Acceptance Level of Elementary Teachers in Teaching Sex Education

**ABSTRACT**

Sex education in primary schools has severe problems that impede the effective transmission of critical knowledge to young children. Educators frequently struggle to give developmentally appropriate knowledge while navigating the varied cultural beliefs of families, resulting in insufficient or contradictory information. This study aims to determine the level of teachers teaching sex education by analyzing Age, Gender, civil status, and years of teaching. The participants of this study were 150 public elementary teachers in Hagonoy, Division of Davao del Sur. This study used the adopted research questionnaire Kruskall-Wallis H and Mann-Whitney U, to treat the data statistically. The results showed that the overall level of teachers teaching sex education was very high. Also, the level of teachers teaching sex education, grouped by Age, Gender, civil status, and years of teaching, shows no significant difference. Among all the indicators, *confidence* received the lowest mean score out of all the measures. This means that teachers should be confident in teaching sex education. Additionally, the school administration holds workshops and seminars to boost teachers' confidence in teaching sex education; even students should be sufficiently resilient about it.

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*Keywords: sex education, descriptive statistics, comprehensive sex education (CSE)*

*SGD Thrust: Quality Education, Good Health and Well-Being*

**1. INTRODUCTION**

Teachers experience conflict in Comprehensive Sexuality Education (CSE) due to differences between beliefs and cultural backgrounds [1]. Lack of direction on how to teach the curriculum was linked to teachers' decisions regarding the CSE program, particularly about integrating sex education into existing subjects [2]. It is concluded that despite initiatives to put in place a thorough strategy for sexuality teaching that acknowledges sexuality as a human right [3], primary school teachers still encounter challenges in delivering sex education in schools as a result of inadequate training and concerns that parents prohibit their kids from learning about and having conversations about sexuality. Teachers usually agree with the research of Zhuravleva and Helmer [4] on including sex education throughout several categories. Nevertheless, regardless of their academic environment or personal background, many require greater confidence or comfort to impart it adequately. The rising use of sex education in educational contexts [5] necessitates bettering student teachers' readiness for dealing with sex education through teacher education.

As children get older, their awareness of their surroundings changes. Thus, teaching children how to recognize, prevent, and report sexual abuse is one of the most crucial elements in stopping child sexual abuse. Parents must watch over their kids closely and help them make important decisions. In the study of Ali [6], there is increasing evidence that parents may reduce their child's risk of sexual abuse, although they seldom participate in research or prevention education. Teachers encounter conflicts in implementing CSE when teaching sexuality topics in local contexts, especially when traditional religious and cultural norms often prohibit the transmission of knowledge about sexuality and contraception [1]. It is known that implementing sex education faces many difficulties due to the differences between the beliefs and cultural backgrounds of society and community. According to Rotondano [7], the school Division still lacked psychologists on staff, a group deemed "most prepared to address such a complex theme," which is why teacher training in sexuality was labelled as a "problem" by one of the educators interviewed who took part in the push for the implementation of the DDPM (Division for Professional Development of Teaching Staff).

The effectiveness of sex education in Ugandan classrooms mostly depends on the level of competency of the teachers engaged. Established by the Ugandan government as a "National Framework for Sexuality Education," it is expected to include several topics, including sexual development, gender identity, and interpersonal interactions. Moreover, owing to its dependence on convictions and cultural norms regarding morality and virginity, the system primarily promotes sexual abstinence and, according to Ugandan law, does not endorse sexual inclusivity [8]. Education centred in schools plays a crucial role in providing insights into students' sexual and reproductive health.

As Darabi et al. [9] noted, educators significantly enhance Ugandan students' comprehension of sexual and reproductive health and rights. Moreover, UNESCO has identified in-curricular school-based sex education as the most economically efficient and ecologically advantageous method for educators to interact with a multitude of young children.

In addition, the United Nations Educational, Scientific and Cultural Organization UNESCO [10] encourages conceptual and broad sexuality as a methodological assumption, as this proposed curriculum for CSE education proves that pupils begin learning at a young age. Living fully and entirely with their sexuality, exercising accountability and respect for others. That implies that the foundation of CSE is human rights and that its goals include encouraging individuals to shatter the taboos that have historically body-sex sensations that are suppressed and forbidden, limiting it to sexual activity and encircling it with legends as well as anxieties that are never or never founded on the many advances made in this subject by science. In the study by Herat et al. [11], eight curriculum points in CSE interact with one another. Other and cover subjects including values, relationships, and rights - knowing gender, sexuality and culture, violence, safety, health, well-being skills, the development, sexuality, and anatomy of the human body, sexual and reproductive health, as well as behavior. Professors and educational [12] communities need to establish protocols to identify, report, and follow up on the population that has experienced sexual abuse. However, teachers may contribute to the culture of silence surrounding this phenomenon by avoiding it due to their own traumatic experiences, which increases the likelihood that the victim will continue to experience abuse.

In the Philippine context, the Philippine Institute of Development Studies (PIDS) claims numerous obstacles to implementing comprehensive sex education, including a lack of school resources and facilities and necessary training [13]. The Philippines is adopting sex education, but slowly. First, rather than combining sex education with other topics, the Department of Education is thinking of [14] creating a stand-alone course on the subject. Rather than asking other educators to change their curriculum, it enables schools to employ teachers who specialize in this area. Although it is not taught in secondary or even primary schools, Perez [15], sex education is not a subject in the Philippines. To ensure that young people are safe when they become older, there is a push for sex education in the Philippines.

Teachers experience conflict in CSE due to the differences between beliefs and cultural backgrounds [1]. Students want sex education classes to be taught by credible people [16]. Low-income families prefer to have sex education included in the school curriculum. However, [17], [18], the majority still shun education on the Reproductive Health (RH) Bill, according to a recent survey by the city's largest university. According to the author, the literature on receptivity to organizational innovation needs to be more accurate in emphasizing the theoretical assessment of receptivity correlates. It wrongly implies that people are generally resistant to change. For example, he presents research on hypothesis testing based on information from a poll of public-school educators' reactions to sex education being taught in elementary schools [19].

The Reasoned Action Theory of Martin Fishbein [20] was the foundation for this study. This theory suggests that individual behaviour influences personal actions. Moreover, it is affected by points of view on behaviour and personal standards. Understanding teachers' acceptance of sex education can benefit from this theory since their readiness to educate depends on their attitudes and the expected standards of peers and society. It provides evidence of theoretical and empirical grounds to assume that conservative worldviews significantly influence behavioral intentions concerning sex education [Grigoropoulos](https://www.qeios.com/profile/59166) [21].

This study aims to determine the primary school teachers' acceptance level in teaching sex education. The paragraph discusses how cultural and religious variables make it difficult to administer Comprehensive Sexuality Education (CSE). Although sex education rules are in place in 85% of the nations assessed, their efficacy is hampered by inadequate curricula and teachers' lack of confidence. Teachers feel uneasy when social conventions and personal beliefs influence their teaching. There are obstacles to using CSE because of community context, culture, and religion. For CSE implementation in school health policies to be successful, it is stressed how important it is to consider cultural and religious backgrounds.

Thus, the findings of this study may benefit the school, administrators, teachers, and students as a guide in assessing the acceptance level of teachers teaching sex education. Hence, the research questionnaire aims to determine this level. Despite the challenges of teaching sex education in the classroom, teachers are committed to understanding the function the educational system performs in providing students with good health by leading the execution of thorough sex education (CSE).

**2. RESEARCH OBJECTIVES**

This study aimed to determine the acceptance level of elementary teachers in teaching sex education. It sought to answer the following:

1. To describe the profile of the respondents in terms of:
	1. Age;
	2. Civil Status;
	3. Gender; and
	4. Years in Teaching.
2. To determine the level of acceptance of elementary school teachers on the implementation of sex education in the classroom in terms of:
	1. Approval
	2. Job effectiveness; and
	3. Confidence.
3. This study aims to determine whether there is a significant difference in the acceptance level of elementary school teachers in teaching sex education when analyzed by profile.

**3. METHODS**

**3.1 RESPONDENTS**

This study's participants were 150 elementary teachers in the Division of Davao del Sur. Simple random sampling [22] was employed to choose respondents based on Age, Gender, civil status, and years of teaching. According to Thomas [23], simple random sampling ensures that each member of a population has an equal probability of selection in their response. Only teachers who agreed to participate in the data collection are eligible for this survey.

In choosing the research participants of this study, the following criteria were strictly followed: (1) must be a teacher in a public school, (2) the teacher must have at least one (1) year of teaching experience [22], and (3) the teacher is willing to participate in answering the survey questionnaire. Moreover, the withdrawal criteria are the following: (1) not a public-school teacher, (2) less than one (1) year of teaching experience, (3) not responsive to any questions, and (4) not meeting the criteria during the conduct of data collection.

**3.2 INSTRUMENTS**

The instrument was composed of two parts. Part I deals with the demographic profiles of the respondents in terms of Age, Gender, civil status, and years of teaching. Part II deals with the acceptance level of teachers teaching sex education, which has three indicators: approval, job effectiveness, and confidence. The second part was a 16-item questionnaire adopted from Mchunu [24], with six (6) items for approval, five (5) items for job effectiveness, and five (5) items for confidence. Hence, the reliability test of the 16-item scale $α=.835$suggested that the items have a relatively high internal consistency.

In this study, the researchers used a 5-likert scale to interpret the teachers’ responses to the level of teachers teaching sex education. The scale below was used to analyze the data.

**3.3 DESIGN AND PROCEDURE**

This study utilized descriptive statistics to systematically synthesize data by elucidating the association between variables within a sample or population Kaur et al. [25]. It also provides appropriate and precise explanations of such information with, without, or sometimes with minimal statistical procedures that focus on the acceptance level of teachers teaching sex education.

The researchers began by sending letters to the Division Office of Davao Del Sur to request permission to conduct the study. Once approval was granted, additional permissions were obtained from the school heads for the appropriate survey schedules. Subsequently, the researchers met with the teachers to explain the study's purpose and significance and distribute the survey questionnaire.

**Table 1. *Table for Interpretation for Acceptance Level.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Scale** | **Range of Means** | **Description Levels** | **Interpretation** |
| **5** | **4.20-5.00** | **Very high** | It indicates that the items relating to the acceptance level of elementary teachers in teaching sex education embodied in the item were always present. |
| **4** | **3.40-4.19** | **High** | It indicates that the items relating to the acceptance level of elementary teachers in teaching sex education embodied in the item were sometimes present. |
| **3** | **2.60-3.39** | **Moderate** | It indicates that the items relating to the acceptance level of elementary teachers in teaching sex education embodied in the item were often present. |
| **2** | **1.80-2.59** | **Low** | It indicates that the items relating to the acceptance level of elementary teachers in teaching sex education embodied in the item were seldom present. |
| **1** | **1.00-1.79** | **Very Low** | It indicates that the items relating to the acceptance level of elementary teachers in teaching sex education embodied in the item were absent. |

The survey questionnaire was developed with the assistance of the Research Publication Center (RPPC) at UM Digos College, and the RPPC office validated it to ensure reliability. Following data collection, the researchers coordinated with the RPPC and provided the collected data to the statistician. The researchers totalled and catalogued the survey results before passing them to the statistician. After data analysis, the statistician forwards the findings to the researchers. Strictly and morally, the procedure was followed to ensure that the results would significantly enhance the sex education initiative.

The research study used the following descriptive statistical analysis, including the respondents' frequency, percentages, means, and standard deviation testing, to represent how well the method measures something about the study. The frequency of the value in the number of times it occurs in a dataset [26]. The percentage generally represents data that indicates the proportion of observations for each data point or collection of data points [27]. Moreover, the mean was used to define the entire sum of the values in a sample Hurley & Tenny [28] divided by the total number of values in the sample. Finally, usually about

the mean value of the data set, the standard deviation (SD), was used to gauge the degree of scattering in a set of values. Standard deviation computation in the study Omda & Sergent [29] depends on whether the dataset reflects a sample or the whole population.

**3.4 ETHICAL CONSIDERATIONS**

Throughout this investigation, ethical guidelines and practices of the University of Mindanao Ethics Committee were rigorously observed. Often, the researchers asked for and got letters from important institution officials. Permission is needed to do this research. The researchers assessed the risks and safety measures to be taken against the identified recruitment parties and verified that they were suitable (including social, psychological, and physical dangers). The study's sample also provides proper authorization and consent, and they are assured that all of their rights will be respected, especially when processing the data, which includes but is not limited to:

**Informed Consent and Voluntary Participation.** Every participant was under the obligation to provide signed informed consent. Individual potential volunteers were

**Table 2. *Demographic Profile of the Respondents (n=150****)*

|  |  |  |
| --- | --- | --- |
| **Profile** | **f** | **%** |
| **Age** 20-30 years old 31-40 years old  41-50 years old 51-60 years old Above 60 years old | 143140641 | 9.320.726.742.7.7 |
| **Civil Status** Single  Married  Separated  Widow(er) | 38503131 | 25.333.320.720.7 |
| **Gender**Male Female | 7575 | 50.050.0 |
| **Years in Teaching**  3-5 years  6-10 years  More than 12 years  | 374766 | 24.731.344.0 |

contacted and advised of the study's goals and data collection method. They were given a reasonable time to ask questions and communicate any concerns. Their participation was voluntary; hence, opting to join or stop the study during its term would not affect their employment or care [30].

**Anonymity and Confidentiality.** Data collection, analysis, and release of the study findings preserved participants' anonymity and confidentiality by hiding their names and identities. Throughout phone contact, interview sessions, data processing, results distribution, privacy, and confidentiality in the interview environment were painstakingly upheld [30].

**4. RESULTS AND DISCUSSION**

**4.1 DEMOGRAPHIC PROFILE OF THE RESPONDENTS**

Table 2 represents the demographic profiles of the study respondents, namely, age, civil status, gender, and years in teaching. 150 respondents freely indicated they wanted to take part in the survey.

**Age.** Table 2 shows that 20-30 years old got a frequency of 14, approximately 9.3%; 31-40 got a frequency of 31, approximately 20.7%; 41-50 years old and above got a frequency of 40, approximately 26.7%. This further revealed that 51-60 years-old got the highest frequency of 64, approximately 42.7%, while the remaining .7%, ages 60 and above, got the lowest frequency of 1.

**Civil Status**. Table 2 shows that out of 150 respondents, 38 belong to a single status, approximately 25.3%; 50 are married and got the highest frequency, approximately 33.3%; 31 are separated, approximately 20.7%; and the remaining 31 are widows(er), approximately 20.7%. Thus, with over 33.3% of the whole sample population of the study, married couples dominate the marital status results.

 **Gender.** Table 2 reveals an equal distribution of gender. According to the statistics, men and women have a frequency of 75, around 50.0% apiece. This reveals a perfectly balanced gender demographic in the sample population.

**Years in Teaching.**Table 2 shows that in terms of years of teaching Experience, 3-5 years in teaching, got the lowest frequency (37), approximately 24.7%, while 6-10 years in teaching have a frequency of 47, approximately 31.4%. This further revealed that more than 12 years of teaching had the highest frequency of 64, approximately 44.0%.

**4.2 ACCEPTANCE LEVEL OF ELEMENTARY SCHOOL TEACHERS ON THE IMPLEMENTATION OF SEX EDUCATION**

Table 3 shows elementary school teachers' acceptance level: approval, job effectiveness, and confidence. The overall level of teachers' acceptance (x̄=4.44; SD=0.36). This indicates that the level of teachers' acceptance of the implementation of sex education was very high. This implies that most of the respondents in the study favoured the implementation of sex education in the curriculum.

 Sex education is mandated on a state level, whereas different states, districts, and school boards have the autonomy to determine the implementation of federal policies and funds for sex education. The system has been criticized for being a "highly diverse patchwork of sex education laws and practices Leung et al. [31]. Shin et al. [32] claimed that although most people agree that formal sex education is important for schools, teachers also have a great need to provide natural and ongoing sexual guidance. Examining [1] requires one to take national values and culture into account in order to progress the integration of CSE into educational health programs. Beliefs and cultural elements affect the execution of CSE. Teachers' confidence in implementing CSE is compromised by the beliefs and cultural backgrounds of their communities, along with concerns about adverse outcomes, like promoting unhealthy sexual behaviour among students.

**Approval.** Table 3 also shows that the level of teaching sex educationin terms of approval was very high (x̄=4.70; SD=0.37). It indicates that this level of acceptance of elementary teachers in teaching sex education was always observed. It implies that most of the selected elementary teachers in Hagonoy Davao Del Sur favoured implementing sex education in the curriculum.

According to the DepEd Order No. 031, s. 2018, Comprehensive Sexuality Education (CSE) is a curriculum-based process encompassing the cognitive, emotional, physical, and social dimensions of sexuality, characterized by scientific rigour, age and development appropriateness, cultural and gender responsiveness, and a rights-based framework. Teachers are frequently uneasy or defensive about teaching sex education since social standards and personal experiences heavily impact it, Ngabaza & Shefer [33]. Moreover, Adonis and Baxen [34] stated that providing sex education in the classroom is a practical and emotional endeavour where educators actively build the knowledge they impart to their learners. In sex education in the curriculum, teachers are integral in delivering content that will not lead to students' misconceptions and interpretations.

In addition, Buston et al. [35] indicated that insufficient time is critical for comprehensive implementation. Given the sensitive nature of sex education, educators in both public and private institutions allocate considerable time deliberating on appropriate materials and information for classroom delivery, Mkumbo [36]. Moreover, Helleve et al. [37] noted that curriculum reforms in general and specific domains of health and physical education necessitate teachers acquiring knowledge of sports training methodologies and sports health through a certification system, thereby diminishing the time for sex education. The scope of health and physical education content has expanded significantly. Educators need enhanced training or confidence to convey the information accurately. Inadequately trained teachers often exhibit reluctance to

**Table 3. *Acceptance level of elementary school teachers on the implementation of sex education, n=150***

|  |  |  |
| --- | --- | --- |
| **Indicators** |   **x̄** | **SD** |
| Approval | 4.70 | 0.37 |
| Job Effectiveness | 4.40 | 0.43 |
| Confidence  | 4.22 | 0.71 |
| **Total** | **4.44** | **0.36** |

teach sex education and frequently lack a sustained commitment to introducing these topics Haignere et al. [38].

**Job Effectiveness.** Table 3 also displays high work effectiveness levels accepted by the teacher (x̄=4.40; SD=0.43). This suggests that the degree of teacher approval for applying for sex education was consistent. This implies that adding sex education will ensure a comprehensive teaching approach instead of negatively influencing the teacher's obligation and responsibility.

Moreover, as said in the 2018 Policy Guidelines on Implementing Comprehensive Sexuality Education, the Department of Education is dedicated to helping teacher preparation in CSE. It intends to collaborate with the Curriculum and Learning Management Division to create CSE training programs. This division explicitly trains school leaders and educators to integrate CSE across various learning domains and coordinate with the School Governance and Operations Division. According to research done in South Africa, teachers regularly assume several roles, including those of a parent, peer, and social worker in imparting sex education.

Conversely, teachers could be reluctant to start these projects because of anxiety. These roles can be judged as connected to their teaching responsibilities or call for further training to provide student direction. Ahmed et al. [39] say that many educators feel that teaching sex education is immoral and that talking about a topic in class will cause "losing students' respect." The general understanding of sex education

may not be covered until teachers are fully trained or instructed before teaching it.

Moreover, the recommended teaching approaches and guidelines should also be introduced to the teachers who are about to teach sex education to ease some identified barriers. Natividad [40] states that most teachers do not usually integrate these topics and do not provide enough information to their students, resulting in poor knowledge about sex education. Moreover, without proper guidance and education from the teachers, problems concerning sex education will arise due to cultural orientations where an open discussion about sexuality results in the lack of job effectiveness of the teachers teaching sex education in the classroom [41].

**Confidence.** Table 3 also shows that the level of teacher acceptance of implementing sex education in terms of confidence was very high (x̄=4.22; SD=0.71). This indicates that this confidence level towards implementing sex education was always observed. It also implies that most of the selected elementary teachers were confident in teaching sex education in the curriculum.

The results are a consequence of Mukambika’s [42] statement that work experience in teaching helped teachers become confident in understanding the role of sex education in schools and its effects on students. Bola et al. [43] state that teachers' positive attitudes toward sex education make them confident to teach the subject. It implies that they have a high indication understanding of sex education, like ensuring that in teaching,

**Table 4. *The difference in acceptance level when analyzed by age***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Age | N | Mean Rank | Chi-square | df | Asymp. Sig.  |
| **Approval** | 20-30 yrs. Old | 14 | 70.29 | 2.589 | 4 | 0.629 |
|  1-40 yrs. Old | 31 | 79.66 |  |  |  |
| 41-50 yrs. old  | 40 | 70.43 |  |  |  |
| 51-60 yrs. Old | 64 | 77.02 |  |  |  |
| Above 60 yr. old | 1 | 125 |  |  |  |
| Total | 150 |  |  |  |  |
| **Job Effectiveness** | 20-30 yrs. Old | 14 | 101.5 | 5.799 | 4 | 0.215 |
|  1-40 yrs. old | 31 | 73.05 |  |  |  |
| 41-50 yrs. old | 40 | 74.64 |  |  |  |
| 51-60 yrs. old | 64 | 71.55 |  |  |  |
| Above 60 yrs. old | 1 | 75 |  |  |  |
| Total | 150 |  |  |  |  |
| **Confidence** | 20-30 yrs. old | 14 | 84.61 | 6.523 | 4 | 0.163 |
| 31-40 yrs. old | 31 | 87.35 |  |  |  |
| 41-50 yrs. old | 40 | 72.63 |  |  |  |
| 51-60 yrs. old | 64 | 70.63 |  |  |  |
| Above 60 yrs. old | 1 | 7 |  |  |  |
| Total | 150 |  |  |  |  |
| **Overall** | 20-30 yrs. old | 13 | 84.18 | 4.086 | 4 | 0.395 |
| 31-40 yrs. old | 31 | 84.97 |  |  |  |
| 41-50 yrs. old | 40 | 73.44 |  |  |  |
| 51-60 yrs. old | 64 | 71.08 |  |  |  |
| Above 60 yrs. old | 1 | 26 |  |  |  |
| Total | 150 |  |  |  |  |

\*p<0.05

sex education should be developmentally appropriate to avoid misconceptions among students. However, Kasonde [44] found that teachers have less Confidence in Teaching education because of the cultural and religious barriers and lack of formal training. Thus, before the implementation of sex education, school administrators may provide their teachers with formal training to enhance their general understanding of sex education and somehow modify their cultural beliefs that might be affecting their behaviour towards sex education. Lastly, the school institution should provide adequate resources to address all the gaps in teaching sex education.

Furthermore, Javadnoori et al. [45] and Martin et al. [46] stated that sex education knowledge and confidence in teaching sex education were slightly below the threshold. Teachers should continue to develop and broaden their understanding of sex education. According to Pokhrel and Chhetri [47], teachers' sex education competency criteria should be changed to account for social changes, and policymakers should use these findings to support training initiatives. As a result, Aventin et al. [48] recommend improving the confidence of school personnel and instructors in teaching sex education in the classroom.

**4.3 SIGNIFICANT DIFFERENCE IN THE LEVEL OF ACCEPTANCE OF SCHOOL TEACHERS IN TEACHING SEX EDUCATION AS ANALYZED BY AGE**

Table 4 shows the age-related differences in the level of acceptance of elementary school teachers in teaching sex education. The results show that there is no significant difference when analyzed by age, with a mean rank of 84.18 for 20-30 years old, 84.97 for 31-40 years old, 73.44 for 41-50

**Table 5. *The difference in acceptance level when analyzed by Civil Status***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Civil Status** | **N** | **Mean Rank** | **Chi-square** | **df** | **Asymp. Sig.**  |
| **Approval** | Single | 38 | 87.82 | 8.444 | 3 | 0.038\* |
| Married | 50 | 79.98 |  |  |  |
| Separated  | 31 | 66.66 |  |  |  |
| Window(er) | 31 | 62.02 |  |  |  |
| Total | 150 |  |  |  |  |
| **Job Effectiveness** | Single | 38 | 74.01 | 1.035 | 3 | 0.793 |
| Married | 50 | 75.27 |  |  |  |
| Separated | 31 | 81.9 |  |  |  |
| Window(er) | 31 | 71.29 |  |  |  |
| Total | 150 |  |  |  |  |
| **Confidence** | Single | 38 | 67.3 | 9.609 | 3 | 0.022\* |
| Married | 50 | 70.98 |  |  |  |
| Separated | 31 | 96.56 |  |  |  |
| Window(er) | 31 | 71.77 |  |  |  |
| Total | 150 |  |  |  |  |
| **Overall** | Single | 38 | 70.67 | 6.349 | 3 | 0.096 |
| Married | 50 | 74.75 |  |  |  |
| Separated | 31 | 91.94 |  |  |  |
| Window(er) | 31 | 66.19 |  |  |  |
| Total | 150 |  |  |  |  |

\*p<0.05

years old, 71.08 for 51-60 years old, and 26 for above 60 years old. This means that their acceptance level is similar to their age. The Department of Education said that the program to include sexuality education fits the Responsible Parenthood and Reproductive Health Law of 2012, which requires the delivery of age and developmentally appropriate reproductive health education for teenagers. According to them, teenagers need adult direction to understand the core of sex education properly and to avoid misreading its primary goals. By arming future mistakes with the necessary counselling and healthcare treatments, this project seeks to prevent them, Cruz & Chua [49]. The effort to provide sex education conforms with the law that guarantees teenagers’ right to health and education, according to the education department, Miedema & Oduro [50]. According to the education departments, education conforms to the law that guarantees teenagers' right to health and education, Miedema & Oduro [50].

Gacoin [51] asserts that the objective of incorporating sex education into the curriculum is to enable students and educators to make informed decisions that positively impact their overall well-being. Educators, mainly guide-friendly counsellors, must possess the requisite knowledge and skills to integrate sex education into various subjects effectively. Adolescents are currently unprepared for the obligations and hardships that adult sexuality brings, McCormack [52]; UNESCO [53]. Many young and older adults are exposed to exploitation, coercion, and violence without enough sex education. Furthermore, more and more young people are beginning to develop sexual consciousness in their early years, UNESCO [53]. Given this, comprehensive sexuality education (CSE) should be delivered sensibly and adapted to the developmental level of the learner.

**4.4 SIGNIFICANT DIFFERENCE IN THE LEVEL OF ACCEPTANCE OF SCHOOL TEACHERS IN TEACHING SEX EDUCATION AS ANALYZED BY CIVIL STATUS**

**Table 6. *The difference in acceptance level when analyzed by gender***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Gender** | **N** | **Mean Rank** | **Sum of Ranks** | **Mann-Whitney U** | **Z** | **Asymp. Sig. (2-tailed)** |
| **Approval** | Male | 75 |  3.8 | 5535 | 2685 | -0.497 | 0.619 |
| Female | 75 | 77.2 | 5790 |  |  |  |
| Total | 150 |  |  |  |  |  |
| **Job Effectiveness** | Male | 75 | 76.16 | 5712 | 2763 | -0.188 | 0.851 |
| Female | 75 | 74.84 | 5613 |  |  |  |
| Total | 150 |  |  |  |  |  |
| **Confidence** | Male | 75 | 66.83 | 5012 | 2162 | -2.471 | 0.013\* |
| Female | 75 | 84.17 | 5613 |  |  |  |
| Total | 150 |  |  |  |  |  |
| **Overall** | Male | 75 | 69.47 | 5210 | 2360 | -1.702 | 0.089 |
| Female | 75 | 81.53 | 6115 |  |  |  |
| Total | 150 |  |  |  |  |  |

\*p<0.05

Table 5 shows the differences in the level of acceptance of elementary school teachers in teaching sex education by civil

status. When analyzed by civil status, the result shows no significant difference, with a mean rank of 70.67 for singles, 74.75 for married, 91.94 for separated, and 66.19 for widows(er). This means that their acceptance level is similar to their civil status.

This study revealed no appreciable variation in the opinions of single, married, separated, and window(er) instructors about the instruction of sexuality education Eko et al. [54]. Consequently, it identifies early marriages, insufficient education, and inadequate family planning as factors contributing to population growth, emphasizing the academic institution's role in mitigating teenage pregnancy rates through value reformations. Tomol and Narida [55] corroborate this theme, asserting that sex education should encompass values and interpersonal skills as essential components for fostering comprehensive sexual development among students. However, participants in this study did not fully disclose their preferences for delivering sex education at specific grade levels.

Various studies have provided significant insights into the integration of sex education that promotes comprehensive

development. Unis and Sällström [56] discovered through their phenomenological analysis of adolescents that they internalize various facets of sex and relationships as they progress through their school years, aligning with their maturity levels. Despite their differences, they exhibit similar knowledge and attitudes regarding the instruction of sex education.

**4.5 SIGNIFICANT DIFFERENCE IN THE LEVEL OF ACCEPTANCE OF SCHOOL TEACHERS IN TEACHING SEX EDUCATION AS ANALYZED BY GENDER**

Table 6 shows gender differences in the level of acceptance of elementary school teachers in teaching sex education. The result showed no significant difference when analyzed by Gender (*U=2360, p=0.73).* Whether the study subjects are male or female, they have similar perceptions of the acceptance level.

According to Macabago [57], there is no significant difference in terms of gender among teachers in sex education. CSE is also considered an essential tool in efforts to promote gender equality Miller [58]; UNESCO [10], including intimate partner violence Kantor et al. [59]; Makleff et al. [60], and in achieving the Sustainable Development Goal Starrs et al. [61].

**Table 7. *Difference in acceptance level when analyzed by Years of Teaching***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Civil Status** | **N** | **Mean Rank** | **Chi-square** | **df** | **Asymp. Sig.**  |
| **Approval** | 3-5 years | 37 | 83.04 | 1.788 | 2 | 0.409 |
| 6-10 years | 47 | 75.11 |  |  |  |
| More than 12 years | 66 | 71.55 |  |  |  |
| Total | 150 |  |  |  |  |
| **Job Effectiveness** | 3-5 years | 37 | 78.05 | 2.151 | 2 | 0.341 |
| 6-10 years | 47 | 67.94 |  |  |  |
| More than 12 years | 66 | 79.45 |  |  |  |
| Total | 150 |  |  |  |  |
| **Confidence** | 3-5 years | 37 | 65.22 | 2.851 | 2 | 0.24 |
| 6-10 years | 47 | 77.9 |  |  |  |
| More than 12 years | 66 | 79.55 |  |  |  |
| Total | 150 |  |  |  |  |
| **Overall** | 3-5 years | 37 | 70.41 | 1.552 | 2 | 0.46 |
| 6-10 years | 47 | 72.64 |  |  |  |
| More than 12 years | 66 | 80.39 |  |  |  |
| Total | 150 |  |  |  |  |

\*p<0.05

Implementation support from external change agents was described as instrumentals in mainstreaming programmed contents beyond the classrooms and offices by addressing gender policies, providing gender training and seminars to teachers, and undertaking a gender focus Joyce et al. [62]; Kearney et al. [63]; Robertson-James et al. [64]. The letters were feedback to schools as part of the interventions in one study, thus serving as a feedback loop that enhances an overall change process, Kearney et al. [63]. Hence, this study shows no significant difference in gender and racial grouping perceptions of the new information teaching sex education. Furthermore, Ruane-McAteer et al. [65] suggest that in terms of acceptance level analyzed by gender, there is no significant difference in the potential of gender transformative approaches across the educational programming seeking to improve and the guidance of the school head, administrator, and division heads.

**4.4 SIGNIFICANT DIFFERENCE IN THE LEVEL OF ACCEPTANCE OF SCHOOL TEACHERS IN TEACHING SEX EDUCATION AS ANALYZED BY YEARS IN TEACHING**

Table 7 shows the differences between the level of acceptance of elementary school teachers in teaching sex education in terms of years of teaching. The results show that there are no significant differences when analyzed by years of teaching ($x^{2} \left(2\right)=1.552, p=0.26)$, with a mean rank of 70.41 for 3-5 years, 71.64 for 6-10 years, and 80.39 for more than 12 years. This means that whether the respondents have years of teaching experience, they have similar perceptions about the acceptance level.

Teachers generally regard sex education favourably Achora et al. [66]. They demonstrate commitment and a willingness to participate in seminars and training to obtain comprehensive and precise knowledge of sex education Adogu & Nwafulume [67]. Consequently, they are competent and dependable in delivering sex education to students effectively. However, teachers dedicate inadequate time to sex education due to a lack of qualified personnel and limited expertise La Bella, [68]; Chaiwongroi et al. [69].

In addition, Ameh [70] states that teachers must be highly competent in teaching sex education because students believe they are the best people to discuss the matter. Goldman [71] emphasized that teachers may be sufficient in teaching if they use, develop, and apply accurate teaching strategies in sex education to assess the learning of the various cognitive levels of the students. Students find it awkward to discuss topics about sex education and the reproductive health of their parents Bikila et al. [72]. To produce educated and competent sex educators, teachers must also have enough teaching experience through seminars and workshops funded by the institution and the school division.

**5. CONCLUSION**

The findings suggest that Martin's proposed reasoned action theory significantly impacts teacher acceptance of sex education; it broadens the teachers' perspective. Therefore, the results revealed that out of 150 respondents who participated in the study, the lowest level of teachers' acceptance of sex education is confidence. Hence, the results also revealed that teachers should have more confidence or build confidence in teaching sex education in the classroom.

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