabwe, the economic downturn and recent dollarisation has led to an increase in intergenerational relationships, involving younger women with older men, females also contract HIV at a much younger average age than males and die younger. HIV infection levels in adolescent girls are often five or more times than those of boys the same age (Jackson, 2000:94). Further, the percentage of girls who have access to information is very low in most regions (Watkins, 2010:139). There are numerous reasons proffered why women are especially vulnerable to HIV. One particular explanation states that male-to-female transmission of HIV is more efficient than vice versa. This is mainly attributed to the greater area of exposure in the genital tracts of women than men, to the larger amount of fluid exchanged from women to men and finally to the higher concentrations of the virus in semen than in vaginal fluids (Watkins, 2010:141).

Social constructions around gender and sexuality are also a causal explanation for young women's higher HIV prevalence. Generally men deem it their prerogative to have multiple partners, refuse to use condoms and may perpetrate violence (from rape to beatings). Women, on

the other hand, are presented as powerless in the face of their male partner, they have been taught to suffer in silence when their husband has another partner and are unable to negotiate condom use (Watkins, 2010:140). These constructions have their roots in patriarchal societies in Africa, which, while often putting certain restraints on male promiscuity, nonetheless have long endorsed multiple partnerships for men in the form of polygamy and other sexual freedoms within prescribed limits. Transmission probabilities are higher in certain circumstances and because the probability for a single act of unprotected intercourse are so low, it is not only the number of partners but also the frequency of sex that matters for the likelihood that an individual will become infected over time.

One of the aims of comprehensive sex education is to provide information not only on the dangers of unprotected sex but limiting the number of sexual partners as well. More than anything HIV/AIDS has brought African sexuality into the public domain. With the spread of the virus, understanding human sexuality appears to be crucial for effectively addressing the pandemic. The vulnerability of young women cannot be ignored and needs to be addressed through a multi-dimensional approach that involves, but is not limited to, sexuality education.

2.6 Case Law

Zimbabwean case law will be assessed in light of the High Court cases of *Wazara vs. Principal, Belvedere Teachers College and Another* (1997) and *Mandizvidza vs. Chadoka* (1999). The facts to these two cases are similar in that they involve two women who got pregnant whilst at teacher training colleges. Whilst the *Wazara* (1997) case did not discuss the concept of sex or gender discrimination in full because Constitutional Amendment No. 14 which outlawed discrimination on the grounds of sex and gender had not come into effect at the time, the student was however not withdrawn from the teacher training course. The case of *Mandizvidza* (1999) on the other hand, fully explored sex and gender discrimination. The learned judge assessed pregnancy as a biological truth for women but observed that the consequences of a limited education have the effect of perpetuating gender inequality. This is because the ‘punishment’ visited upon a pregnant woman cannot be imposed on a man and this is because men do not bear

the physical signs of pregnancy and do not eventually nurture the children of the union, hence, the clause in question was patently discriminatory. Further, the learned judge implored institutions of learning to build child care facilities that better enable women to combine the role of mother and productive members of society. Robin West, a relational feminist, would agree with the learned judge in that the most important task, is not to fit women into a man's world, not to assimilate women into patriarchy, but to change institutions to reflect and accommodate the value and characteristics associated with women, virtues such as love, sympathy, patience and concern (West, 1987). This case also illustrates how judicial decisions can influence society and foster change. This is illustrated in the quotation below:

'Judges have a certain amount of freedom or latitude in the process of interpretation and application of the law. It is now acknowledged that judges do not merely discover law, but they also make law. It sometimes happens that the goal of social and economic change is reached more quickly through legal development by the judiciary than by the legislature.'

(per Chief Justice Gubbay, 1990⁷; my emphasis)

There was a comparison made between the male and female where the male continues with his education 'unencumbered' by the burden of responsibility. Although the judgment in *Mandizvidza* is progressive, for all intents and purposes women continue to be weighed down by their gender roles as opposed to men. This argument will be explored further in a later chapter.

The European Court of Human Rights addressed the human rights dimension of sex education being taught in school in the case of *Kjeldsen, Busk Madsen and Pedersen v. Denmark*. The context of the case is that the state of Denmark had introduced compulsory sex education in State primary schools as part of the curriculum. There were guidelines and safeguards against: (a) *showing pornography*; (b) *teachers giving sex education to pupils when they were alone*; (c) *giving information on methods of sexual intercourse and* (d) *using vulgar language while imparting sex education*. The applicants, parents of state primary school-going children, were not satisfied that the guidelines and safeguards protected their children sufficiently. They gave several petitions to have their children exempted from sex education in concerned State schools.

⁷ *Zimnat Ins Co Ltd v Chawanda* 1990 (2) ZLR 143 (S), 154 A-D.

Article 2 of Protocol No. 1 to the European Convention of Human Rights provides:

“No person shall be denied the right to education. In the exercise of any functions which it assumes in relation to education and to teaching, the State shall respect the right of parents to ensure such education and teaching in conformity with their own religious and philosophical convictions.”(my emphasis)

The applicants argued that the Danish Government had violated Article 2 of Protocol No. 1 to the European Convention by refusing to exempt the applicants’ children from compulsory sex education in school. The State argued that Article 2 only relates to religious instruction and not all forms of instruction such as sex education. The Court held that compulsory sex education ‘conveyed in an objective, critical and pluralistic manner’ does not violate the right of parents to ensure education for their children in conformity with their religious beliefs.⁸ The State is forbidden to pursue an aim of indoctrination that might be considered as not respecting parents’ religious and philosophical convictions. Article 2 would be violated only if while imparting sex education, the teachers advocated for sex at a particular age or particular type of sexual behaviour. Moreover, the parents still had the freedom to educate their children at home and to instill their own religious convictions and beliefs and, therefore, imparting sex education in itself was not a violation of Article 2.

These cases signify the significant role the judiciary can play in furthering the right to education. However, different courts in different countries might have different views. A court’s view in such a situation would depend on the constitution and other legislation together with the cultural and political opinion of such education in that country or region. A court might uphold cultural rights or it could perceive a violation of a child’s human right to primary or secondary education.

Zimbabwe currently has a Constitution that enumerates civil and political rights only. The country is awaiting a new constitution and hopefully it will articulate economic, social and cultural rights, which are justiciable (i.e., enforceable in the courts). The South African Constitution contains a separate external limitations clause, which applies to all rights contained in the Bill of Rights. Women in South Africa have challenged the status of culture and a new

⁸ Kjeldsen, Busk Madsen and Pedersen v. Denmark, 1976 EHRR 711 paragraph 53.

ideology has developed in that male primogeniture, for example, is seen as discriminatory against women⁹. An interpretation clause enjoins courts to infuse the '*spirit, purport and objects of the Bills of Rights with the values it espouses when interpreting legislation*' (Mokgoro, 1996). The Constitutional Court is also willing to give a broad interpretation of the equality clause which states:

Section 9

(1) *The state may not unfairly discriminate directly or indirectly against anyone on one or more grounds, including gender, sex, culture....*

....

(3) *Discrimination on one of the grounds listed above is unfair unless it is established that it is fair.*

Further, the South African Bill of Rights is couched within the traditional framework of International human rights instruments. Section 35(1) provides that where applicable, Courts should take into cognizance public international law read together with Section 231(4) which states that the rules of international customary law form part of the law of South Africa.

2.7 Benefits of Sex Education: An African Perspective

Nigeria introduced its sexuality programs in the early 1990s and the focus of the programme(s) was not only on reproductive health, but also moral and human rights aspects. This was an attempt to address the unmet sexuality education needs of young people and several governmental, non-governmental agencies and individuals implemented programmes targeting different categories of young people including secondary school students. The findings confirmed that the resources invested in implementing sexuality education programmes for young people were worth every Naira spent because they led to an improvement in the reproductive health status of the young people who participated in them. Evidence of this improvement can be found using the key indicators listed below:

⁹ *Shilubana and Others vs. Nwamitwa and Another* CCT 03/07 [2007] ZACC 14; 2007 (9) BCLR 919 (CC) 17 May 2007.

- **Knowledge of reproductive health** – An increase in knowledge and understanding of reproductive health issues among programme beneficiaries was noted, for example, students who participated in the peer-led sexuality education programme implemented in selected states in Nigeria, had a superior reproductive health knowledge score compared to comparison groups (Brieger et al, 2001).
- **Change in Attitude** – Another benefit of sexuality education among young people is a positive change in attitude towards the use of contraceptives and to people living with HIV/AIDS. Some of the positive behaviours attributable to sexuality education are a reduction in the number of sexual partners, and an increase in the use of condoms. Students who received sexuality education implemented by both peer educators and teachers reported significant increases in the use of condoms (from 20.8% to 53.1%) (Ajuwon, 2007).
- **Reduction in reproductive morbidity** – A positive outcome from a sexuality education programme among secondary school students in Osun State was a reduction in school drop-out rate due to unplanned pregnancy. One study showed a decline in the proportion of female students who dropped out of school from 13% to 4% among students who participated in a sexuality education programme compared to an increase from 11% to 25% in comparison schools. A sexuality education programme in Ibadan led to significant incidence of physical assault from 65% at baseline to 23% at follow-up and in the proportion of female students who sought help during episodes of gender-based violence rose from 40% at baseline to 73% at follow-up (Ajuwon, 2007).

Contrary to the general belief that sexuality education may be counter-productive for young people, research evidence confirms that this type of intervention produces several positive outcomes. Further, an integrated multi-sectoral approach that involves parents and other stakeholders has driven the implementation of sexuality education in Nigeria.

CHAPTER THREE

3.0 RESEARCH METHODOLOGIES AND DATA COLLECTION METHODS

3.1 Methodological Framework

This chapter elucidates the methodologies and data collection methods that were used in the research process. An effort was made to capture the voices of women and men to find out their views on sex education and to assess the gaps in our education curriculum. The methodologies used were Grounded Theory, Sex and Gender Analysis, Women's law Approach, and the Actors and Structures approach. The challenges in using these methodologies will be outlined at the end of each methodology.

3.1.1 Women's Law Approach

The Women's Law approach seeks to capture the interplay between law and life from a woman's perspective. This is because the law codifies the needs, opinions and conflicts of men. Law becomes important in perpetuating patriarchal hegemony (Stang Dahl, 1987). The needs, values and ideals of women are not captured within the law and this is what this particular approach seeks to address. The law can perceive reality which results in unintended consequences with regard to the situation of women. This approach helps in '*reconstructing reality*' and questions traditional male hegemony in our society. The empowerment of women can take place through legal structures and can contribute to vast changes where change is slow in coming. Essentially a bottom-up approach was utilized as I sought to capture the voices of women in terms of sex education.

Zimbabwe recognizes the right to education and the need for women to be productive members of our society. The National Gender Policy recognizes education as one of the key sectors that '*poses a big challenge to the eradication of gender imbalances and inequality since it is the foundation of economic and social development*'. As part of the strategies outlined, there is a

need for the curriculum to incorporate gender issues at all levels of education. Whilst the framework is there, the question was whether there was a sex education curriculum and, if so, did it provide information that was pertinent to the health of young women? Women were approached to find out their lived realities in order to assess how wide the gap was between the law and reality.

The right to education in Zimbabwe is seemingly viewed in limited terms. The goal is for x number of girls and young women to enroll at primary, secondary and university and vocational training institutions. It emerged that young women drop out of school at secondary school level. Female students and teachers at Chipadze High School stated that the figures if ever available would be alarming! However, there were no statistics on the number of female students who drop out neither was there disaggregated data of students at the schools researched either. This led to the view that women's concerns and needs are not prioritized within the education sector; it is women who are affected by unplanned pregnancy and early marriages and therefore the group most affected by levels of illiteracy. This in a sense confirmed to me the view in Stang Dahl (1987) that:

“The existence of biological, social and cultural differences between women and men are not regarded as the main problem in women's lives, but rather law and society's systematic under-valuation of female activities, values and characteristics are seen as the main source of women's subordination.”

Although use was made of qualitative data the lack of quantitative data frustrated the research process. For while it is one thing to talk about the challenges women face, without quantifying them, it is like shooting in the dark as one fails to hit the target of articulating the reality of the problem with any great particularity. Part of the problem is that there is reluctance on the part of teachers and school heads to investigate why a particular female student would suddenly disappear and stop attending classes. For example, at Chipadze High School there are 2075 students with the ratio of teacher to student being 50:1. There are about ten Form One classes which follows through right up to Form four. A bright and intelligent young girl merely disappears through the cracks upon falling pregnant as there is no follow-up to establish whether she can return to school. The next question was whether there was any policy framework to enable girls who fell pregnant to continue with their education. Indeed there was one such policy,

but hurdles in the form of implementation hindered the prospects of a secondary education for young women. A women's law perspective of contrasting perceptions about implementation and the reality experienced by women (in this case, including girls) on the ground was used. Further, identifying the problem would not be enough; corrective action specifically at policy level had to be identified.

The woman's law approach led to an interrogation of limited opportunities for women when they do not possess any form of qualification. The researcher spoke to three prostitutes who expounded the challenges of prostitution. The perceptions of these three prostitutes were informative as the knowledge they gained from hindsight helped them to come to understand and cope with the social realities that exist for women. They spoke of their role as mothers and how men can evade their responsibilities by either running away or simply denying paternity. For women it is not easy to escape the role of motherhood as nurturers and as bread winners, they were abandoned by their partners and had to provide for their children the best way they knew how. A lack of education for women created a dilemma for them: as single parent mothers and sole breadwinners for themselves and their children, they had to divide their time between privately being effective mothers to their children and publicly earning the cash to do so by pursuing limited employment opportunities. These three prostitutes stated what they thought should be included in a sex education curriculum that would enlighten and awaken young women to the realities of the world.

This approach also included capturing the voices of women from across the social spectrum to see whether they speak with one voice over sexual and reproductive health rights. It came across how little women actually know about their rights. Women consider for example that they are entitled to an education, resources permitting; the content of the education does not really concern them. In other words, they do not see the role they can play in formulating curriculum. A group discussion with a group of women enlightened me on this aspect; hopefully, they were enlightened pertaining to the role they can play in educating their daughters about matters of sex and sexuality. One area women who spoke with one voice, though, is that the girl child needs to be empowered and education plays a major role in this process.

3.1.2 Sex, Gender and Law Analysis

The distinction between ‘sex’ and ‘gender’ is confusing to most lay people but at times even legal minds say gender in reference to women and gender discrimination when clearly it is sex discrimination that is at issue. These terms need to be clarified especially in reference to sexuality. Although the right to education enshrined in the Education Act provides that everyone has a right to an education and that the curriculum is determined by the MoESC, this law did not envisage the implications of a non-comprehensive sex education curriculum on young women. For example, having confirmed the first assumption on the basic conceptualization of sexuality of our curriculum, a sex analysis was employed in asking which sex was most affected by a curriculum that does not include aspects such as contraceptive methods? A gender analysis would not address the physiological needs of women which include pregnancy and being at risk of contracting sexually transmitted infections due to our physiognomy. I concur with Stewart’s (2007: 298) argument that the physiological differences do not matter in the quest for equality; it is the consequences for females that need to be analyzed so that sexuality education is put in place and the field is levelled in all respects between men and women. But as this research also shows, scant attention has been paid to the consequences of curriculum which is, in fact, inadequate. Suffice to say, males and females were interviewed, the basis was that everyone experiences burgeoning sexuality and the consequences thereof. Further, male understanding and even misunderstanding of the female experience is an important component in the development of a sex education curriculum.

Female sexuality is a construction; the question was how do sexual norms bear on the experience(s) of men and women? The gender analysis was utilized to assess how constructions of sexuality affect men and women differently. Throughout the research process I was aware through experiential data how the same rules that regulate sexuality apply differently to men and women. For example one teacher mentioned that when she talks to female students she emphasizes abstinence. She does not talk about abstinence to young male students. If our sex education curriculum emphasizes abstinence, to whom is the message directed? There are double standards; for example, pre-marital sexual intercourse is more acceptable for men than for women.

Education officials and teachers will state the message is intended for both young men and women but does that reflect societal constructions around male and female sexuality? In African society, women are expected to be passive, pure and virginal whilst young males are allowed to experiment even at an early age to gain experience and knowledge on sexual matters. On the other hand, a male teacher stated that he would not want to teach sex education especially to female students as either this would be misconstrued as seducing the young women or encouraging them to have sex (with the said male teacher). This led to the question, what informs this way of thinking? Are the young women today going against gender hierarchies and societal sexual scripts?

Further, another way female sexuality is regulated is through dress code and even in school uniform a female student who wears a shorter skirt is labelled. Through observation it was noted how young women who were outspoken in a group discussion suddenly became quiet when the male students joined the group discussion. Gender hierarchies emerge in classrooms to the detriment of young women. A sex, gender and law analysis allowed the interrogation of how sex and gender discrimination is interpreted especially in light of the reasoning behind the judgment in *Mandizvidza*. Gwaunza J in the aforementioned case stated:

“It should be noted that the respondents appear to have a superficial understanding of gender discrimination within the context of clause 7(a) of the contract. The contention of the first respondent is that the clause treats both male and female "offenders" equally by providing that a female student who fell pregnant and a male student who caused the pregnancy of a female student or pupil breached the contract and were deserving of penalty. I find such reasoning to be fundamentally flawed. At a theoretical level, discrimination is evident in the fact that while a male student only offends against the provision if he impregnates a female student (at the college) or a female pupil, the female student offends by the mere fact of falling pregnant. For her, it does not matter whether the person who makes her pregnant is a student or pupil, while, on the other hand, the male student who makes a woman other than a student or pupil pregnant presumably will not offend against clause 7(a) and will not be visited by the same penalty”.

In following that line of argument the policy framework adopted by the MoESC, was formulated to provide for the return of the female student who fell pregnant so as to continue with her education (Circular P- 35), it also provides that a male student who impregnates the female student, ‘*shall take leave for the same period as the female student*’. Seemingly the policy did

not consider the line of argument by the learned judge above. It is therefore a foregone conclusion that the policy would only affect young females based on their sex-difference and not males. Further, because the policy is not being implemented this has the effect of perpetuating gender inequality. A sex and gender analysis allowed the interrogation of the equality principle in such policy frameworks especially in light of the fact that in reality it is only women who become pregnant and have to take a leave of absence from school. It is also women who have the burden of nurturing a newborn baby to the detriment of their education. What can be done by schools to ensure that women combine their roles as mothers and productive individuals in our society?

3.1.3 Grounded Theory Approach

This approach starts from interrogating what is taking place on the ground as opposed to desk research. Grounded theory is described as an iterative process which facilitates continuous dialogue between legal concepts, assumptions and an ever-growing data base of empirical knowledge obtained from men and women's lived realities on gender relations, local practices and norms (Bentzon et al, 1998). This process was used on all of the assumptions. So, for example, when students stated that they learnt about HIV/AIDS in G & C I sought to find out the content that constituted this subject and whether it was in fact being taught at the schools researched. Interviews were carried with key respondents such as school heads and relevant government officials. Questions developed as research progressed; for example, the attitudes and perceptions of parents towards sex education emerged as a category and the next question was whether all parents shared the same view on sex education? Further, to emphasize the need for concise information through comprehensive sex education, students were interviewed on what they told each other as peers.

One of the challenges encountered when questioning people in the field is a limitation in terms of language. There are no words to describe 'sexuality' and 'sex' in my local language without the very real risk of sounding vulgar. This is also shown by curriculum developers who shy away from the words 'sexuality education' and replace them with euphemisms such as 'life skills' and

'life education'. There was a need to tread carefully in clearly defining terms in the presentation of the research as parents were quite conservative. Parikh (2005) states that public culture discourses about sexual matters are commonly done in English and also that using English provides a certain license for discussions that would be considered too vulgar or inappropriate for public consumption if uttered in local languages. This led to the realization of the significance of language in reinforcing patriarchal hegemony in that matters of sexuality are seldom discussed; the effect is that issues that concern women are not interrogated because language becomes yet another 'barrier'.

3.1.4 Influence of Actors on Norms and Structures

This approach surmises that social and legal change takes place through interaction between human beings and not through a seemingly abstract medium such as the law. The choice of action one might choose to pursue might be limited by the social and family structure, the legal structure, the religious structure or the economic structure they act within (Bentzon et al, 1998). The focus on the analysis is therefore on different actors and the structurally imposed possibilities that influence how they can pursue their goals or resolve their problems. The structure is then both enabling and constraining but does not totally determine the actor's behaviour. This is because there is an inherent and constant relationship between the structure and the actions of the actor or agent of change.

For example, in the research some students stated that their paternal aunt or *tete* no longer advised them as tradition outlined. Traditionally the moulding of a girl's sexuality was the joint responsibility of her mother and her *tete*. It was the *tete* who guided a young woman through her sexual development and later served as sexual advisor. Zimbabwe has experienced profound social changes over the last half century, sexual learning has gradually become detached from kinship settings and a void has been seemingly created. In the research it was discovered that some girls are turning to their *ambuya* (maternal uncle's wife) for advice on sexual matters. The *ambuya* is related to the young woman through marriage and yet the fact that there are no blood ties creates a favourable atmosphere for open discussion of sexual matters. I also recalled that I

could talk openly to my *ambuya* and the first discussion I had on pulling of the labia was with my *ambuya*. The young women interviewed stated it was their *ambuya* who encouraged them to pursue their education and empower themselves. This illustrates how the structure of custom and practice has enabled a new actor to emerge as the modern version of the *tete* and how the process of change will often reflect old customary concepts combined with new practices and gender values. This is also seen in the example of the ‘new’ and commodified *ssenga* (paternal aunt) in Uganda. Parikh (2005) stated that the commodified *ssenga* plays on the roles, duties, and sexual wisdom often attributed to the kin based *ssenga* and is conveniently packaged into a powerful symbol of cultural heritage and modern knowledge. The ‘new’ *ssenga* is able to creatively push and merge the distinctions between tradition and the modern and can unapologetically defy the boundary between illicit and acceptable.

There are also teachers who stated that each morning before they begun lessons they imparted sexual advice to their students. One teacher stated that her motivation was driven by the lack of information for the youth especially on sexual matters. She added she told students that she was willing to listen and converse openly to them when approached, usually after class. These teachers, though few in number, show that the structure of education and the learning process can be negotiated to accommodate the needs of young people. The learning process itself is a structure in that it involves a didactic way of imparting information. The teacher has a structured syllabus which she is mandated to teach within a certain period of time. She will rarely depart from this syllabus as examinations are based upon it. This alone limits and is limiting on the student she teaches as she can only entertain questions on those topics she teaches. The teachers who advise students on sexual matters are therefore not constrained by the syllabus in relation to this particular behaviour and in the process they alter perceptions of reality.

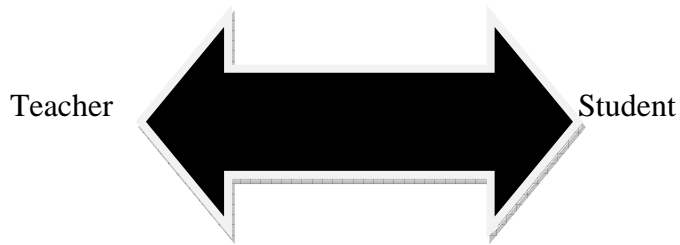


Figure B: A Diagram representing the existing teaching relationship between teacher and student

The diagram above (Figure B) illustrates how the teacher is confined to teaching that which is in the dark-shaded area within the two-way arrow which represents the syllabus. The two-way arrow shows how interaction between the two, the teacher and the student, is based strictly on matters related to the syllabus and how this 'structure' limits the interaction and flow of any other information. In essence, though sex education should be structured to some extent, how it is taught and the methods used to inform should be diverse and they should endeavour to capture the imagination of a young audience.

However, on the whole, the research process encountered actors who had little knowledge on their role in the structures. Parents were adamant that 'their' culture did not allow them to talk openly to their daughters about sexuality! Religious texts were cited by parents as authority in matters related to any acceptable forms of sexual intercourse. Conservatism offered solace despite overwhelming concerns of early teenage pregnancies, limited employment opportunities and HIV/AIDS. This clearly illustrated that a lot needs to be done to change perceptions in adapting to reality. Lastly, this approach was helpful in assessing which actors and/or structures supported continued gender inequality in light of a non-comprehensive curriculum.

3.1.5 Intersections or Pluralities

In order to accurately perceive a woman's reality, one has to consider how women fare differently according to the social and economic environment she resides in. Stewart (2008) visualized a woman's location in relation to the complex normative systems in which she exists.

These influences govern the way the woman navigates her way through life and compel her to make a decision. The research process embraced the consideration of the forces around the women interviewed because it is those forces that will determine whether she can talk about sex education or reject the very notion of it. A mother stated she would like to talk to her daughter about sexuality but she was afraid of how her husband would react as he would probably think she was encouraging their daughter to be sexually active. Further, she lived with her mother-in-law who would not support the idea either. Her fear was that her husband and mother-in-law would judge her and blame her if her daughter were to become pregnant. She felt that she shared her life with her husband and although she could keep it a secret from her mother-in-law, she could not keep it a secret from her husband. One cannot easily judge this woman for choosing her husband over her daughter, so to speak, but there is a need to be aware of what influences her decision at the end of the day. The family, especially the due consideration given to the husband as head of the family institution, and social perceptions might be strong factors influencing her decision. She might decide not to act at all in order to avoid conflict with these normative systems.

3.1.6 Capabilities Approach

The question was: *‘What are the capabilities that are put in place that guarantee the enjoyment of the right to a comprehensive sexuality education in line with the right to reproductive health?’* This allowed the assessment of the content of G & C as the syllabus for sex education in Zimbabwe in light of research done on what topics inform a successful sexuality education programme. Due to the interrelated nature of the right to reproductive health and information, what role did stakeholders such as the National Aids Council (NAC) play in providing support to the education sector with programmes on risky sexual behaviour and HIV and AIDS in line with the Zimbabwe National Policy on HIV/AIDS (Principle 35)? The NAC stated that they had done a survey on attitudes and perceptions towards the provision of condoms in secondary schools. The community in Bindura had been vehemently opposed to the idea and the MoESC could not implement this proposal. The Ministry of Health had then emphasized its readiness to provide the youth with condoms and contraception at nearby local clinics without prejudice.

3.2 Data Collection Methods

3.2.1 Qualitative and Quantitative Data

Qualitative data was obtained from interviews with students, teachers and parents. In terms of students there were two group discussions and a group interview. Permission was granted by the school head to approach students who were not attending classes to have group discussions. As stated before there was a great need for quantitative data but this was made difficult by the lack of statistics within the school system. There is a great need for disaggregated data to assess to what extent young women drop out at secondary school level. The opportunity to use both methods comparatively in analyzing research data was lost.

3.2.2 Group Discussions

Three group discussions were held with parents, students and teachers. They are outlined below:

Respondents	Females	Males	Total
Parents	14	10	24
Teachers	7	3	10
Students	33	44	77

Table 1: Showing Group Discussions

The group discussion with students was vibrant and lively and it was clear that the youth seldom have an opportunity to discuss sex and sexuality. This highlighted the need for the youth to participate in matters that affect them and that, despite numerous hurdles in society, the youth and especially young women would have a brighter future if only their needs were prioritized. They were vociferous in their need for sexuality education and because I simply listened, without

interrupting, and without passing judgment (a difficult task considering my profession involves handing down judgments).

3.2.3 Group Interview(s)

Three group interviews were conducted with parents, teachers and students. The respondents are outlined below:

Respondents	Females	Males	Total
Parents	8	-	8
Teachers	3	-	3
Students	3	4	7
Prostitutes	3	-	3

Table 2: Showing Group Interviews

The necessity to have group interviews emerged during and as a result of the research after holding a series of generally exploratory discussions with respondents and the need to find out if a certain aspect was true. For example it emerged that students inform each other about sexual matters. The danger in that was misinformation. There was an ‘intimate’ discussion with seven students between the ages of fifteen and seventeen about what exactly they told each other. These youths were guarded as they would not simply divulge what they told each other, a sample of my questions is set out below:

- Can a young woman get pregnant the first time she has sexual intercourse?
- Is there a time of the month when a woman cannot get pregnant?
- Are you too young to contract HIV/AIDS?
- Do you have access to condoms if you should need one?
- Do contraceptive methods i.e. the pill cause infertility?

The questions emanated from the myths and misconceptions to which I had been exposed when I was in secondary school. There was the need to assess whether these misconceptions were still prevalent with the passage of time. The research in this case had to speak for itself through the answers the respondents gave.

The second group interview with the three prostitutes was not structured, but the intention was to let the respondents lead me towards my questions. They reminisced on their life stories including their levels of education. Their current experiences were used to reflect back to their youth. They were encouraged to complete the sentence which was, “*If I could go back in time...*” In their reflections they stated their regret at having little or no educational qualifications. It is at that point the research topic was hinted at. In other words, I approached the research topic in a round-about way and this had the desired effect of making the respondents feel that they were assisting with the research process.

3.2.4 Key Informant Interviews

Key Informant interviews were done with officials within the MoESC and these included school head(s), Senior Teachers, the PED and the Gender Focal Person. An interview was also done with the Provincial Coordinator for the National Aids Council. Interviewees were guided towards their definition of sex education and what topics should be included in a sex education curriculum. There were no questionnaires used in the interviews conducted.

3.2.5 Random Sampling

Further, there was a need to know how society defines certain concepts, such as ‘sexuality’. Therefore, the individuals questioned were selected in various locations, including, on the streets of Bindura, in the local market place and in hospital(s). They were chosen randomly. This was not an easy task as they were selected and judged purely on their visual appearance i.e. based on their sartorial or professional appearance. This technique was prejudicial in the sense that it was basically a case of ‘judging a book by its cover’ but it was helpful in enlightening the researcher

that it will not always suffice to assume that an individual will be aware of certain concepts based simply on his/her appearance. As stated already, the term 'sexuality' is not clear in our local language and, therefore, there was a need to consider the respondents' potential to answer and comprehend the term(s) in English.

3.2.6 Observation

Participatory observation was employed in the group discussions and group interviews held with students as this offered a platform to research as well as observe. In one of the group discussions initially there were female students only, later on male students joined the group. The demeanour of female students changed almost immediately and they were not as expressive and vocal as before. Further, the reaction of the male students to female students who openly expressed their views was also enlightening. There was need to explore what informs these attitudes from both the male and female perspectives. It is one thing to talk about gender hierarchies and power structures, but seeing them play out before your very eyes is another thing altogether. This was enlightening on the social dynamics that play out within the classroom and led to the consideration whether female students should be separated from male students in the classroom when it actually comes to teaching comprehensive sex education. The research process required my attending a G & C class in order to observe the methods of teaching and topics explored. This, however, became impossible as numerous excuses were given about timetables and at one point a teacher who had said she would be available to conduct a lesson conveniently 'disappeared'. These events led to the conclusion that G & C is not prioritized as a subject; the plausible reasons will be outlined in the next chapter.

3.2.7 Desk Research

As most of research done on sexuality education focused on the developed world, there was desk research in order to find out if there were any articles on sexuality education in the African context. Further, research was done on problem areas with regards to sexuality within

Zimbabwe. Most of the information was researched on the internet and in library books; an argument was developed based on this research.

3.2.8 *Experiential Data*

There is a clear emphasis on experiential data on the entire research process. It was virtually the starting point before the actual research began. I continuously reflected on similar experiences that I had had as I interviewed the respondents. In Bentzon et al (1998:157) it was stated that memory work is a method of evoking hidden experiential data as it brings individual or collective experience to the surface for conscious consideration. In the group interview with teenagers I invoked the ghost of memories past so as to recall the misconceptions about our physiology and sexuality in my teenage years. The questions asked were based on these memories. Fortunately, this approach succeeded as students responded with their own ‘modern’ versions of the same or similar myths and misconceptions.

3.2.9 *Documents*

A content analysis of textbooks as shown below was also done to assess the extent to which the material that is used in secondary schools adequately covers aspects of a comprehensive sex education.

Title of Book	Form	Publisher
‘Think About It! An Aids Action Programme for Schools’	1	Developed by the Curriculum Development Unit, Ministry of Education and Culture Zimbabwe with assistance from UNICEF
“	2	
“	3	
“	4	

Table 3: Showing the ‘Think About It!’ series of books used in the current sex education curriculum

3.3 Conclusion

On the whole the methodologies used and data collection methods were effective in terms of gathering the relevant data. It became necessary at times to employ innovative techniques in order to engage with respondents. When respondents were not cooperating well the mention of my profession opened a number of doors. This is particularly true with government departments and teachers. Indeed, there were challenges but instead of simply giving up, it was a question of going back to re-strategize.

CHAPTER FOUR

4.0 MAIN FINDINGS AND ANALYSIS

4.1 Introduction

This Chapter outlines the main findings in the field research in relation to sex education in secondary school education. These findings are informed by the assumptions that informed the research going to the field. Emerging issues that came out during the research period that were not anticipated are also included as part of the research findings. The form and content of sex education in Zimbabwe is the starting point with factors that inform sex education such as attitudes and perceptions following chronologically.

4.2 The Form and Content of Sex Education in Zimbabwe

In this research it emerged that Zimbabwe has ‘sex education’ in Guidance & Counselling (G & C). This subject is sometimes termed ‘Life Skills’ and is on the timetable of most secondary education schools. The focus is directed on what is taught in G& C and through this insight hopefully the form or substance of G & C will be brought out.

4.2.1 *Preoccupation with Abstinence*

It is clear that the content of G & C textbooks generally focus on abstinence. Sex education in this case is assessed in line with the Economic, Social and Cultural Rights Committee which hold that curriculum shall be directed to ‘*the full development of the human personality*’ to be the most fundamental objective of education. The Provincial education Director (PED) Mr. Mazibeli stated:

“I do not think that G & C really covers the complexities of that area (sexuality) at the moment, however, it is currently being reviewed.

Definitely adolescent sexual and reproductive health is not adequately covered.”

The general consensus by teachers who teach the subject is that guidance and counselling is premised on abstinence-only education. That is the basis that guides all else within the curriculum. All other aspects such as decision-making skills and self-esteem are then limited in context and constrained within that framework. The teaching methods are also pertinent as they focus on literally instilling fear in adolescents so as not to indulge in sexual intercourse. There is established evidence that the skills achieved through sexual and reproductive education are highly dependent on the education methods (Hellum et al, 2007, 353). A G & C teacher at Chipadze High School stated:

“I have pictures of private organs ravaged by sexually transmitted infections which I show the students all in the hope of deterring them from or delaying sexual encounters.”

The language that is used is also pertinent as G & C pages explicitly and implicitly state what the youth should decide or how they should act. It is common to find ‘*Say No to Sex!*’ slogans or illustrations of youth who have indulged in sexual intercourse and are now worried about the consequences of their conduct. Seemingly all these depictions and illustrations are meant to encourage the youth to delay sexual intercourse until marriage. Indeed, young people who are not yet sexually active should be encouraged to delay sexual intercourse until they are in the right relationship, are emotionally and physically ready for sex, and are able to avoid the risks of unwanted pregnancy and infection. They also need to consider religious and cultural values. For instance, will having sex outside marriage be acceptable to them or will it lead to deeper feelings of shame or guilt; or to the risk of blame, punishment and loss of social and family respect if it is discovered? In other words they need to weigh up the costs in a realistic way (Jackson, 2002:121).

Another important message for the youth which is absent from the G & C books is that, even if they have had sex once, this does not mean that they can no longer practice abstinence. They can still decide not to have any further sex for a long time and should not be talked into unwanted sexual activity by a partner or by peer pressure. The bottom line of sex education is to teach the

youth to make good decisions regardless of whether they are sexually active or not. The focus on abstinence encourages the prevention of both pregnancy and infection. It is in line with safe practices that guarantee the right to health as outlined in the Article 24 of the Convention on the rights of the Child and Article 12 of the Convention on the Elimination on All Forms of Discrimination Against Women (CEDAW). The Economic, Social and Cultural Rights Committee has held that States are obliged to take all necessary measures to provide a variety of facilities, goods, services and conditions in order for women and teenage girls to realize their highest attainable standard of health.¹⁰ The Child Rights Committee has, in general comments, come up with an interpretation on the relevant provisions on the rights of the child. As regards adolescents' right to information, skills development, counselling, and health services, the Child Rights Committee states that:

'In light of articles 3, 17 and 24 of the convention, states parties should provide adolescents with access to sexual and reproductive information, including information about family planning and contraceptives, the dangers of early pregnancies, the prevention of HIV/AIDS and the prevention and treatment of sexually transmitted diseases (STDs)..... It is essential to find proper means and methods of providing information that is adequate and sensitive to the particularities and specific rights of adolescent girls and boys.'

(CRC, General Comment 4, paragraph 28)

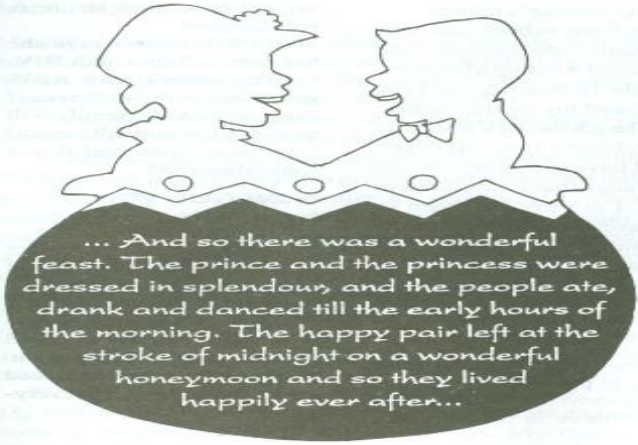
The focus on abstinence-only education would not be adequate to meet the standard enumerated in international conventions such as the CRC. Abstinence-only programs are based on religious ideals and values. Whilst teaching on marriage and abstinence is not wrong *per se*, abstinence should not be the sole focus and only method of prevention. Marriage is viewed as a God-ordained institution and that the sexual relationship should be confined to marriage. According to a trainee Church Pastor to whom I spoke:

“Sex is always proper between couples who are properly married and faithful.”

¹⁰ Committee on Economic, Social and Cultural Rights General comment No. 14, paragraphs 9, 11, 12 (b) and 53.

Teachings on condom use, according to this respondent, provide a means of indulging in immoral sex. Overall, there is little room for personal choice in sexual expression that departs from the biblical standard. The choice available is that of conformity, not of unlimited freedom. Various feminists have problematised the marriage institution especially in light of unequal power relations which renders women vulnerable as they cannot negotiate for safety in these relationships. With the increase of education and the need for sufficient economic security to marry, many young people delay marriage for years after they have reached sexual maturity. They need to effectively cope with their sexuality for that period of time; the curriculum has to be relevant to these socio-economic changes. Messages about the institution of marriage should also include aspects of the gender inequalities that exist within marriage. It is this inequality that silence women when their husbands have extra-marital affairs or when they are raped by their husbands in their own homes.

20 I do and I will!



... And so there was a wonderful feast. The prince and the princess were dressed in splendour, and the people ate, drank and danced till the early hours of the morning. The happy pair left at the stroke of midnight on a wonderful honeymoon and so they lived happily ever after...

Think about it!

Pretend you are getting married at the end of Form 2 and imagine who you would choose. It has to be someone who will make you happy — someone whom you can live with for the next 50 years!

Think of things you would be looking for in your partner for life. Make a class list and study it — is there anybody who has everything you are looking for? Can we expect to find someone like this? Which things are more important than others? Why?

Would you mind marrying someone who . . .

- isn't always truthful
- is very rich
- has been to prison
- drinks and gambles
- looks down on people of the opposite sex
- is 15 years or more older
- does not want children
- comes from a different tribe, race or religion
- is very good-looking
- is a lot more educated than you are
- you don't know well but has been chosen by your parents
- has a serious illness or handicap

Now and forever more . . .

We are always reading fairy stories that end with a feast and a marriage, but what happens after marriage? Do people always live happily ever after? If they don't, what stops them? Why do many stories show marriage as the end of the story?

Act it out!

Make up a story where the marriage happens at the beginning of the story. Try to show some things that may happen to make the marriage happy, and some things which might make the marriage sad. Each group can act out their story for the class.

Figure C: Extract called 'I do and I will' from 'Think About It!' (Book 3)

Zimbabwe is a party to the International Covenant on Economic, Social and Cultural Rights (ICESCR) and is encouraged to take concrete steps to realize the right to education. The CESCR produces general Comments which seek to, amongst other things, '*develop the normative content of the rights recognized in the Covenant*'. The human rights approach enabled an assessment of the extent to which the right to education fulfils the features outlined in General Comment No. 13. The relevant features are:

- (c) *Acceptability – the form and substance of education, including curriculum and teaching methods have to be acceptable (e.g. relevant, culturally appropriate and of good quality) to students.....*
- (d) *Adaptability – education has to be flexible so it can adapt to the needs of changing societies and communities and respond to the needs of students within their diverse social and cultural settings.*

(General Comment No. 13, 1999)

The non-fulfilment of the human right to education reinforces the economic, social and culturally embedded inequalities that constrain women and teenage girls' reproductive choice. Indeed sexuality education for teenagers is central to the achievement of three Millennium Development Goals (MDGs) and is a major contributor to the attainment of other MDGs. Sexuality education is central to MDG 3 (to promote gender equality and empower women) and MDG 5 (to reduce maternal mortality). Further, sexuality education would contribute to poverty reduction, MDG 1, which would be facilitated if young women were empowered and freed from unplanned pregnancies as a result of which they would be able to complete their education and gain an income from being gainfully employed.

G & C to its credit focuses on HIV and AIDS as a topic within all books for the subject. To be effective HIV and AIDS education must be based on an understanding of the broader social and cultural environment in which gender differentiation operates. It must address the complexities of young people's lives. Since education is aimed at behaviour change this means values and religious beliefs and practices regarding women's sexuality and sexual behaviour must be challenged within the content of this education. There should be a participatory approach to programme design that takes the concerns of their youth and engenders this aspect in the content.

The message on HIV and AIDS is mainly one of abstinence and the consequences when one does not abstain. This is shown in Figure D, an extract from ‘Think About It!’ (Book 3) below:

<p>How can we prevent AIDS spreading?</p> <p><i>How can we prevent the AIDS virus spreading through sex?</i></p> <p>(These are things young people can make positive decisions about.)</p> <ol style="list-style-type: none"> 1 By not having sex at all. This is the surest way to avoid HIV infection. 2 By having sex with only one faithful lifelong partner when the right time comes. This will ensure that neither partner is infected. 3 Even when the right time comes, adults can, if they wish, use condoms every time they have sex if their partner has been involved with anybody else before. Condoms, if used properly, may protect people from AIDS and other sexually transmitted diseases. However, condoms are not entirely reliable. Most churches teach that sex before marriage is forbidden, and some oppose the use of condoms. 4 ‘Safe sex’ involves different forms of caressing, body rubbing, hugging, and so on. Masturbation is also safe. It provides a release of tension but shouldn’t be used excessively. Sex is not safe if semen, vaginal fluid or blood from another person enters any open cuts or sores, or reaches any internal linings in the mouth, anus or sexual organs. <p>Remember — The only protection against AIDS is to prevent infection.</p>	<p>sex.</p> <p>This depends on:</p> <ul style="list-style-type: none"> — how frequently one has sexual intercourse with one or more risky partners — how risky it is to have sexual intercourse with each partner (how likely is it that each one is HIV infected?) — what sexual activities one performs with each partner (sexual intercourse is obviously much more dangerous than caressing). <p><i>How can HIV be prevented from spreading from mother to child?</i></p> <p>By avoiding pregnancy if a person is infected with HIV. If a woman infected with HIV gets pregnant there is a 30% to 50% chance that her baby will be infected with HIV and die within the first few years of life.</p> <p><i>How can the HIV virus be prevented from spreading by blood?</i></p> <p>Great care should be taken that instruments used in activities which draw blood such as circumcision, tattooing or ear-piercing, are sterilised after use if they are to be used again.</p> <p>Instruments can be cleaned by leaving them in a solution of 1 part bleach to 9 parts water (1:9) for 30 minutes or boiling them for 20 minutes.</p> <p>What happens after a person is HIV infected?</p> <ol style="list-style-type: none"> 1 Most people show no signs of illness for some time. However, the virus remains in the body and
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Figure D: Extract on abstinence in ‘Think About It!’ (Book 3)

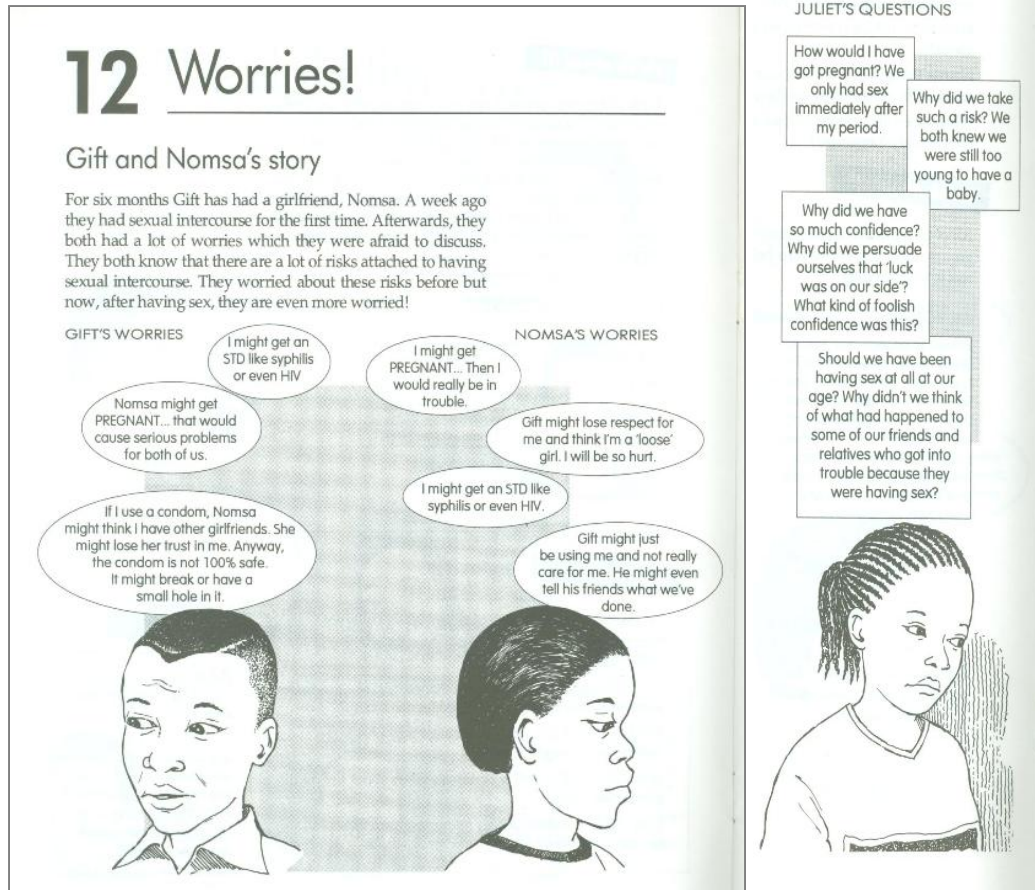


Figure E: Extracts on 'worries' associated with the onset of sexual intercourse from 'Think About It!' (Books 3 and 4)

These pictures (in Figure E, above) depict 'worries' that are associated with the onset of sexual intercourse. There is a tendency with abstinence-only programmes to focus on sexual activity outside marriage resulting in '*serious, debilitating, and sometimes deadly consequences*' (Concerned Women, 1998). Sexuality is not portrayed in a positive light or as natural or part of growing up but as resulting in concerns that should not be dealt with by adolescents.

The education sector has a major role to play in addressing HIV/AIDS. Education has the potential to reduce both prevalence and stigma, as schools are able to reach a large number of youth before they become sexually active. The curriculum does not focus on protective measures to protect oneself from the disease. The insert above mentions that sexual intercourse is meant for 'adults' despite the fact that the youth might be considering that they are themselves are

ready for sexual intercourse. Schools can provide knowledge as well as information on protection, thereby reducing overall vulnerability to HIV infection. Further, Figure D above mentions how masturbation is a safe form of ‘sex’ and it continues by stating that ‘it provides a release of tension but should not be used excessively’. Such terms are not helpful to the youth in relation to clearing up the misconceptions about sexuality, in this case masturbation. Any form of masturbation that does not involve any penetration is essentially safe; the issue is whether or not it is culturally or socially acceptable. Myths abound in different cultures that masturbation can cause harm, for instance that it makes people go blind. Masturbation using a clean hand is a healthy and completely safe form of sexual release for both males and females (Jackson, 2000:120). When sexuality is discussed women are depicted as either living in fear of falling pregnant, or pregnant and being full of regret.

There is no discussion within the G & C content on contraception or disease prevention methods. The right to choice is an integral part of women and adolescent girls’ international human rights. According to article 12 of CEDAW, the right to health *‘includes the right to control one’s health and body, including sexual and reproductive freedom.’* The right to choice constitutes both a negative and a positive right. The state is obliged to respect the right by refraining from interference through legislation, policy or practice and to take active steps to promote and fulfil the right to choice. The CEDAW Committee has stated that the convention gives women a positive right to access health information, education, and services necessary to make responsible reproductive choices (Hellum et al, 2007:343).

‘In order to make an informed decision about safe and reliable contraceptive measures, women must have information about contraceptive measures and their use, guaranteed access to sex education and family planning services, as provided in Article 10 (h) of CEDAW¹¹’.

¹¹ CEDAW, General recommendation 21, paragraph 22.

4.2.2 Promoting Debate and Discussion

11 The right time ...

Points of view

Felix Pfende, a programme presenter with a local radio station, interviewed some Saturday morning shoppers in Harare to find out their views about sex and sexual relationships.

How do you feel about pre-marital sex?

JANE a 16 year old schoolgirl ...
If you stick to one partner at a time there's nothing wrong. You're not being 'loose' or promiscuous.

ITAI a 19 year old UZ student
Pre-marital sex is okay for people over 17, regardless of whether they love each other. You can't drive a car before you learn how; you need to practise having sex. to be good at it.

MR NCUBE a village elder
In our culture it is acceptable for us men to have pre-marital sex but wrong and unacceptable for women. I could never marry a woman who was not a virgin.

SENZENI a receptionist
There is nothing wrong in young people who are already friends gradually moving into a sexual relationship, either for a 'trial marriage' or just to broaden their experience of each other.

NETSAI a student teacher
Sex before marriage is only acceptable in situations such as a stable relationship where the two people know they are going to get married, when a couple is engaged to be married or when lobola is about to be paid.

BRIAN an agricultural student
It's simple. The bible says you should 'glorify God in your body' sex is strictly for marriage! Look it up in Corinthians Chapter 6.

MRS MURAMBA a mother of three teenagers
Sex before marriage is wrong for both young men and women. They should wait until their marriage night. Our children are getting into all kinds of trouble because they have no moral values and no self-control!

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Figure F: Extract called 'The right time' from 'Think About It!' (Book 2)

The above figure (Figure F) highlights different views and opinions. These views can then be debated within a classroom set-up. The use of group work to explore scenarios and dilemmas, discussions and debate are useful in encouraging the youth to participate in learning. The comments presented above are realistic and might represent individual opinions in the classroom set up. This insert fosters an open and non-judgmental discussion on the matter at hand. Sex education must be highly participatory, reflexive, relevant and challenging, leading to increased self-esteem and self-efficacy, increased motivation, and to actual skills development regarding sex and relationships (Jackson, 2002:131).

4.2.2.1 GENDER

A material production officer at the CDU stated that the evaluation guideline from the Ministry ensured that 'gender issues' were included. Gender is a focal point in sexuality education so it had to be assessed based upon what the G & C books covered in relation to this aspect.

The guideline had the following question when it came to evaluation of the syllabus:

- (a) *How does the manuscript portray the roles of males and females? Is the manuscript gender balanced in terms of roles and resources?*
- (b) *Is there gender bias? or is the manuscript gender neutral?*
- (c) *Is there equitable roles, and race in the manuscript?'*



Figure G: Extract called 'Changing Roles' from 'Think About It!' (Book 2)

The CDU is commended in trying to come up with ways to challenge gender roles and stereotypes in G & C books as shown above in Figure G. Their main aim is to encourage discussion on what gender is and how society is an influence in terms of how we should behave. However, being 'gender sensitive' is very limited to 'changing roles' and looking at stereotypes common amongst men and women. All the books have a chapter challenging these roles and showing that anything a man can do a woman can also do. In the book mentioned above gender is stated to referring to '*whether a person is male or female*'. This definition does not adequately describe what gender entails. In fact in all the books analyzed there is a superficial conceptualization of what constitutes the aspect of gender. There are questions pertaining to the roles ascribed to men and women but there is nothing else on what informs these roles. On the whole, there is no in-depth concept or discussion of gender as a factor in sexuality or the distinction between gender and sex. There is a need to clarify and define concepts especially to the youth so that they can clearly distinguish the difference. Without these definitions there cannot be an understanding of why gender is central to matters of sex and sexuality. Our very expression of sexuality is influenced by what kinds of behaviours are acceptable for females and males. Further, sexuality encompasses how one feels about being male or female. These are all categories that can be explored under gender and sexuality.

The first point of reference is that sexuality in itself is a male construction. Further, women are oppressed primarily as a result of male attempts to control the female body. Sexuality is then understood as fundamental in the formation of identity. Because male dominance and female submission are the norm in something as fundamental as sexuality, they become the norm in other contexts as well (Spelman, 1988). Feminist theorists vary in their arguments as they seek to contextualize the subordination of women. Most relevant to this research topic, is the radical feminist view, propounded by Catherine MacKinnon on sexuality. For Mackinnon, subordination is sexualized in that sexuality itself is constructed from the male perspective were the man dominates and the woman is dominated. It is through sexuality that gender emerges as inequality between men and women. In essence one cannot separate gender from sexuality (MacKinnon, 1989). Most importantly what Mackinnon argues is that female sexuality is controlled and expropriated for the sole pleasure of men through social structures such as heterosexuality and the family institution. Other frameworks such as religion and culture emerge embodying a

framework for the regulation of sexuality. In this way, women begin to understand the society within which they live and how this influences their behaviour (Makinwa-Adebusoye et al, 2007:10).

The CDU has to be discouraged from thinking that because the evaluation guide has gender as part of the form that will suffice. The syllabus on G & C is inadequate in so far as it only deals with gender from a narrow point of view. There must be clarity in definitions as to what constitutes sex, gender and sexuality. This is the only way students will understand how these concepts are inter-related and need further interrogation.

Even within educational settings unequal gender relations are deeply entrenched, for example, the content emphasizes the traditional notions of sexuality in that female sexuality is portrayed as pre-dominantly reproductive. Clearly, the hegemony of reproduction-oriented sexuality is nothing but the hetero-normative masculine conception of human sexuality. The emphasis on reproduction-oriented sexuality has overshadowed not only women's perspective on sexuality, but also many aspects and goals of human sexuality. The implication goes beyond the confusion between the function or role and the person, to compromise women's identities and rights.

When sexuality is discussed within the G & C books, young women are depicted as either in fear of pregnancy or pregnant and full of regrets. In the picture below (Figure H) a young woman commits suicide over the fact that her boyfriend has denied paternity.

13 Getting physical

The story of Susan and David

Susan was a lovely girl, lovely in personality as well as in looks. Everyone who knew her thought her sensible, intelligent and morally upright. She had lots of girl friends and lots of boys wanted to be friends with her as well.

Among the boys who admired Susan was David, who was two years older than her and also the captain of the football team at her school. David and Susan fell in love but they both knew they couldn't marry because they were still too young and also still at school.

One afternoon David invited Susan to his elder brother's house. What Susan did not know was that the elder brother had gone away on business. There was no-one at his house. When they got there, Susan wanted to leave once she discovered she would be alone with David, but he persuaded her to stay. They listened to the radio, talked and even prepared themselves some food. Gradually Susan began to relax. One thing led to another and before they knew it, they had made love. From then on, the two young people would meet in various places and have sex together.

Some time later Susan missed her periods. This is when she began to be afraid. When she finally discovered she was pregnant, she talked to David and asked him what they should do. David was angry with her. He told her that he had assumed she was on the pill. He refused to see her again and accused her of being careless and wanting to ruin his future.

Two days later, Susan threw herself into the river and drowned. Her body was discovered four days later.

Let's talk

Why did David get angry with Susan?

Why did Susan throw herself into the river? Was she afraid of what had happened or was she filled with shame? Why?

Has anything like this happened to anyone you know? What could have helped the situation?

Is this a story of true love or a story of lust which is just physical passion?

What drove David and Susan to make love? Why didn't they stop this from happening? Did David plan it?

If you were Susan, what would you have done to avoid this tragedy?

In Susan's situation, would talking to someone else have helped? Who should she have talked to?



Figure H: Extract called 'Getting physical' from 'Think About It!'

4.2.2.2 DECISION MAKING

Decision making is a central aspect to sexuality education programs. One of the teachers at Chipadze High School had this to say about the skills taught in G & C lessons:

“The skills that are taught in G & C are very general, I cannot say they are specifically targeted at changing the sexual behaviour of youth but some are included.”

Nonetheless the ‘skills’ in decision-making had to be assessed to see whether they were adequate in helping the youth deal with peer pressure and decisions about their sexuality.

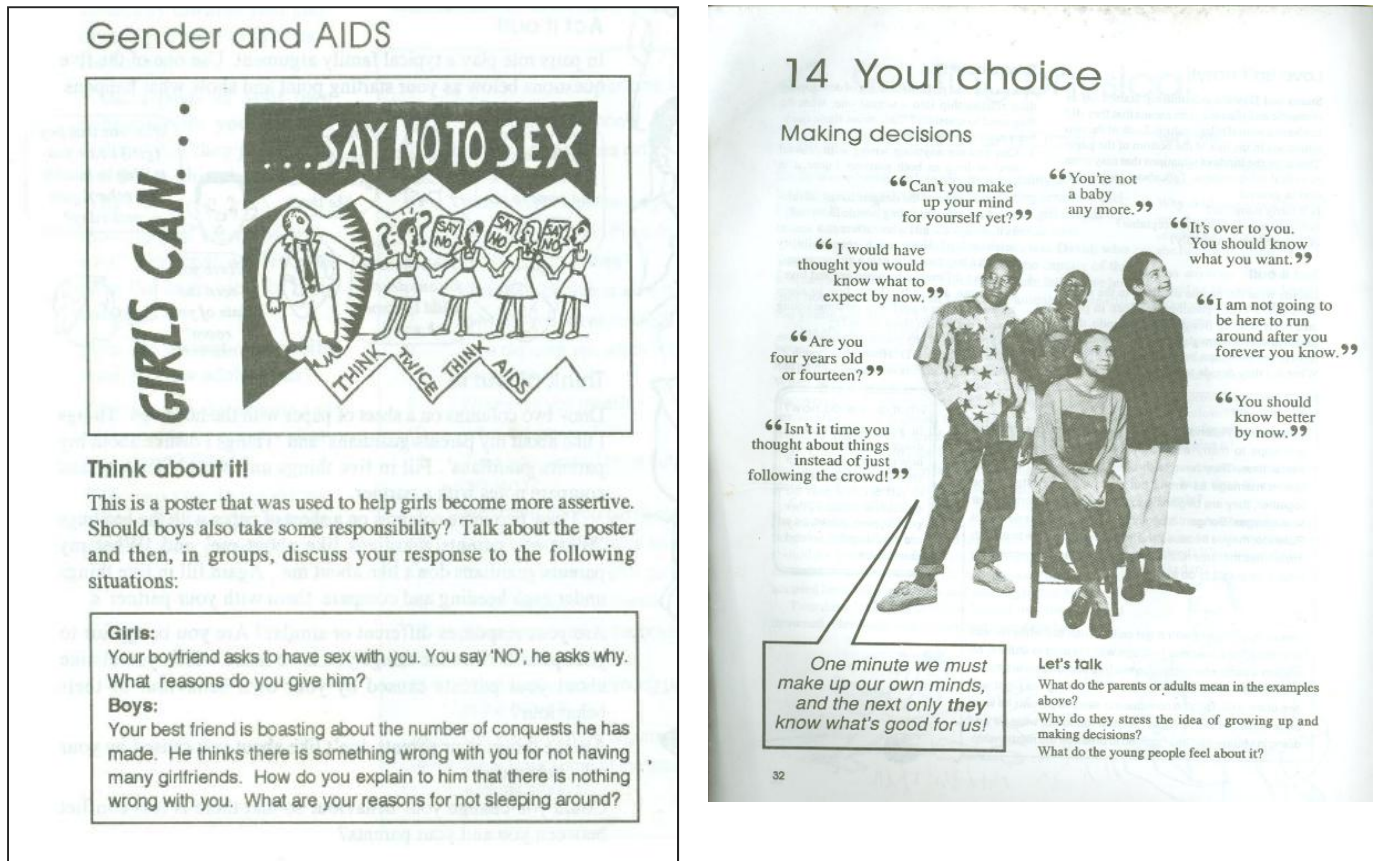


Figure I: Extracts on decision making from 'Think About It!' (Books 1 and 2)

The extracts contained in Figure I outline the general challenges that teenagers go through in relation to decision-making. Yet again this is commendable, in that decision making is central to adolescence because it is during this period that the youth become aware of how they feel, think and behave and what they want in terms of close relationships, physical affection and attraction (Madunagu, 2007, 87). Having sexual intercourse which is but a small part of sexuality should be a consensual choice and decision. There are many aspects to consider when having sexual intercourse and decisions include but are not limited to just “Saying No” but should cater for those youth who are truly at a crossroads in terms of when to have sex?, with whom?, where?, how often? and whether with or without a condom, for protection against sexually transmitted

disease and unplanned pregnancy. General decision making is important but making decisions related to sexuality are equally important as they touch on the choices the youth make. Most importantly the syllabus should not tell our youth how to act or what to say in making decisions over sexuality but should encourage the youth to make a decision on their own. Once a decision is made then one should act accordingly. For example, if one chooses to abstain they should avoid risky settings and actions that are likely to reduce sexual inhibitions for example, drinking alcohol. On the other hand, if one should decide to have sexual intercourse then they should be able to discern the options available to them and where to obtain these protective measures. Young people easily find themselves in situations where it is difficult to adhere to strict sexual rules, even if they want to. Proponents for sexuality education are very clear on the skills that should be taught, although general skills are involved, being able to communicate, listen, negotiate with others, ask for and identify sources of help and advice are useful life skills which can be applied to relationships. The focus on the capabilities perspective is on those determinant factors which place an individual in a vantage position enabling him or her to enjoy certain privileges or rights. The ability to make decisions concerning issues of sexuality will allow young women to exercise their right to reproductive health and information as outlined by the Committee on CEDAW which has enjoined all state parties to *'ensure universal access for all women to a full range of high-quality and affordable health care, including sexual and reproductive health services.'* (CEDAW Committee, 1999).

Women and girls' right to reproductive and sexual health demonstrates the close link between gender, human rights and development. This approach focuses on the interdependence between women and girls' right to reproductive self-determination in terms of the right to information, education and services and the rights to life, education, participation and work (Hellum et al, 2007). A girl's capacity to protect herself from unwanted pregnancies and HIV is closely connected to the right to education.

4.2.3 Guidance and Counselling ('G & C'): A Hit or A Miss?

Despite the inadequacy of G & C as 'sex' education, it is however an opportunity for teachers to discuss matters of sexuality. However, even this opportunity was not being utilized for one reason or another. Firstly, G & C is not an examinable subject and this leads to teachers not according it the priority it deserves. Students confirmed that they were not being taught G & C although it was on the timetable. Teachers, not surprisingly, stated it was being taught as it was there on the timetable. The PED stated that he was aware that G & C was not being taught and added:

“The syllabus itself is fluid in that the teacher decides what she wants to teach and if she is uncomfortable with a certain topic she will merely ignore and proceed to another topic.”

The teachers for G & C are not trained to deal with the topics related to sexuality or to teach G & C specifically. There is also no focal person to co-ordinate G & C lessons within the schools system i.e. a Head of Department. The Provincial Education Director (PED) stated that Non-Governmental Organizations (NGOs) are researching sexuality within the community instead of training and empowering teachers to teach on the subject. He lamented how the area of sexuality is not well funded and NGOs were involved in outreach programmes that only targeted a small sample of parents, teachers and students. These programmes are not ongoing and are restricted in terms of reach so in the end the process itself becomes futile. He added that although there is no agreement about how and when sex education should be taught in the classroom, the ball could start rolling with community discussions on sexuality and even with radio and television programmes which seriously examine the realities that adolescents face. While short-term interventions may not have the desired effect there is evidence that interactive and well-targeted education programmes may make a difference. This implies that state parties must take measures to improve the quality of sex and reproductive health education. States must ensure that sufficient economic resources are allocated to the training of school teachers (Hellum et al, 2007, 353).

At the CDU, the material production officer in-charge of G & C stated she was merely 'baby-sitting' (i.e., like a caretaker) as there was no one appointed to that position specifically for the subject. She stated that it was unfortunate if G & C was not being taught as this was an opportunity for teachers to discuss HIV/AIDS. For Zimbabwe G & C was first introduced in the early 1990s and it is note-worthy to state that since then the curriculum has been reviewed three times every five years and has remained virtually the same. The PED stated that there was a need for a proper syllabus that encompassed behavioural change, sexual and reproductive health issues with a departure from the traditional way of teaching and the consequences of sexual activity.

4.2.4 The Role of the Curriculum Development Unit ('CDU')

The CDU is a division within the Ministry of Education, Sports and Culture (MoESC) responsible for the development of the curriculum for primary and secondary schools. The Education Act provides that the Secretary of Education shall be responsible for development of the curriculum (Section 63). Whether and to what extent states are obliged to include sex education in school curriculum is a critical issue. The function of the CDU is to translate government policy on primary and secondary education into measurable objectives, programmes and activities (MoESC: UNESCO 2000). The material production officers interviewed stated that the objectives of the CDU involved:

1. Developing and revising the syllabus.
2. Developing teaching and learning materials that support the syllabus.
3. Promoting creative teaching and methods.
4. Organising courses on curriculum matters.
5. Testing and evaluating the curriculum.
6. Researching curriculum issues.

Article 26 of The Universal Declaration of Human Rights provides:

'Education shall be directed to the full development of the human personality and to strengthening of respect for human rights and fundamental freedoms.'

The Curriculum Development Unit constitutes the legal framework for the development of teaching or learning activities and it should be able to respond to the needs of society and to the needs of individuals. However, the sex education curriculum in Zimbabwe falls short of the facets that constitute a comprehensive education curriculum. This is based on the research done vis-à-vis the social realities prevalent in our society today. Further, the process of reviewing the syllabus involves a variety of stakeholders and institutions. The content of the curriculum is a consultative process which also involves a sample number of students, teachers, education officers, universities, subject specialists and the examinations council. However, the material production officer at the unit admitted that due to resource constraints at times they could not consult as widely as they would like.

In addition she added that the consultative process could be described as a top-down approach which excludes those at the grassroots level. The danger in that, of course, is that they do not interrogate the reality of what is taking place on the ground and as a result it is only the views of the 'sample' few that are represented within the syllabus. The material production officer also stated that at times politicians would outline what should be included in the syllabus and they would have to find ways of accommodating those views. The existence of structures such as the CDU which employ a top-down approach lead many to question whether the State is regulating and controlling female sexuality by being complacent in not providing this information in textbooks.

The syllabus should reflect the realities in every sphere whether economic, social or political but should not under any circumstances be imposed especially in relation to sex education. The current curriculum on G & C is being reviewed and there is hope that the MoESC will involve stakeholders they work with such as UNFPA and UNICEF in coming up with a comprehensive programme on sex education. Under international law, states must ensure that sufficient economic resources are allocated to research and curriculum development (Hellum et al, 2007:

353). Human rights treaty bodies emphasize that state parties have a duty to ensure that basic human rights, such as the right to education, are not compromised by economic programmes. That priority should be given to rights that are essential for the right to life, such as health care and education. According to the CESCR, states should in all actions, including in the allocating of resources, give the highest possible priority to children and vulnerable members of the society. In many parts of the world, teenage girls are considered among the most vulnerable members of society with regard to education, health and reproductive choices. States need to prioritize financial resources to implement minimum core obligations when facing resource constraints (Hellum et al, 2007: 345).

The indivisibility of human rights (arising from the fact that realization of women and girl children's rights to reproductive and sexual information and education is essential for fulfilment of other minimum core obligation such as the right to life, education and work) may justify that these rights be given priority in certain situations (Hellum et al, 2007: 346).

4.3 Attitudes and Perceptions about Sex Education

4.3.1 *What is Sexuality?*

The main assumptions that were explored under this category were assumptions 2 and 4. The main argument being that society being comprised of individuals who are influenced by norms and structures indirectly determine the curriculum through their views whether progressive or conservative. The underlining factor is that when a curriculum is reviewed, ideally it has to consider the input of stakeholders such as students, teachers and parents. This led me to research their responses on not only the definitions of sex education but what they envisaged should be included or not included in a comprehensive sex education curriculum. One writer stated that African indigenous culture has no 'hang-ups' about sexuality. It is clear in its affirmation of sexuality that it is good, satisfying and blessed (Nganda, 2005:54). Hence, a mother confirmed this positive attitude towards sexuality when she said:

“You heave a sigh of relief when your son experiences his first wet dream or your daughter her first menstruation.”

Mbiti (1980:135) sums up attitudes of indigenous Africans on sexuality when he observes that *‘on the whole, African peoples do not regard sex as something evil and hence something to be suppressed, even if it must be kept under control.’*

Madunagu (2007:84) in his article stated that in all his ten years of experience as a trainer in human sexuality, he had not found one group of participants of any description who were all accurately informed about the concept of sexuality. He added that even if ten people were asked about the definition of sexuality, no definition would be the same. All may be accurate in terms of explaining the key concepts; all may contain key terms, words and phrases that attempt to capture or give an idea of what sexuality is. This was also the reality that emerged during this research process, especially amongst parents. Respondents were picked randomly and asked what sexuality is, and the answers were as follows:

“Sexuality has to do with sexual intercourse.”

(A 39 year old male mineworker)

“Sexuality is about feelings and desires that are experienced between a man and a woman.”

(A 23 year old vendor)

“Sexuality is about exploring each other and the pleasure this gives.”

(A Clerk)

“Sexuality is about reproduction and health.”

(A 22 year old Nurse)

“Sexuality is what happens when a man and a woman are having sexual intercourse.”

(A Council worker)

The answers stated above, indicate that the concept of sexuality is clearly misunderstood. The problem is that largely, there is a misconception about sexuality in that it only refers to our sexual behaviour; thus it is limited to expressing sexual feelings and deriving pleasure. There are also individuals who limit sexuality and consider its sole purpose to be reproductive in nature. Madunagu (2007:84) states:

“It is the misconception of limiting sexuality to the genitals and reproductive processes such as childbirth that gives room for opportunistic politicization of human sexuality.”

It then follows that if there are misconceptions of what sexuality is these misconceptions find their way into our sex education curriculum. It would be impossible for a society that has misconceived the notion of sexuality, to then give a correct definition of what sex education entails. The next step was to ask respondents what they deemed sex education to be; once again the answers also varied.

4.3.2 What is Sex Education?

These are some of the answers given during the research process:

“I think sex education has to do with gender equality.”

(A male teacher at Chipadze High School)

“In my view sex education has to do with teaching people about sexual intercourse.”

(A male teacher, Hermain Gmeiner Secondary School)

“Sex education involves enlightening people on what sexual intercourse involves, the dangers of unprotected sex and the contraceptive choices available to those students who are sexually active.”

(A female teacher, Hermain Gmeiner Secondary School)

Parents on the other hand were more out-spoken about the aspects that should not be included in sex education. They were asked the hypothetical question that if sex education curriculum was

discussed at a grassroots level, what aspects would they want included or excluded? They answered as follows:

“I do not think condoms nor condom use should be discussed in sex education.”

(A male parent)

“I do not want my daughter to learn about condoms or contraception within sex education, this will only encourage her to have sex!”

“Abstinence should be included with consequences of pre-marital sex i.e. early pregnancies emphasized!”

(A male parent)

Yet again, parents and teachers were unaware of what goes into a sex education curriculum and their views were limited to sexual intercourse and condom use which they heavily discouraged.

Proponents of sex education maintain that sexuality programmes teach knowledge and skills of critical issues related to sexuality, for example: intimacy, human relationships, sexual identity and gender roles, reproductive anatomy and body image, puberty and reproductive anatomy, emotional aspects of maturation, the value of abstinence among teenagers who are not sexually active, alternative methods of contraception and HIV/STI prevention, and the health consequences of avoiding contraceptives and prevention methods among sexually active youth (Nganda, 2007:56). Nganda (2007:54) states further that indigenous African culture views sexuality as mysterious and sacred. If misused, evil must surely result. Sexuality and its power is seen as permeating every level of existence. This explains our reluctance at speaking openly about sexual issues and that silence is profound. Stewart (2007:297) states that the silence is a silence of embarrassment, ignorance and constructed social and cultural restraints that inhibit frank speaking about normal physical and biological processes. This silence extends to the home where parents have different views about talking to their children about their budding sexuality. Parikh (2005:128) in his article states that this ‘silence’ was motivated by the moral view that direct reference to pleasure and intercourse would stimulate otherwise dormant adolescent desires. Young people, on the other hand, sense the uneasiness that floats around sexual health

messages. For the youth, the silence over sexual health messages speaks louder than the warnings of sexual risk.

4.3.3 *Let's Talk About Sex*

On the whole, students not only indicated that they would like to speak to their parents about sex but wanted information provided on sex education as well. Students had this to say:

“Parents get angry and hostile when you get pregnant, yet they never speak to you about sex!”

“I would like to speak to my father about sexual matters, about his experiences at my age but I cannot imagine how that will go, it would probably be very uncomfortable.”

(A male student)

“The most my mother has said about sex is: ‘*Don't do it!*’”

Parents and caregivers ought to be the primary sexuality educators of their children. Teachable moments and opportunities to discuss sexuality issues with children occur on a daily basis. Most teachers agreed that it is parents who have to lay the foundation of sex education within the home. Teachers interviewed had this to say:

“I think parents and the community at large have a major role to play in educating their children about sexuality, I do not see how teachers can be expected to educate children when we only spend a couple of hours in the day with a class.”

“As teachers we are shouldering too much responsibility and I do not see how we alone can successfully arm the girl-child against the harsh realities of the world.”

This research advocates for a comprehensive sex education curriculum with teachers playing a key role in the entire process as this is also in accordance with the Cairo and Beijing

Declarations, which recommend that in order for sex education to be most effective, it should be provided to teenagers through formal education and school curriculum. One cannot, however, underestimate the role of parents in the socialization of their children. From the moment of birth, children learn about love through touch and relationships. Infants learn about sexuality when their parents talk to them, dress them, show affection, play with them, and teach them the names of the parts of their bodies (Nganda, 2007:58). As the children grow into adolescence, they continue to receive messages about sexual behaviours, attitudes and values from their families and within their social environment. The Provincial Education Director gave an example of how children learn from their environment:

“Parents are not talking to their children about sexuality or condoms, the environment which we live in is littered with condoms which the children see, who are we fooling?”

Some parents I spoke during the research stated that they speak to their children about sexuality. Others felt anxious about how to approach the subject of sexuality. Their views were as follows:

“Yes, I spoke to my daughter about these things, who else was going to speak to her?”

“I cannot imagine sitting down with my daughter to talk about sex!”

“Our culture allocated individuals within the family structure who advise on matters of sexuality.”

In one of the group discussions with women only I suggested that they could contextualize issues to make it easier in addressing certain topics. For example, discussing the problem of early pregnancy and eliciting the views of your daughter on that subject. Honest, open communication between parents and children through childhood, the pre-teen years, adolescence and young adulthood can help lay the foundation for young people to mature into sexually healthy adults. Parents have to consider the implications of their silence on matters of sexuality in the home, in particular when juxtaposed with the public sphere where the media portrays sexual intercourse as pleasurable. One teacher who realized her role in imparting information then added:

“Education has to be a concerted community effort; teachers cannot do this on their own.”

Adolescents are seeking to understand their own sexual feelings and as they develop a strong sense of independence, they depend more on their peers and the media for information, and often seek information about sexuality issues from them. The media emerged as a topical issue amongst parents and teachers who confirmed their children are bombarded with sexual images.

4.3.4 Sources of Sexuality Education

Where do young people learn about sexuality? One of the benefits of sexuality education is that it seeks to avoid confusing and misleading information and negative pressure from peers, siblings, films, music, magazines and other media sources and influences. This is because proponents of a comprehensive sex education programmes realize the influence that these sources have on the decision by the youth to have sexual intercourse. Some parents believe that children do not need to know about sexuality as they learnt it by instinct or by observing nature. One parent illustrated this when he stated:

“Our parents never spoke to me about these things and I turned out alright!”

I recall my mother stating something quite similar that she knew I would be fine and I would make my own way through life and figure it all out eventually. Such a view is over-simplistic and erroneous as the lack of information has alarming consequences for young women. Below, are excerpts of a group interview with the youth where they openly spoke about the sexual information gathered from various sources. Suffice to say their misconceptions were astounding. One female student responded both honest self-criticism when asked where they found their information on sexuality. She said:

“We tell each other of course, we share our experiences no matter how limited and the danger in that is we are likely to misinform each other!”

The aim of the group interview with seven teenagers was to find out exactly what they tell each other in relation to sexuality. Misconceptions still prevail despite information gateways such as the internet. Some of them stated:

“It is nearly impossible for a girl to get pregnant after her period; it is called the ‘safe period’.”

“Most people our age do not believe that they can get HIV from a person of the same age but if you have sex with older men there is that risk!”

“If you want it done in Chipadze (an illegal abortion) there are ways to do it but there is a risk that you might bleed excessively and end up at the hospital.”

“Some girls say when they have sex with their boyfriends without a condom they simply push the sperm out using their (vaginal) muscles then they cannot get pregnant.”

I was shocked by some of the comments I heard and compared them to those circulating when I was a teenager; I found the misconceptions have been embellished even further! But this is the reality of what teenagers tell each other and they do so with great conviction. The media in its own way exerts pressure on the youth through various means. The internet is replete with pornography and portrays sex as enjoyable and irresistible as opposed to the silence and the ‘**don’t do it**’ stance taken by parents in the home. The youth, out of ignorance or influenced by social perceptions and attitudes, think that having sex is a powerful force that cannot be resisted.

Parikh (2005:146) gives an example of Uganda where he states that western videos, particularly those shown at night, provide an up-close look at sex acts. At night blue movies (pornographic and X-rated movies) are shown on television, from the United States and Europe replace the daytime films, providing the youth with interpersonal sexual scripts that emphasize sexual positions, noises, foreplay, and visual plots into which youth can imaginatively place themselves. Even if the youth do not view these films, the details eagerly told often richly embellished by their friends offer the visual imagery and sexual scripts through which they can imagine sexual

possibilities that often do not reflect social realities. This depiction of sex and sexuality is viewed by most parents as too permissive and a challenge to traditional Christian values. Secondly, they (parents) believe that the media depictions of sex and sexuality are contrary to both African cultural values that hitherto attached some control and secrecy to sexuality. The youths in the group interview stated that they were often critical of what their peers told them but felt they had no adult to speak to openly about sexual matters. On the other hand, parents also shared their helplessness when it came to the issue of the media and the influence it has on their children. One of them said:

“I never grew up with cell phones nor the internet so I do not know what my child is doing on those things.”

Parents are aware that the internet poses a danger to their children especially when one considers pornography and human trafficking. Although, parents confessed that they did not talk to their children about sexuality, it was clear that their views indicated how marginalized they felt in the sexual development of the youth. They were also aware of the complexities that the youth faced including HIV/AIDS, unplanned pregnancy and the trafficking of the unemployed amongst the youth. Most young women are lured through the media and are promised employment only to end up sexually exploited as prostitutes in their destination country. The youth need to be aware of these dangers and sex education can play an active part in this process.

The media can be harnessed in a positive way to benefit the youth. One cannot underestimate the positive influence of the media by breaking the silence and taboo surrounding the subject of sexuality and sexuality education. Sex education can be enormously strengthened by mass media and other channels. In most countries in sub-Saharan Africa, radio is the most widely accessed medium and should be utilized to the full in imaginative, participatory and engaging ways (Jackson, 2002:131).

In Uganda, the new and commodified *ssenga* offers advice to young and old on radio shows, newspaper columns and counselling centres, blurring the boundaries that once established differential access to information between young and old and male and female (Birken, 1988). Today, access to such information is limited to an individual's access to media. A comprehensive

sex curriculum should include topics such as the role of the media in informing attitudes on sex and sexuality.

4.3.5 Should we use the term 'sex education'?

Language is used in the socialization process and is a powerful tool which reflects on societal attitudes and perceptions. The random question technique was utilized to ask individuals if they were comfortable with the term 'sex education'. They answered as follows:

“I think using the term ‘sex’ is too explicit!”

(A Clerk of Court)

“I believe it is called Life Skills and I prefer that term.”

(A female Teacher)

“To be honest I have no problem with the term ‘sex’ but I know the community would be uncomfortable and will opt for any other term.”

(A Social Welfare Officer)

According to one writer *‘denial of the use of the term sexuality is part of patriarchal power and socio-cultural norms reinforced by religious beliefs and injunctions to suppress in particular, girls and women from the free expression of their sexuality’* (Madunagu, 2007: 84). In other words, by denying sexuality for what it is we continue to reinforce what it is not. We perpetuate the continued oppression of young women which is rooted in gender systems, religion and culture. Through language that is not clear and clouded by norms and forces seemingly beyond our control we misunderstand concepts and each other resulting in the breakdown of communication. Language is used to perpetuate sexual stereotypes of young women even in the school set-up. A male student made this remark during a group discussion:

“Some girls wear a short skirt with their uniform which will be ‘hugging all the right places’ and you wonder whether she is ‘looking for something’.”

This illustrates the importance of language in the construction of female sexuality. Language has been used to perpetuate stereotypes about women and their sexuality. One of the most efficient ways that patriarchy uses sexuality as a tool to create and sustain gender hierarchy in Africa is by shrouding it in secrecy and taboos. Language is the medium that is utilized to sustain this position (Tamale, 2003). This is why there are still forms of repression, in practices such as virginity testing for girls, female genital mutilation, and wife inheritance. Such violation of the rights of the majority, particularly girls and women, can only be effectively confronted by a feminist struggle against patriarchal sexual hegemony. In our present case, the way forward would be to use the existing tool - the approved curriculum called G & C - to give accurate information and build the skills of young people in schools in order to allow them room to develop and use safe and healthy sexual expressions and language.

4.3.6 The Implications and Effects of No Sex Education

As a researcher it would have been ideal to find out how many illegal abortion cases the local general hospital deals with but there was an awareness of how difficult these records would be to attain. The same was true of cases of early pregnancies received at local clinics. The local court became a source to find out whether there had been cases of infanticide or abortion. The aim was to find out the impact of a limited education or the effects of no comprehensive sex education. The three prostitutes included in the study also represented what could possibly happen when a young woman is out of school with no options available to her. All three spoke of the limited opportunities that life had offered them and the difficulties of working as a prostitute. One of the prostitutes whom I shall name Tecla* (not her real name) stated:

“Handinga kurudzire kana muni’ina wangu chaiye kuti apinde mubasa iri, rakaoma sister, basa iri ndiro rega risingade qualification, hapana zvimwe zvandingaite”

(Translation: “I would not recommend this line of work to anyone, let alone my sister, this work is hard (sister), this is all I know, besides it is the only work that does not require a qualification.”)

Clearly, for these women at least, they were no other options available to them. They added that they were times when life was so difficult that they had to charge a dollar for what they term 'short-time'. The dynamics of prostitution in Bindura are very different compared to Harare. Bindura is a small town and a prostitute is likely to have only a few regular clients she knows very well. Further, as competition is stiff and clients are few it is common to reduce prices as a way of getting some money as opposed to nothing at all. But they all agreed the pickings were sparse and times were hard, as shown by the following comments they made:

“Kana ndashaya mari ndinoenda kunokorokoza nevamwe madzimai vemuraini, kana mangonjo auya zvinonetsa kuti madzimai atize nekuti vanenge vakabereka vana kumusana.”

(Translation: “When times are really hard I go and pan for gold with other women from my neighbourhood, but when the police come it is difficult for women to escape with children on their backs.”)

“Vasikana veku University (Bindura) vari kuitawo chipfambi hupenyu hunovaomerawo, asi kana vauya varume vese vanoenda kwavari nekuti ma fresher.”

(Translation: “Girls from the University are also prostituting themselves as life is hard for them, but when they come it is hard for us, as all the men go to them as they are still young and ‘fresh’.”)

This led to the conclusion that the options for women are limited without an education and often they end up in prostitution as a means of survival. They all lamented their lack of a proper education and how this limited their employment opportunities. It was not a surprise that the three prostitutes supported sex education and this is because they live their lives engaging with the realities of sexuality on a daily basis. These realities include deciding to protect oneself against HIV or STIs, deciding with whom to have sexual intercourse, and, at times, abortion. Further, as prostitutes have some degree of agency in their line of work they are likely to recognize the lack of that agency in young women. Feminists and proponents of sex education have cited how the unequal relationship between men and women has disempowered women in that they cannot initiate sexual intercourse or propose condom use to their partners. This has resulted in sexual violence in the form of rape and the wilful transmission of HIV at the hands of their partners.

At the Courts I perused records pertaining to the offence of having sexual intercourse with a girl under the age of 16 years which is cited in Section 70 of the Criminal Law Codification and Reform Act 9; 23 (Criminal Law Code). Bindura Magistrates Court received a total of **36 cases between January and December 2011**. Some relevant information about these cases is presented in Table 4 below:

Females	Males	Married	Pregnant
Age – 12-15 years old	Age – 17-24 years of age	State papers showed – in 22 of the 36 cases the accused and complainant were married (this was the status of both accused and victim according to state papers).	12 complainants were pregnant as a result of sexual intercourse

Table 4: Showing some details of the 36 unlawful intercourse with a minor girl (in breach of section 70 of the Criminal Law Code) cases dealt with by the Bindura Magistrates Court between January and December 2011

It should be noted that Section 70 criminalizes consensual sexual intercourse. This is not rape in any form. Further, the couples are usually dating and having unprotected sexual intercourse, with the result that the complainant ends up pregnant. As a way of twisting the arm of the young man to marry, the parents of the young woman have the young man arrested. Parents are usually behind the arrest of the accused. These cases represent the ‘tip of the ice-berg’ in terms of the number of cases that are ‘out there’. The number could be much higher but due to a number of factors some cases are not reported. This is just an indicator of the realities that exist in our society: teenagers are having sexual intercourse at a young age and are therefore becoming younger and younger parents.

As a Magistrate, I realize that the offence mentioned above is not understood within our community. A sex education curriculum should encompass how the law intersects with sexuality. This will enlighten teenagers on what constitutes a crime and hopefully deter them or delay the advent of sexual intercourse. The reality is that adolescents are engaging in sexual activity and this is confirmed by the statement of the Gender Focal Person within the MoESC who stated:

“In Zaka Growth Point for example, we have the problem of young girls between the age(s) 12-16 who are selling their bodies in order to raise money for school fees, does our curriculum cater for these sexually active young women?”

4.4 The Need for Policy Implementation

The relevant policy in light of gender equality is known as Circular P-35 which provides for the return of a female student who becomes pregnant at school. Similarly, a male student responsible for impregnating the female student is also to take an absence of leave. An analysis on the ‘efficacy’ of this provision has already been conducted. However, the implementation of the said policy leaves much to be desired. At Chipadze High School the teachers stated that students simply disappear and they assume, from hearsay, that the girl has dropped out due to pregnancy. There is no follow-up made as to the whereabouts of the female student, thereby rendering redundant the provision on the temporary suspension from school of the ‘responsible’ male student.

Generally, parents, teachers and students’ were aware of the policy but none of these categories of people indicated they would be in a position to implement its tenets. This was explained by the PED who stated:

“The problems are multi-faceted in that the girl might not want to go back to school due to stigmatization she will suffer at the hands of other students, teachers are not keen to have ‘mother students’, ordinary parents might not be happy to see their children attend class with a mother-student.”

In their reluctance, it was clear that teachers and parents especially were ‘under the spell of other forces’ in the form of religion and culture which are discussed below. The Ministry of Education is encouraged to have correct data on the number of dropouts at a school. The class register is to be kept up-to-date and can provide information on dropouts. Further the Ministry is urged to collate disaggregated data; this will be easier in light of assessing gender differentials. Further, this will help with making a follow up on girls who have dropped out of school and will assist in

implementation of Circular P-35. The Ministry is urged to engage with stakeholders and have an outreach programme on the importance of this policy especially for the girl-child. This might help curtail the stigma attached to a female student returning to school to complete her education. There must be emphasis on the young woman's right to continue her education and right to work or engage in an income-generating activity.

4.5 Emerging Issues

4.5.1 Culture

In discussing with parents and teachers it was apparent that culture plays a significant role not only in regulating sexuality but also as a barrier to discussing sex education. Teachers stated:

“I could never imagine myself teaching students about sex education, in our culture I am a mother to these children and mothers do not talk about sex to their daughters and sons!”

“I cannot envisage sitting down with my (own) daughter talking about sex let alone teaching the subject to other children.”

Parents also shared similar views not only in what they expressed but how uncomfortable they were about discussing the subject. Parents and elders often have this ‘once upon a time attitude’ in which they apparently rigidly obey cultural rules and social institutions governing sexuality. Parents and elders depict an idealized past which serves as a moral commentary about present social problems such as HIV and out-of-wedlock pregnancies (Parikh, 2005). According to Parikh this commentary needs to be analyzed carefully. This is because there have always been changes in traditions and variations within that ideal (2005: 131). There needs to be some highlight of the interplay between culture and sexuality.

In African culture, female sexuality has always required shaping, controlling and grooming. The grooming of a female was primarily for the purpose of serving her husband. The grooming of a female centred on the importance of being modest and virginal. Further, the interplay of culture

and sexuality is vested in the regulation and control of women; for example, the Shona marriage in Zimbabwe has the primary purpose of creating bonds between kin groups. The bridegroom, by transferring bride wealth (*lobola*), acquires rights over the bride's reproductive capacity (Schmidt, 1996). The bride plays no meaningful role in the negotiations for *lobola*, meaning she is merely a conduit in the entire process. Males, especially fathers, uncles, and older brothers have vested interests in younger women's reproductive capacities and sexual respectability which resulted in the close monitoring and regulation of female sexuality. This is evidenced by the views stated by one of the prostitutes who said:

“Ndakadzvingwa kumba na baba vangu pavakaudzwa na amai vangu kuti ndine pamuviri, kuitawo pamuviri pasina baba zvinhu zvinoremera vabereki.”

(Translation: “I was chased away from home by my father when my mother told him I was pregnant, in our culture it is difficult for parents to accept you with a fatherless child.”)

It is because the father deems that the daughter has dashed his hope of negotiating bride wealth and, in addition, he has to contend with the stigma attached to a young woman with a child out of wedlock by the community.

Parikh (2005:131) states that in the past, there was a process to becoming sexual selves which was then fully actualized in marriage where they were integrated with reproduction, family reputation and marital obligation. Female sexuality, unlike male sexuality, is a great source of anxiety for families primarily because it is believed to hold significant reproductive power and hence power over men (Parikh, 2005: 132). Mothers interviewed for instance, could not see themselves filling the role of the *tete* who is absent and hence could not play her traditional role as a sexual advisor. Another concerned mother feared that if she talked to her daughter her husband might view this as encouraging her daughter to indulge in sexually depraved acts. Whilst one can understand that women face a balancing act between their life choices and conforming to the systems that govern their lives, there was a need to interrogate a culture which seemed monolithic to most respondents. It became clear that on the whole there is still the view that our culture is not dynamic and is not capable of adapting according to the needs of the society in which it exists.

One of the main concerns with this view is that those who support the cultural relativist stance totally ignore the fact that customary law is not dormant. It is true that a people arising out of colonial subjugation are keen to assert their cultural identity. It is pertinent to remember that the perpetuation of what are termed 'traditional values' serve the dominant ideology. In this case these 'norms' are created and cater for the interests of men (Tsanga, 2003). These 'norms' are threatened by new ideas and resist the idea that change is imminent. Cultural relativists paint a romantic picture of culture, of African tradition and institutions that remain untouched and unaffected. Nhlapo (1995) states that nationalist governments of our day inherited 'customary' law which had undergone interface with the colonial process. It is true that the coming of the Europeans did not alter the position of women in the traditional set up. In fact, colonization reinforced the patriarchal institutions that already existed and actually entrenched and exaggerated them through the distortion of customs and practice (Nhlapo, 1995).

Cultural relativism is committed to the recognition of cultural differences and to the acceptance of the validity of all cultures (Kaganas et al, 1994). Feminist anti-essentialists on the other hand will not value culture for its own sake once it is revealed that it is oppressive to women. Hence, feminist anti-essentialists adopt an interventionist approach rather than the debilitating stance taken by cultural relativists (Higgins, 1996). Hence, rather than conform to the 'sameness' theory, these feminists view difference as an attribute that occasions debate and conversation. Difference is seen as a voyage and learning experience of how culture defines and confines a woman. The judges of the Constitutional Court in South Africa have explored 'custom' and have enunciated how traditional practices have confined women to a minority status. Perhaps to illustrate this, Chapter Three of the South African Constitution offers a counter-balance to customary law (Nhlapo, 1995). Further, there are constitutional principles that outline both the feminist and traditionalist stance. For example, constitutional principle 13 expressly recognizes the position of customary law; it is subject, however, to the fundamental rights contained in the Constitution (Kaganas et al, 1994). Seemingly, for us as Africans to view custom as being static would be to do so at our own peril.

4.5.2 Religion

During the field research it also emerged that religion, as well as culture, not only informs the thinking of parents and teachers but it also informs the curriculum. For example, parents who were interviewed stated:

“Condoms can protect from unwanted pregnancy and HIV but does it protect from the wrath of God?”

“Abstinence should be the focus of sex education with consequences of pre-marital sexual intercourse highlighted!”

Christian theology affirms that sexuality is part of Creation, and that sexuality is fundamental to the human experience and Christian identity. In passages of the Bible, procreation rather than pleasure is the aim of any sexual intercourse. The body and its organs have taken on symbolic meanings of obedience and rebellion, fidelity or unfaithfulness, and the sacred or the profane. Christians are called to a personal morality, grounded in the biblical norm of virginity before marriage and mutual love and understanding within marriage (Ojo, 2007: 135). Christian churches further warn the young that temptation comes in various forms, and unauthorized sexual activity is part of Satan’s tool to target Christians and lead them away from God.

The right to reproductive and sexual information and education must, like the whole range of social and economic human rights, be provided without discrimination. Underlying all the monotheistic religions, are different constructions of gender, sexuality, procreativity and family that come into conflict with the principle of freedom and equality embedded in the human rights system (Hellum et al, 2007: 346). These differences manifest themselves in resistance to women and girls’ reproductive rights in reservations to human rights declarations and conventions. Similar to the cultural relativist argument religious norms have the potential of obscuring the rights of women.

Churches and places of worship have remained silent on the issue of sexuality and during an informal interview with a trainee pastor in a Pentecostal church he revealed that the only

sexuality education that goes on is for couples who are planning to wed in the Church. The couple undergoes pre-marital counselling with Church elders. This is because sexual intercourse was meant only for the marriage institution. Parikh states that sexual learning within the church is premised on gendered sexual obligations, the role of reproduction and fidelity (2005: 151). Like culture, religion is used as a moral commentary to lament the decline of historical practices. Parikh (2005: 152) states that it was Christianity that led to the erosion of traditional morality yet critiques of modern day immorality are infused with Christian values.

The standard set by South Africa in balancing the right to culture and equality is relevant here. The human right to religious freedom does not extend to the beliefs and practices that inhibit the realization of rights. Governments are under stern obligations to prohibit and cease practices that inhibit the realization of the right to reproductive health. Most discrimination against women rests not on the law but on legally-tolerated religious and customary norms, so the state obligation in terms of Article 2 of CEDAW is to ensure that '*any person, organization and enterprise*' takes cognizance of people's right to equality and non-discrimination. This implies a duty on state parties to ensure that health and education programmes respect, protect and fulfil teenage girls' right to sex and reproductive health education without discrimination (Hellum et al, 2007: 355).

CHAPTER FIVE

5.0 INTERVENTION STRATEGIES

Based on the research findings there is an urgent need to put in place intervention measures that can assist the MoESC in their current review of the G & C. The writer notes that although resource constraints that may hinder the implementation of comprehensive sexuality education, a concerted effort and a commitment to the rights of the youth will ensure that headway is made in the process.

5.1 Review and improve the G & C Curriculum

The Curriculum on Guidance and Counselling needs to be reviewed in light of changing times. A curriculum should be set as a standard that is an ongoing process throughout Forms 1 to 4. The subject should remain non-examinable but there should be review and evaluations done to assess the efficacy of this syllabus. The International Planned Parenthood Federation has come up with ways to evaluate programmes and assess the efficacy of the programme. These include:

I Learning and effectiveness

There are a variety of methods that can be used to assess learning and evaluate programmes such as quizzes, poster making, role-play, discussion, debates, presentations, interviews and questionnaires.

II Pre- and Post Assessment

Conducting assessments at the beginning and end of the programme will identify the needs of individuals young persons, provide them with opportunities to reflect on what they have learnt and provide evidence that the young person has developed a greater understanding of a topic. This information should inform the context of future CSE sessions.

The outline below serves as a guideline on some topics that can be included in the curriculum. This framework is informed by research done on sex education programmes and the need to contextualize it in the African context and it is by no means exhaustive.

Topic 1

Defining terms and distinguishing between sex, sexuality and sexual rights. Discussing the terms in relation to students' lived realities. Discussing the terms gender equality, equity and roles in society.

Topic 2

The sexual anatomy of the body and physical and emotional changes associated with puberty and sexual reproduction including fertilization and conception as well as sexually transmitted diseases and HIV/Aids. The stigma attached to the sexual body and the interplay of culture and the female body in particular.

Topic 3

Reproduction and reproductive health rights and responsibilities unpacked. Discussions on contraception and birth control. What contraceptives there are, how they work, how people use them, how they decide what to use or not and how they can be obtained. Abortion could be discussed including the effects of an illegal abortion and the legal position on abortion.

Topic 4

Abstinence as an option to avoid HIV/AIDS and unwanted pregnancy, topics that could be discussed are relationships and skills in relation to communication, listening, negotiation, asking and identifying sources of help. Relationships would include what kinds of relationships there are, love and commitment, marriage and partnership.

Topic 5

The law relating to sexual behaviour and relationships – a look at Zimbabwean laws i.e. rape, abortion and unlawful intercourse with a girl under the age of sixteen (as defined in Section 70 of the Criminal Law Code) and prostitution (e.g. An expert in the related field can be called when presenting a specific topic, e.g., a Magistrate may be a good expert to use in respect of laws relating to behaviour and relationships.) Use newspaper cuttings to show the sentence(s) imposed on the guilty.

Topic 6

The effects of risky sexual behaviour i.e. sexually transmitted diseases and HIV/Aids. The socio-economic impact of a lack of education on the life of the girl-child.

Topic 7

The role the media and technology play in informing attitudes on sex and sexuality. For example, the role of the internet, advantages and disadvantages would include the trafficking of young women through the internet and media such as newspapers.

Topic 8

Religious and Cultural views on sex and sexuality. This could include discussions on cultural and religious practices such as early marriages and divisi (the Shona myth that a sexual encounter between blood relatives, like a father and daughter) results in a bumper harvest.

Topic 9

Questions from students on any aspect of sexuality should be entertained as part of the curriculum.

The CDU is encouraged to develop a curriculum that is multi-faceted and one which will encourage better communication between parents and children. There is evidence that improved communication can be achieved if both parents and children are involved (Rodman et al, 1984). As parents are unable to talk about or at times accept the developing sexuality of their children, a program that incorporates human sexuality education and parent education should be helpful. Sexuality education needs to increase voluntary communication about human sexuality between parents and children.

5.2 Create a Conducive and Relevant Learning Environment

The teaching of CSE requires an enabling environment that ensures young people can ask questions about sexuality without being humiliated or 'told-off'. There is a need to establish a safe learning environment in which open and non-judgmental discussions about sex, sexuality and sexual health can be held.

5.3 Train confident, well-informed and helpful Teachers

There should be a selection and training of teachers who are committed to a comprehensive programme on sex education. Educators should have adequate training and receive on-going support. Stakeholders should be encouraged to come on board such as other sexual health services, local universities and voluntary groups that have expertise in certain topic areas in order to support the training of school educators.

5.4 Initiate reality-based and fully consultative Policy Development for Comprehensive Sexuality Education

There needs to be a policy developed which includes a clear definition of comprehensive sexuality education and what it aims to achieve. This can be developed in consultation with young people, parents and professionals from the wider community. This will ensure that it addresses the needs and rights of young people, as well as their educational and health priorities. This policy and definition will then form the basis of any future programmes.

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