Tutors' Experiences of Sex and Relationships Education in Tanzania

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Master thesis

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2015

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Abstract

Integration of SRE in schools curricula has been received with mixed feeling by stakeholders including teachers. This has led to poor implementations of SRE in educational institutions. The overall aim of this study was to explore experiences of teacher educators (tutors) of sex and relationships education (SRE) in Tanzania. To achieve this aim, three research questions guided this study. The first question intended to explore how tutors understand the meaning and goals of SRE in teacher education. The second question focused on understanding how tutors perceive the integration of SRE into teacher education and how tutors convey and communicate sex and relationships knowledge to teacher-students[1]. The third research question was seeking to explore how tutors integrate SRE components into the subject content and the methods, which they employ in delivering it to the teacher-students in actual classroom practice in teachers' colleges. This was a qualitative study, adopting phenomenographic approach as a point of departure. Semi-structured interview was the main method for collecting empirical data from the participants. Purposive sampling was used to obtain a sample of eight tutors with 3-25 years of experience from three teachers' colleges in the northern part of Tanzania. The interviews were recorded, transcribed, analysed and interpreted.

The findings indicated that; tutors expressed variations in their perceptions of the meaning and goals of SRE. Most of the tutors focused on the biological aspects of SRE. Also, the participants were unaware of the 2004 policy issued by the government to guide provision of SRE in educational institutions. Their perceptions on how SRE is integrated in teacher education curriculum varied between tutors teaching social science and natural science subjects. Furthermore, the provision of SRE in teachers' colleges face a number of barriers, some of which include policy related challenges and challenges related to low status of the subject.

In light of the findings of this study, the researcher has recommended the current SRE policy is revised and adjusted to include more SRE components, and in addition to introduce SRE as an independent subject in teachers' colleges. Besides SRE being a part of teacher education at the university level, tutors in teachers' colleges should be provided with SRE knowledge through in-

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[1] Teacher-students in this study refer to teacher trainees pursuing certificates and diploma courses in teacher education at college-based teachers' colleges in Tanzania.

service seminars and workshops. This will help to build up the tutors' capacities to deliver SRE to teacher students effectively.

Findings of this study can be used for improving the provision of SRE in teachers colleges in Tanzania.

Abbreviations

AIDS   Acquired Immune Deficiency Syndrome

COSTECH   Tanzania Commission for Science and Technology

HIV   Human Immunodeficiency Virus

ICPD   International Conference on Population and Development

ICT   Information Communication Technology

MoEVT   Ministry of Education and Vocational Training (Tanzania)

NECTA   National Examination Council of Tanzania

NLSEF   National Life Skills Education Framework

NSD   Norwegian Social Science Data Service

PSI   Population Service International

SRE   Sex and Relationships Education

STDs   Sexually Transmitted Diseases

STIs   Sexually Transmitted Infections

TIE   Tanzania Institute of Education

UK   United Kingdoms

UNFPA   United Nations Population Fund

UNICEF   United Nations Children's Fund

URT   United Republic of Tanzania

USA   United States of America

WHO   World Health Organization

1.   Introduction and background to the study

This study aims to explore experiences of teacher educators (tutors) of sex and relationships education (SRE) in Tanzania. The study is designed to provide a better understanding of how tutors understand SRE and how they deliver SRE knowledge and skills to teacher-students in teachers' colleges in Tanzania.

Adolescents' health has become a serious concern worldwide, due to both a better understanding of the uniqueness of this age group in public health terms and the social contexts that increase health risks for young people. This is especially true with respect to sexual and reproductive health (URT, 2004). In 2013, about 1.8 billion adolescents were documented in the world's population data (UNFPA, 2013). Adolescence is a period of transition from childhood to adulthood. During adolescence, most adolescents start to explore their sexuality (Engen, 2013) which puts adolescents at risk of sexual health problems. Engaging in unprotected sex at adolescence put many adolescents at risk of negative outcomes associated with sexual behaviour. These risks are; unwanted pregnancies, unsafe abortions, HIV/AIDS, and sexually transmitted infections (STIs) (Mlyakado, 2013). Vuttanont (2010, p.18) asserts that "having sex at school age may not pose a major threat to health in some countries" but in many of Sub-Saharan African countries adolescents may face a number of difficulties if they have sexual relationship and become pregnant. In countries where abortion is illegal, most of adolescent girls who become pregnant at school age end up with induced abortions, resulting in serious health complications such as postpartum haemorrhage and deaths. In many countries where high rates of adolescent pregnancy are threatening the promising future of many adolescent girls (UNFPA, 2013) has become a public health concern.

A high rate of adolescent pregnancies is occurring in low-income countries. The United Nations Population Fund report of 2013 shows that, 7.3 million girls under the age of 18 in low-income countries give birth every year (UNFPA, 2013), although a decline in births among the adolescent girls aged 15-19 is reported across the world between 1990 and 2011(United Nations, 2014). According to this report, there is a slight decline in the birth rate in Sub-Saharan Africa. However, the adolescent birth rate in this region remained higher worldwide. For example, in Sub-Saharan Africa the birth rate was at 117 births per 1,000 girls, while in Latin America and

Caribbean it was at 76 births per 1,000 girls in 2011 (UNFPA, 2013). In Sub-Saharan Africa, teenage pregnancy is not a new phenomenon. For example, Eko et al. (2013) report that in this region, at least 80% of the youth are sexually active before they are 20 years old. Likewise Kiluvia (2011) points out that 17% of all births in the Sub-Saharan region are accounted among girls between age 15-19, while the world average for girls of the same age giving birth accounted for 11% in 2010.

Tanzania is one of the countries in Sub-Saharan Africa where adolescent pregnancies are recognized as a public health challenge. Even though, there are no clear records on adolescent pregnancies, higher prevalence of girl teenage pregnancies between ages 15-19 has been reported (Kiluvia, 2011). The United Nations Children's Fund report of 2010 indicates that the adolescent fertility rate in Tanzania is high, making the country one of the countries with the highest adolescent pregnancy and birth rate in the world (UNICEF, 2011).

Currently, Tanzania has 26 administrative regions. The Tanzanian demographic and health survey of 2010 shows that childbearing among adolescents is high in the southern zone with 34% compared to the northern zone with 16% (NBS & ICF Macro, 2011). In line with that, a survey conducted by Wight et al. (2006) in Tanzania showed that, about 20% of the boys and 12% of the girls had had sexual intercourse with the age below 10 years. The world population report of 2013 shows that adolescent girls giving birth under age 15 will reach 16.4 million in Sub-Saharan Africa by 2030 (UNFPA, 2013). This projection shows that most Sub-Saharan African countries are likely to face a huge burden in maternal health care in the future if serious measures to prevent or reduce adolescent pregnancies will not be taken.

Apart from other factors, adolescent pregnancies and abortions are among the causes for most school dropouts (leaving before completion of school qualification) among girls in Sub-Saharan African countries, Tanzania in particular (Aarø et al., 2006; Engen, 2013). Mkumbo (2008) reports high rate of an abortion at a younger age, even though there is no exact data in the country because committing abortion is illegal in Tanzania.

Adolescent pregnancies in Tanzania have been the daily debate among educational stakeholders (Mlyakado, 2013). Unplanned-premarital-pregnancies are reported to contribute to school

dropout and poor academic performances. For example, in 2011 school dropouts related to adolescent pregnancies in secondary schools in Tanzania recorded 6.89% of the total school dropouts (URT, 2012).

The regulations put by the Ministry of Education and Vocational Training in Tanzania (MoEVT), terminate immediately school attendance for girls who are found pregnant, and expel boys who are found responsible for impregnating them (Kiluvia, 2011). Furthermore, Kiluvia (2011,p.4) points out that, "the reason for this restriction is purely based on the moral judgement that when these girls are allowed to go back they will influence other girls' behaviours since the most dominant aspect for controlling adolescent sexuality is abstinence until marriage". These school dropouts contribute to low social status and health inequalities in Tanzania.

School dropouts resulting from unplanned pregnancies among adolescent girls can be reduced or prevented through appropriate interventions targeting adolescents. One means of intervention is the introduction of SRE in educational institutions. SRE is often viewed as a key approach to address issues and problems related to sexual health (Eko et al., 2013). From a public health perspective, a school is an ideal setting for public health practitioners to engage with young people in a sustainable way (Kvarme, 2010), where most of them spend a long part of their adolescence (Mlyakado, 2013). School-based SRE has been acknowledged to have positive effect on transmitting health related knowledge that enables adolescents to adopt healthy lifestyles and avoid risky sexual behaviours (Helleve et al., 2011). In addition, Mkumbo and Ingham (2010) report that studies which examined attitudes towards provision of SRE in schools in low-income countries, show that it brings more benefits to students and community in general. Considering such SRE importance, the government of Tanzania like other countries decided to integrate SRE components in some subjects in both primary and secondary schools with the aim of equipping the young people with skills and clear information that may enable them to live a healthy lifestyle in their lifespan.

While several studies have reported positive attitudes towards integration of SRE in schools in many Sub-Saharan countries (Aarø et al., 2006; Eko et al., 2013), in Tanzania, integration of SRE in schools curricula has been received with mixed feelings by educational stakeholders (Mlyakado, 2013; Mkumbo, 2012) including teachers. This has led to poor implementation of

SRE in the formal education curriculum. A number of reasons have been given for the perceived failure of SRE delivery at primary and secondary school levels in Tanzania. The reasons include, but not limited to teachers not feeling competent, comfortable and not willing to teach topics containing SRE at classroom level (Helleve et al., 2009). Though, Hellar (2001) reports that teachers are among the reliable agents for providing SRE to the adolescent students, in some areas, they are reluctant to do so. Furthermore, teachers are reported to concentrate on teaching academic subjects and ignoring the provisional of social life aspects like sexuality (Petro, 2009 as cited in Mlyakado, 2013).

While various literatures like Helleve et al., (2011) have documented the importance of including SRE in school curriculum, some scholars (Aarø et al., 2006; Eko et al., 2013) have shown that SRE has been received positively in most of Sub-Saharan African countries. However, things have turned out differently in Tanzania where mixed feelings about SRE inclusion in school curriculum are reported among educational stakeholders (Mlyakado, 2013; Mkumbo, 2012), teachers included. Furthermore, a failure of the implementation of SRE has been reported. Thus, it is important to scrutinise how tutors experiences of SRE in teacher education curriculum. No studies have been identified that have been carried out in Tanzania to document tutors' experiences of SRE in teacher education curriculum.

1.1   Statement and justification of the study

Although Mkumbo (2008) used a mixed research method to investigate the perceptions of teachers, parents and students regarding the provision of SRE in both primary and secondary schools in Tanzania, the main focus was more on the psychosocial factors hindering the delivery of SRE in schools. The study did not give a significant picture of what teachers are trained to communicate within subjects containing SRE components. Tutors in teachers' colleges are responsible to produce qualified and competent teachers to teach SRE in schools. Understanding how tutors experiences SRE in teacher education curriculum is crucial; as Chi-kin Lee (1996) elucidates, understanding teachers' perceptions is important in achieving successful implementation of changes in the curriculum. Based on such argument, this study will explore tutors' knowledge about SRE, status of SRE in the teacher education curriculum and its implementation in teachers' colleges in Tanzania. The findings from this study will help to make

recommendations to the education policy maker and curriculum planners for effective integration of SRE in the teacher education curriculum in Tanzania.

1.2 Aim of the study and research questions

This study aims to explore tutors' experiences of SRE in Tanzania. To accomplish this, the broad research aim is operationalized through the following research questions:

1. How do tutors make sense of sex and relationships education?

2. How do tutors perceive the integration of sex and relationships education into teacher-education curriculum?

3. How do tutors teach sex and relationships education to teacher-students?

In the first question the ambition was to identify the ways in which tutors understand the concept of SRE in teacher education. Kimaryo (2011) points out that understanding of tutors' knowledge is important because conceptions of a phenomenon have a tendency to influence its practice and practices are crucial determinants of improving the quality of teacher education. The second question is focused on understanding how tutors perceive the integration of SRE into teacher education and how their perceptions are likely to shape the ways they convey and communicate sex and relationships knowledge to teacher-students. The third research question sought to explore how tutors are delivering SRE to the teacher-students in actual classroom practice in teachers' colleges.

1.3 Structure of the thesis

This thesis has been organized into six chapters. The first chapter has introduced the reader to the background of the study and the aim of conducting this study. An overview of literature on the education system, teacher education in Tanzania and other issues related to SRE are presented in Chapter 2; this helps the reader to develop a broader understanding of the phenomenon investigated. Chapter 3 presents the research approaches and methods adopted in this study. Findings obtained from data collection process, analysis and interpretation are presented in chapter 4. The discussion of the findings based on the research questions is presented in chapter 5, and finally the implications of the study are discussed in chapter 6.

2. Review of Literature

2.1 Introduction

This chapter describes the theoretical framework which underpins this study and related concepts as found in the literature. Within the theoretical framework, *self-efficacy theory* is explored as the major theory which anticipated to give a scientific insight to the research problem and can provide insight into the behaviour of tutors in implementing SRE in teachers' colleges in Tanzania.

A literature search was carried out on the following databases: ERIC, Google Scholar, SAGE, Brage (HUC-An open Institution archive), Bibsys Ask (for Norwegian Universities), PubMed, Science Direct and Oria. Several key words were used in different single or combined: "Sexual Health", "Sex Education", "Adolescent", "Youth", "Pregnancy", "Sex and Relationship Education", "Reproductive Health", "Sexual Health Policies in Tanzania", "Sexual Health Programmes in Tanzania", "Reproductive Health Services in Tanzania", "Education system in Tanzania", "Teacher education in Tanzania", "Education Curriculum in Tanzania", "Education Policy in Tanzania", "Teacher Education Syllabi", Sexuality", "Sexuality and Religion", "Sexuality and culture", and "self-efficacy theory". Due to existing lack of literature on SRE in Tanzania specifically, additional literature was retrieved through reference lists and bibliographies of the existing studies from inside or outside the country, which enriched the body of literature to be reviewed and utilised.

The review process was mainly focused on SRE in African context; however, studies from other culture were incorporated when seen to be relevant to this study. Literatures written in English were included in the study. Literatures were read several times and important findings were summarized and grouped into the following themes: meaning of sexual health and SRE, aims of school-based SRE, education system and teacher education in Tanzania, status of the SRE in education curriculum in Tanzania, teachers' attitudes, confidence and ease about teaching SRE in schools, challenges facing the provision of SRE within the formal education curriculum and self-efficacy theory.

2.2 The meaning of sexual health and sex and relationships education

2.2.1 Sexual health

The term "sexual health" was early defined by the World Health Organization (WHO) in 1975 as "the integration of the somatic, emotional, intellectual and social aspects of sexual being in ways that are positively enriching and that enhance personality, communication and love" (WHO, 2006, p.4). Additionally, WHO refined and amended the former WHO's sexual health definition of 1975 and included other terms such as sex, sexuality and sexual rights. The current working definition of sexual health states as follows:

> Sexual health is a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled (WHO, 2006, p.5).

At the International Conference on Population and Development (ICPD) held in Cairo in 1994, sexual health as viewed as a part and parcel of reproductive health. WHO defines reproductive health as "the state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes" (WHO, 2006, p.4).

2.2.2 Sex and relationships education

According to McKay (1999) and Harrison (2000) two facts have made sex and relationships education to be a complex and controversial subject. The first is that, there is no agreed name for it (McKay, 1999). Sex education has been assigned different names depending on the purpose and health concerns of the particular country. For example, Liang (2010) noted that the name sex and relationships education is widely used in UK instead of sex education. According to Liang (2010), the term sex education has been used in Taiwan and Netherlands, in Canada the name

sexual health education is widely used. Since SRE is integrated in other subjects in Tanzania, there is no clear name given to this education (see URT, 2004). The National Life Skills Education Framework (NLSEF) in Tanzania shows that integrating SRE in schools aims at equipping the youth with better sexual health knowledge and skills to enable them to respond to the challenges of the modern world (URT, 2010). The challenges include risks to their health, infection from HIV and other diseases, as well as early pregnancies (URT, 2010).

Second, there is no universally acceptable definition of SRE (Harrison, 2000). This means that there is only a collection of definitions that have been defined depending on: the national context, religious beliefs, cultural and traditional norms and health goals concerns at a particular period of time. For example in USA, SRE is defined with the emphasis on developing attitudes, beliefs and values about identity, relationships and intimacy among the adolescents while in UK; SRE is focusing on moral and relationships aspects (see Bruess & Greenberg, 2004; DfEE, 2000). In Tanzania a definition of SRE has been adopted from UK and modified to suit the Tanzanian context. The definition focuses on developing knowledge on HIV/AIDS prevention than other aspects of sexual health (see URT, 2004). Most of the definitions given out have common characteristics which reflect three dimensions of SRE pointed out by Stone and Ingham (2006); namely, facts and information, relationships and interpersonal skills and values and attitudes. Examples SRE definitions are:

> "Lifelong learning about physical, moral and emotional development. It is about the understanding of the importance of marriage for family life, stable and loving relationships, respect, love and care. It is also about the teaching of sex, sexuality and sexual health" (UK Department for Education and Employment (DfEE, 2000, p. 5).

> "A lifelong process of acquiring information and forming attitudes and beliefs and values about sexual identity, relationships and intimacy. It involves much more than teaching children about reproduction. It must include a real understanding of sexuality in its broadest terms" (Lenderyou, 1993, p.10).

> "Lifelong learning about sex, sexuality, emotions, relationships and sexual health. It involves acquiring information, developing skills and forming positive attitudes and values" (Sex Education Forum, 1999, p.1).

"A lifelong process of acquiring information and 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 from 1) the cognitive domain, 2) the affective domain, 3) the behavioural domain, including the skills to communicate effectively and make responsible decisions" (Bruess & Greenberg, 2004, p.19).

According to Stone and Ingham (2006), facts and information dimension deals with biological and psychological aspects, relationships and interpersonal skills dimension focus on learning of motions and relationships and values and attitudes dimension deals with understanding moral values. Constantine, Slater and Carroll (2007, p.421) argue that a comprehensive sex education is that which provides "complete, accurate, positive and developmentally appropriate information on human sexuality, including the risk-reduction strategies of both abstinence and contraception; it promotes the development of relevant personal and interpersonal skills; and it includes parents or caretakers as partners to teachers".

2.3 The aims of school-based sex and relationships education

In most countries, where the majority of children have access to formal education, a school is recognized to be an important arena for promoting health of the adolescents. The main aim of public health is to prevent a population at large against diseases through promoting better lifestyles of living. Using the concept of the metaphor of "The River of life", Eriksson and Lindström (2008) illustrate the salutogenic approach of health in public health which emphasises moving from "down-stream-thinking" to "up-stream-thinking" of treating disease. The "up-stream-thinking" is focusing on preventative. This means that, people should be prevented from drowning in the river by building fences and supplying them with life vests. This protection and prevention paradigm within public health focuses on disease and how to avoid it, and the objective becomes to keep people from drowning in the river by reducing and or removing risks (Eriksson & Lindström, 2008). In this sense, teachers are among the agents to promote healthy behaviour of the adolescents based on the metaphor of "the river of life" in implementing health

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programmes such as teaching SRE in schools. The salutogenic approach emphasises that it is not enough to protect people from drowning in the river. Instead, people have to learn how to swim (Antonovsky, 1987 in Eriksson & Lindström, 2008). Therefore, provision of SRE in formal school curriculum, is "up-stream-thinking" in public health work which aims to keep the adolescents healthy and enabling them to stay safe and enjoy their journeys in the river (Eriksson & Lindström, 2008).

Based on the definitions and dimensions of SRE described on section 2.2.2, that the goals of providing SRE in schools may vary from one context to another (Mkumbo, 2008). For example, in Canada, SRE is targeted to enable the adolescents to acquire knowledge and skills about sexual health issues that will enable them to maintain better sexual health and avoid sexual health risks (Health Canada, 2008). In USA, SRE is designed to help the adolescents to "be prepared for puberty and adolescent changes, appreciate that life changes are normal, recognise their own bodies as good, beautiful and private, learn to make decisions that take into account possible consequences and understand the place of sexuality in human life" (Bruess & Greenberg, 2004, p.16). Studies show that, in most of Sub-Saharan countries in Africa, including Tanzania, the provision of SRE in schools aims to protect adolescents against sexual health problems such as teenage pregnancies, induced abortions and HIV/AIDS (Aarø et al., 2006; Helleve et al., 2009). All these objectives are focusing on prevention of adolescents from sexual health risks. Based on these objectives, several studies have identified the goals of integrating SRE within the education curriculum. Among of these goals are:

One, SRE is targeted to provide accurate information about human sexuality, covering concepts such as growth and development, human production, anatomy, physiology, masturbation, family life, pregnancy, childbirth, parenthood, sexual response, sexual orientation, contraception, abortion, sexual abuse, sexual rights, and sexually transmitted infections (Mkumbo, 2008).

Two, SRE aims are at enabling the adolescents to understand how sexuality is constructed in their societal values, attitudes and beliefs (Bruess & Greenberg, 2004). The knowledge here should enable the adolescents to develop ability and capacity of carrying family obligations and responsibilities effectively in their future life.

Three, according to Bruess and Greenberg (2004), the provision of SRE aims to enable the adolescents to develop relationships and interpersonal skills. Interpersonal skills include communication, decision-making, assertiveness and peer refusal skills. The achievement of these skills will enable the adolescents to develop the ability to create satisfying relationships including caring, supportive, non-coercive and mutually pleasurable relationship.

Four, studies show that, school-based SRE has shown success in reducing risky sexual behaviour that is associated with STIs and teenage pregnancies among the adolescents (Mkumbo & Ingham, 2010) by increased knowledge on contraceptive use. Mkumbo (2012) argues that provision of SRE is likely to help the adolescents who are not yet sexually active to delay sexual intercourse until they are cognitively and emotionally ready for mutually beneficial and healthy sexual relationship. Furthermore, Kirby, Laris, and Rolleri (2005) assert that SRE has been acknowledged for increasing the positive belief about condoms and contraceptive use for those who are already sexually active, which in turn offers dual protection against STIs including HIV/AIDS and pregnancy.

McKay (1999) explains that SRE aims to enable young people's ability to develop and continue maintaining a healthy, satisfying and responsible sexuality. Therefore, from the discussion above, one can conclude that "the fundamental goal of SRE is to facilitate young people to make and carry out informed decisions about their sexual health" (Mkumbo, 2008, p.24). In order to achieve this goal, the provision of SRE within the formal school curriculum, a comprehensive SRE programme be well designed to equip young people with "relevant information, a valid and appropriate ethical framework and the skills necessary to translate a decisions into action" (Reiss, 1993, p.130).

2.4   The education system in Tanzania

This section describes the education system in Tanzania in order to provide an insight into the system in which teachers are trained and qualify for. Also, the explanations will provide a foundation for understanding how SRE is delivered within the education system in Tanzania.

The education system in Tanzania is well spelt out within the National Education Policy of 1995 (URT, 1995). Tanzania's educational system has three main levels: primary education, secondary

education and tertiary education (URT, 1995). The primary education level comprises pre-primary education, which is not compulsory and primary education that is compulsory to all school-aged children (Chambulila, 2013).

Secondary education is divided into two levels: lower and advanced level (Jidamva, 2012). Lower secondary education lasts for four years and advanced level takes two years (Meena, 2009), and transition from lower level to advanced level depends on the performance in the final national examinations that are conducted by NECTA (Jidamva, 2012). Graduates from the advanced level of upper secondary education, apart from qualifying to join technical and professional courses at university level can qualify to join either diploma in teacher education (MoEVT, 2007) or bachelor in teacher education at Universities (TCU, 2007). The Ministry of Education and Vocational Training in Tanzania is responsible for formatting, monitoring and improving the education system (Kimizi, 2012). Tanzania Institute of Education (TIE) is an organization under MoEVT, which is responsible for developing education curriculum for primary schools, secondary schools and teachers' colleges. The Tanzanian educational system operates with two different languages of instruction; Kiswahili, the official national language is used in government owned pre-primary and primary schools, in teachers' colleges offering certificate level (grade "A"-teacher education) and other colleges offering professional certificates in vocational studies (URT, 1995). English is used from secondary level to higher education (URT, 1995). The education system in Tanzania is summarized in table 2.1 below.

Table 1. Structure of the system of education in Tanzania

Main category	Sub-category	Duration	Addition information
Primary	Pre-primary Primary	2 years 7 years	Primary education is compulsory
Secondary	Lower (ordinary) level (form I-IV) Advanced level (form V-VI)	4 years 2 years	Graduates of lower level can join among other courses the certificate in primary education
Tertiary	Among other courses Diploma in Teacher Education University studies	2+ years 3+ years	Graduates of advanced level of secondary education can join diploma in Teacher education or undergraduate studies. At the university, undergraduate studies integrate teacher education for those who opt for the teaching profession.

Source: adapted from Chambulila (2013, p. 19).

2.5   Teacher education in Tanzania

There are two tiers of teacher education in Tanzania, namely college-based and university-based teacher education (Meena, 2009). Graduates from college-based teacher education are qualifying to teach in pre-primary, primary and lower secondary school, while university-based teacher education is directed to prepare teachers qualifying for upper secondary education, certificate and diploma teachers' college education. In this part, only college-based teacher education is discussed because it is the focus of this study.

2.5.1 College-based teacher education

This programme offers two levels of teacher education: one is a certificate in teacher education (i.e. grade "A" certificate). This programme specifically admits students who complete lower secondary education and qualify to teach in pre-primary and primary schools (URT, 1995). Three types of courses in certificate in teacher education are offered. These are pre-primary teacher education certificate, primary teacher education certificate and physical education teacher education certificate (TIE, 2009). The language of instruction at teacher certificate level is Kiswahili, and English is taught as a foreign language. Teacher students at this level are given instruction in all subjects taught in primary schools including pedagogic (or didactic) content and ethics of teaching profession. This course (grade "A") is a full-time course of two years (URT, 1995).

The second teacher programme is a diploma in teacher education (i.e. diploma in education), and students admitted in this course are those who graduate from the advanced level of secondary education and the diploma in education course will qualify to teach at lower secondary schools (Chambulila, 2013). A diploma in education is a non-degree course and is below of the degree level in Tanzania. It is possible to find grade "A" teachers in diploma teachers' colleges pursuing further education that enable them to upgrade from grade "A" to diploma holders (Meena, 2009). Diploma teacher students are learning two major teaching subjects among the subjects that are taught in secondary schools, including pedagogic (or didactic) content, and ethics of teaching profession.

In conclusion, both the grade "A" teacher certificate and diploma in education programmes introduced above are structured in the way to train teachers who are expected to fulfill the demands of the school system and society as spelt out in the National Education Policy of 1995 (URT, 1995). For effective implementation of SRE in the school setting, well-trained teachers are required, and tutors in teachers' colleges are responsible to prepare the teacher-students for teaching the topic. Allen (2009) in Liang (2010) points out that being trained is an advantage to the effectiveness of delivering sex education. Therefore, knowledgeable teachers will facilitate the teaching of topics containing sexual content in both primary and secondary schools in Tanzania.

2.6   The extent to which SRE is included in curriculum in Tanzania

In Tanzania, SRE is not provided as an independent and standalone subject in schools and other educational institutions (Mkumbo, 2008). However, it is mainstreamed in other subjects and its provision is guided by the *Guidelines for Implementing HIV/AIDS and Life Skills Education Programmes in Schools* (URT, 2004). This guideline aimed to control the amount and type of HIV/AIDS information and materials provided in schools at classroom level (Mkumbo, 2008). However, Mkumbo (2009, p.617) asserts that "the name assigned to these guidelines clearly indicates that school policy on sexual education in Tanzania has been spurred by the advent of the AIDS epidemic whose impact in the country reached a significant toll in the early 1990s". According to this guideline, the SRE contents should be covered in Social studies and Science subjects in primary schools, Biology and Civics and Home economics in lower secondary schools, Biology and General studies in upper secondary schools. For the case of teachers' colleges, SRE should be covered in the subjects related to those taught in both primary and secondary schools where SRE is specified to be integrated. Curriculum contents are normally interpreted in the subjects syllabi.

Only studies of Mkumbo (2008, 2009) managed to analyse the amount of SRE in both primary and secondary schools syllabi in Tanzania. In this paragraph, these two studies will be shortly reviewed. The content analysis of the amount of SRE in both primary and lower secondary schools syllabi identified that SRE components are focusing on family, social norms, HIV/AIDS

and human body, the concepts of life skills, family, gender issues, culture, STIs and HIV/AIDS are integrated in Civics subject. Also, SRE components integrated in the Biology subject including concepts of health and community, infections and diseases, STIs and HIV/AIDS, personal hygiene, sexuality, sexual health, family planning, human reproduction and maternal and child care. By reflecting on the dimensions of SRE components integrated in both primary and secondary schools curriculum, Mkumbo (2008, p.191) concluded: "almost all SRE related sub-topics in the school curriculum were found to be mainly focused on knowledge and only few of them focused on skills and relationships and attitudes and values". Although the study of Mkumbo (2009) didn't examine the type of SRE taught and how it is taught in both primary and secondary schools in Tanzania, but the study shows that the increasing rates of teenage pregnancies among school girls is due to lack of enough and appropriate knowledge on contraceptives use. Furthermore, Mkumbo (2009) argues that the coverage of SRE components in primary and secondary schools education is low, disorganised and scattered across four subjects and this can hardly to hold the meaningful SRE programme for the adolescents.

2.7 Teachers' attitudes, confidence and ease about teaching SRE in schools

Effective implementation of any education curriculum in any nation depends on teachers. Teachers are final interpreters of curriculum contents at classroom level. Boscarino and Clemente (1996) in Mkumbo (2008) point out that, teachers are the key to success for school-based SRE programmes. Again, Milton (2003) elucidates that, in some countries, teachers are trusted by young people and credited to be the main source of information about sexuality.

Although there are few studies attempted to study the attitudes of teachers towards the delivery of SRE in schools in Tanzania (Mlyakado, 2013), but the existing literature show that the extent to which teachers implement the school-based SRE curriculum is depending upon and influenced by their attitudes (Mkumbo, 2012), confidence (Helleve et al., 2009) and comfort (Mkumbo, 2008) towards it. Studies have shown that although teachers are supporting provision of SRE within the formal education curriculum (Helleve et al., 2009; Mkumbo, 2012), but teaching subjects containing SRE contents in schools have faced a number of challenges and obstacles in Tanzania and other Sub-Saharan countries. These obstacles include:

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Some teachers are expressing being uncomfortable and unconfident to teach some topics containing sexual related components such as condom use, masturbation, sexual orientation, abortion and contraception (Bilinga & Mabula, 2014; Milton, 2003). According to Mkumbo (2012), teachers have no problems in teaching SRE containing biological facts, but they find difficult in teaching topics related to psychological aspects of sexuality education, including discussing these topics with young people. However, Helleve et al. (2009, p.56) noted that "...some teachers feel uncomfortable with some of the teaching methods" used to teach topics related to SRE such as role play and group discussions.

Bilinga and Mabula (2014) assessed the teaching of SRE in primary schools in one of the region in Tanzania and found that teachers were facing criticism and lacking support from their staff members and parents about teaching SRE in classrooms. Similarly, Helleve et al. (2009) reported that, teachers in Tanzania and South Africa consider that some parts of SRE contents are contradicting their own or students, parents and community values and norms in general. Therefore, lack of receiving enough support from their fellow teachers, parents and community at all leads to difficult to deliver SRE within formal education curriculum.

Furthermore, Mkumbo (2008) pointed out that there is no clear policy that supports the teaching of SRE in Tanzania, instead there is a guideline issued to control the amount of HIV/AIDS information provided in classrooms. The lack of a clear policy is one among of other factors that make teachers not confident to deliver comprehensive SRE in schools as well as lack of support from their colleagues. Helleve et al. (2009), Mkumbo (2012) and Mlyakado (2013) point out that although teachers may support the teaching of SRE in schools, but they may at the same time also lack knowledge, skills and confidence to handle sexual education sessions in classrooms due to insufficient training tailored to SRE provided to them. Therefore, special training for teachers to handle SRE topics effectively may lead them to be competent in delivering this education in classrooms (Mkumbo, 2012).

Helleve et al. (2009) point out that teachers' confidence in teaching SRE depends on the perceptions teachers have towards it and how they believe in their own ability (self-efficacy) to teach topics containing SRE components to the students. Again, Helleve et al. (2009) and

Mkumbo (2012) also show that some teachers are lacking confidence and are not feeling comfortable to teach topics related to SRE in classrooms.

2.7.1 Socio-cultural challenges hindering the provision of SRE

Provision of SRE in schools is not simple as providing social and natural science subjects. Culture and religion are among the socio-cultural factors hindering the provision of SRE in schools despite of its necessity to the adolescents. Existing studies provide several examples of evidence from Africa and Asia showing cultural resistance to SRE in schools (Roudsari et al., 2013). In many Sub-Saharan African countries including Tanzania, sexual issues are constructed within the cultural norms and traditional beliefs. Sex and reproductive health is a taboo subject in most homes. For example, parents are facing difficulties to discuss sexuality themes with their adolescents. Similarly, policy-maker and curriculum designers are facing a challenge of appropriate age and contents that should be taught in schools (Mkumbo, 2008).

Engen (2013, p.33) points out that "...parental concerns regarding sexual health education are often based on misunderstandings about the nature and effects of such [sex and relationships]educational programs" and Schuster (2010) in Engen (2013) emphasises that these misunderstanding on SRE have led to restrictions in access to information among the adolescents about contraceptives, safe abortions and safe sex due to their parents and society to believe that SRE encourage immoral sexual behaviour outside marriage. In some cases a community itself acts as a barrier to adolescents to practice safe sex for those who have been sexual active. For example, James, Fowler and Roberts (2014) report that adolescents in Kenya are afraid to buy condoms because they fear for the shopkeepers would be likely to question them. Furthermore, speaking indirectly and avoidance of openness and transparent expression of sexual issues in order to protect modesty sometimes contributes to misunderstanding of sexual health information (Roudsari et al., 2013).

On the other hand, religion is a big challenge in provision of SRE in schools. Religious sects have tension on and have opposed to sex and relationships education given out through education institutions. Human behaviours are equated with belief systems and hence religion has played an important role in the individual's sexuality as its principles, regulations and practices affect daily

interactions (Adepoju, 2005). Tantchou and Wilson (2000) elucidates that the Protestant churches are supporting SRE policies and even in some areas they provide sexual and reproductive health services at their own health centres. In contrast, the Catholic Church and Islam are opposing any policy and programmes associated with sexuality and particularly modern contraceptive methods. Farrag and Hayter (2013) and Roudsari et al. (2013) argue that SRE in Islamic countries is difficult and contentious one.

In recent years, African and Asian countries are experiencing a rapid degree of modernity and westernization that is affecting their cultural ways of living both positively and negatively. Exposure of the community to modern communication technologies through electronic media such as internet, mobile phones and satellite televisions are acknowledged to increase the rate of pre-marital sexual practices among the adolescents. Although, it is not possible to eliminate all sexual health risks such as teenage pregnancies, but provision of SRE within formal education curriculum is a step in the right direction (Engen, 2013).

2.7.2 Challenges related to limited time and shortage of teaching and learning materials

Studies conducted to assess the implementation of SRE in school premises show that most of the programmes are facing limited time and shortage of teaching and learning materials. For example Liang (2010) using a survey method comparing the provision of SRE in England and Taiwan, revealed that in both countries teachers were not satisfied with time allocated in the school timetable for teaching SRE. Similarly, Buston, Wight, Hart and Scott (2002) using a mixed method in their study reported limited time allocated for teaching SRE in 13 Scottish schools which has impact on teaching techniques such as role-play for delivering some SRE topics in classrooms. Another study carried out in Tanzania by Bilinga and Mabula (2014) using a mixed research method discovered that time allocated in the syllabi does not match of that is allocated in the general school timetable. The subjects' syllabi in Tanzania are prepared in the way they show time to be spent to teach each topic. Teachers believed that a comprehensive coverage of SRE topics need more time to allow them to do so.

Another barrier mentioned by different scholars is shortage of teaching and learning materials (resources) particularly in low income countries. Vuttanont (2010) reports shortage of teaching and learning materials to teach topics related to contraceptives and other issues related to relationships in Thailand. In Tanzania, a study of Biliga and Mabula (2014) indicated that teachers were not equipped with teaching and learning materials to facilitate a smooth provision of SRE in primary schools. Despite of reporting availability of teaching and learning materials in high income countries like UK, Liang (2010) discovered difference in their utilization among the two schools studied in his study. The differences were teachers' experience of using resources outside the school and how to make hand-made materials for teaching SRE topics.

In addition to barriers discussed above, studies carried out in Tanzania are reporting that teachers are worrying about parents and community pressure. Some parents are not supporting the provision of SRE in schools due to misconceptions of SRE. This leads to poor implementation of SRE in schools due to teachers fearing from offending parents (Biliga & Mabula, 2014). In some countries parents are playing a role in determining what contents of SRE should be taught in schools (Vuttanont, 2010). A survey conducted by Mkumbo and Ingham (2010) in Tanzania on the provision of SRE in schools concluded that SRE programmes in educational institutions are more successful when parents are supporting them.

2.8   Overview of Self-efficacy theory

The body of literature discussed in this chapter indicate that successful implementation of SRE in educational institutions depends among others, the ability, competence and confidence of teachers in teaching subjects containing topics related to SRE. Bandura's (1997) self-efficacy theory provides an important insight into which mediating factors facilitate teachers' ability of their teaching behaviour. Teachers' self-efficacy beliefs seem to operate as determinants for actions through their perceptions of their own capacity to deliver SRE in schools (Bandura, 1986).

Self-efficacy refers to "beliefs in one's capabilities to organize and execute the courses of action required to produce given attainments" (Bandura, 1997, p.3). Kwarme (2010, p.12) elaborates more about self-efficacy as "how competent we feel regarding a task". The concept of self-

efficacy has been used in the development of several other theories/frameworks such as the social cognitive theory (Bandura, 1998) in order to explain mediating factors in behavioural change (Glanz, Rimer, & Lewis, 2002). The social cognitive theory describes how human behaviour is shaped by experience (Kwarme, 2010). The theory of self-efficacy mentions four strategies that increase perceived self-efficacy (Bandura, 1997). These are; mastery experience (achievement increases perceived ability to perform that task), vicarious experience (learned from the success of others performing the same tasks), verbal persuasion (complimenting ability of the others) and emotional arousal (stimulating both physical and emotional readiness to engage in the task). Furthermore, Bandura (1986) asserts that, the ability of a person to perform a particular task or behaviour in different cases rests on the sense of confidence that he or she has in his or her own ability to implement that behaviour.

Bandura (1998) insists that starting a new behaviour and keeping the behaviour change depends on the level of self-efficacy one' possesses. The core of self-efficacy theory is that the stronger the individual's belief in his or her ability to perform a certain behaviour, the more likely they will be to initiate and persist in the given activity (Lee, Arthur, & Avis, 2008). Furthermore, people with greater self-efficacy belief on positive success in future even if they encountered failure (Saunders, 2005 in Liang, 2010). Several studies have found that self-efficacy has been applied to SRE as well as many other healthy related programmes including smoking prevention, substance abuse prevention, violence prevention (Eko et al.,2013).

In some studies, the terms self-efficacy and self-esteem have been used interchangeably. However, Bandura (1997) criticises this approach and explains them as different concepts. He explained that, self-efficacy deals with judgements of personal capability whereas self-esteem relates to judgement of self-worth. Furthermore, Bandura (1997) cautions on the ways of treating the concepts 'perceived self-efficacy' and 'locus control' in the social cognitive theory as the same. He differentiate the two concepts by explaining that perceived self-efficacy refers to beliefs about whether a person can produce a certain tasks or actions and locus control refers to beliefs about whether actions or tasks affect the outcomes. Therefore, the assessment of person's self-efficacy depends on the tasks or actions performed by that person.

Viewing the provision of SRE in the teachers' colleges through the lens of self-efficacy theory, tutors should possess the skills and knowledge on SRE that will increase their confidence to enable them to communicate SRE to teacher-students effectively. Bandura (1997) believes that people will tend to perform tasks or actions that they believe to have power (they are capable) to produce results. Furthermore, Mkumbo (2008) elucidates that knowledge and skills alone are not enough in achieving a certain task or behaviour, one should also have a strong self-efficacy to overcome obstacles encountered when performing that task or behaviour. Increase in the implementation of health related programmes in schools depend on the level of self-efficacy do teachers possess. Based on self-efficacy theory, SRE in the teacher education curriculum should be implemented by well trained, confident and comfortable and committed tutors. Pendergast, Garvis, and Keogh (2011) explain that there is correlation between teachers' self-efficacy and accomplishment of teaching tasks in the classroom. Therefore, successful or failure in teaching of topics containing sexual issues depends on teachers' self-efficacy among other factors.

2.9   Conclusion

This chapter has introduced the theory which guided the study, provided a description of the education system and teacher education system in Tanzania. It has also discussed the status and scope of SRE within the education system in Tanzania. It has presented the challenges hindering a smooth implementation of SRE in school premises in the country: These were culture, religion, misunderstand of SRE, limited time and shortage of teaching and learning materials. In the next chapter, the methodological approach of the study will be discussed.

3.   Methodological approach

This chapter explains how the study was carried out. The reader will be able to understand the processes the researcher used to arrive at the findings of the study. The descriptions on research design, philosophical approach, setting of the study, sampling techniques, data collection method, data analysis, research qualities and ethical issues are presented in this chapter.

3.1   The qualitative research design

Research design refers to an outline guiding a researcher to conduct a study in a smooth way facilitating greater control of the factors that may threat the validity of the study (Polit & Beck, 2004). Research design enables a researcher to bring together philosophical, paradigmatic and methodological traditions (Cormack, 2000) in investigating a phenomenon. However, Burns and Grove (2009) argue that an appropriate research design must be chosen based on the nature of the topic to be studied in order to meet the specific aims and objectives of the study. A research design can be qualitative or quantitative (Cormack, 2000). In this sense, this study was oriented towards qualitative design using phenomenographic approach (Marton, 1981) in examining the tutors' experiences of SRE in the teacher education curriculum in Tanzania which thought to suit the purpose of this study.

Additionally, qualitative research is highly reliant on a small sample, that in some cases limit generalization of the results to a large population (Silverman, 2000). Instead, it gives deep insights into a selected group in the study (Marton & Booth, 1997). Furthermore, qualitative research is highly appreciated for adding a concrete and meaningful flavour to the reader, researcher, policy maker or a practitioner (Miles & Huberman, 1994) more than the pages of summarized numbers in quantitative research. Therefore, as little is known about tutors' views on SRE, an exploratory study was considered appropriate and suitable for this phenomenographic research.

3.2   The Phenomenographic approach

There are various qualitative approaches that can be used to study how people perceive different phenomena in a social world. In order to investigate how tutors experience SRE in the teacher-education curriculum, a phenomenographic approach was seen to suit this study. Marton (1981) referred to phenomenography as a qualitative research approach which attempts to explain how individuals understand, perceive and conceptualize the world around them. Furthermore, Marton and Booth (1997) explain that phenomenographic approach deals with the meaning of the phenomena which is constructed within the theory of variations. The theory of variation explains how individuals gain knowledge from their social world and develop meaningful conceptions towards a certain phenomenon. The variations in perceptions of the same phenomenon characterize phenomenographic studies (Marton & Booth, 1997). Subsequently, SRE, which is a main concept of this study, is expected to be perceived and experienced differently by tutors in teachers' colleges in Tanzania.   Therefore, the characteristics of variations in perceiving a phenomenon in phenomenographic study have been used as the main criteria of adapting this approach in this study.

3.3   Setting of the study

This study was carried out in the United Republic of Tanzania. The study was conducted in two administrative regions in the northern part of the country (i.e. regions R1 and R2). These regions were purposively selected due to the following reasons; first, the familiarity and accessibility of the area that made the research logistics possible and easy within a short period of time; and secondly, these two regions have fourteen teachers' colleges, whereby five are owned by the government and the rest are owned by private individuals and religious institutions. All teachers' colleges in Tanzania are following the same teacher education curriculum. Therefore, having fourteen teachers' colleges in two regions is above average compared to other areas, which provided the researcher with several colleges from which to sample.

3.4 Target population and sampling techniques

The targeted population for this study was all tutors in teachers' colleges offering certificate and diploma courses in education in the northern part of Tanzania. Most of the teachers' colleges owned by the government in Tanzania are situated in rural areas and only few government owned teachers' colleges are in urban areas. Three teachers' colleges were purposively selected based on the subject specializations relevant to this study and the level of education offered at a particular college. All the colleges chosen for this study are allocated in the rural area of the regions they belong to.

For the aim of keeping these teachers' colleges anonymous, the following labels to present them were used: code TC_1 and TC_2 for the teachers' colleges offering diploma in education and code TC_3 for the teachers' colleges offering certificate in education. In all these three teachers' colleges, SRE is delivered within Biology, Home economics, Developmental studies, General studies, Educational psychology and Civics for both certificate and diploma in education programmes.

3.4.1 Sample size and sampling techniques

Åkerlind (2005) asserts that the selection of participants in the phenomenographic study ought to be done based on some factors, not just on the basis of representative selection. Bearing this in mind, the selection of the participants was based on the following characteristics; tutors teaching experience, level of education, gender and teaching subjects in which SRE is integrated. These factors are assumed to influence the tutors' richness in knowledge and expertise about the phenomenon investigated. This sampling technique is regarded to be purposive when the selection is made on the basis of criteria which correspond to the intention of the study. For example, diverse in teaching experience seems to influence self-efficacy of the tutor. The higher the teaching experience, the higher the self-efficacy one possess in teaching and vice versa.

Gerris and Lacey (2010) defined a sample as a subset extracted from a target population being studied and normally determined by the sampling procedures. The sample in this study was extracted from the targeted population described in section 3.4 above. Furthermore, Bryman (2004) reports that qualitative research offers a deeper understanding of the participants, if a

small sample from the population is selected. In this study, eight tutors were recruited, whereby six tutors from two diploma level teachers' colleges and two from one certificate level teachers' college. Table 2 below summarizes the background characteristics of the participants in the study.

Table 2. Background characteristics of the participants

Teachers' college	Tutors' name (Pseudonym)	Professional qualification	Gender: Male/Female	Teaching experience in years	Teaching subject(s)
TC_1	Sachi	Master's degree	M	4 years	Educational psychology
	Sera	Bachelor degree	F	6 years	Developmental studies/General studies
	Koku	Bachelor degree	F	19 years	Home economics
TC_2	Kikae	Bachelor degree	M	8 years	Biology
	Ngichopasia	Bachelor degree	F	3 years	Developmental studies
TC_3	Ngicha	Bachelor degree	M	5 years	Biology
	Lautani	Bachelor degree	M	4years	General studies
	Ngianasia	Master's degree	F	25years	Home economics

Source: Field data

3.5   Data collection techniques

Dahlberg, Drew and Nyström (2001) elucidate that phenomenographic study is flexible; it has no specific methods for collecting data per se. This provides a room for a researcher to borrow other types of data gathering techniques found in social science research approaches. Additionally, Marton (1981) illuminates that in phenomenographic research face-to-face interview is the major technique for data collection. Thus, an interview was deemed right for this study. The following section discussed briefly the technique used to collect data in this study.

3.5.1 Interviews

The interview is a highly used data collection technique in qualitative research (Bryman, 2004). Kothari (2004) defines an interview as a method of collecting data that involves presentation of oral-verbal stimuli and reply in terms of oral-verbal responses. Likewise, Kvale (1996) asserts that interview gives a room to the participants to express and share their experiences on a certain phenomenon from their own understanding and perceptions. In this study, interview technique was used to interrogate the tutors in order to deepen the understanding of the phenomenon from their own perspectives. Moreover, interviews are credited to be a strong method for allowing the researcher to capture both language conversions and actions of the participants through face-to-face conversations. In this study, semi-structured interview (Kvale, 1996) was used to collect data from eight tutors in three teachers' colleges. Although the interview sessions followed the interview guide (see appendix 9.3), probing questions were used to allow the participants to give more clarifications of the topic under the study. For example, phrases like these were used "why do you think you are not competent to teach SRE at teachers' college? "If SRE is not well integrated, how this situation can be rectified?"

The interview guide contained questions which initially prepared in English and later translated into Kiswahili (the official national language) which is the language used in data collection. The interview guide comprised the following three main sections. *Section A: Introduction*: This section enabled the researcher to provide introductory explanation about the study.

Section B: Personal information of tutors: In this section, participants were asked personal information that deemed important for understanding their answers during the interview sessions. Information about age, religion, educational level, teaching qualifications, teaching experience and teaching class were gathered from the participants.

Section C: Interview guide questions: This section was divided into three parts contained questions formulated on the basis of the research questions and theoretical perspectives underpinned this study. The first part contained one question focusing to explore the extent to which the participants understand the concept SRE. The second part contains seven questions formulated to investigate the perceptions of the tutors towards the integration of SRE into teachers' colleges in Tanzania. The third part contained five questions aimed to explore tutors'

experience, confidence and comfort in teaching SRE in their subject disciplines and enabled the tutors to suggest any other ways they thought can improve the provision of SRE in teachers' colleges in Tanzania.

Apart from the flexibility of the interview guide to enable the researcher to gather information from the participants to answer the research questions, still it was limited to few questions explored knowledge of the tutors on sexual health education. Although, the researcher managed to use probing questions during the interview sessions to gather more information from the participants, these questions were not included on the interview guide.

Nonetheless of the advantages of interviews, the method is criticized for not enabling the researcher to balance between giving time for the participants to develop their own line of thinking and making reflections on issues under investigation and keeping the conversations going on (Larzén, 2005 as cited in Jidamva, 2012). Bearing this in mind, participants were given time to think and make reflections on the questions posed to them before responding during the interview sessions.

Even though the interview is regarded as the main method in collecting data in phenomenographic research, yet it was difficult for the researcher to triangulate interviews and observation method to enrich data for this study. Observation method was not used in this study due to limited time, shortage of funds and scope of the study. Besides this limitation, still interview method was successful to gather information to explain the general picture how tutors experiences SRE in teacher education curriculum in Tanzania. The next section explains how data collection was conducted in this study.

3.6   Data collection process

Data collection processes started after written permissions were obtained from educational authorities in Tanzania. The first stage during data collection involved visiting teachers' colleges selected for this study. This stage was very important because enabled the researcher to familiarize with the colleges, to explain the intention of the study and to obtain permission from the teachers' college principals (head of the colleges) to carry research in teachers' colleges selected for this study. This is a vital stage because nobody is allowed to go into teachers'

colleges and carry any activity without written or oral permission from the principals who are in charge of all administration activities.

The second stage involved the researcher to be introduced by the principals to the staff members and allowed to explain the intention of the study. The academic deans in teachers' colleges assisted the researcher in getting tutors to be approached for interviews. All the tutors approached agreed to participate in this study. The researcher enabled to convene a meeting of all tutors who were involved in this study at each teachers' college. At each meeting, a researcher was able to tell briefly his background and explained the purpose of the study. Being a teacher and a researcher in Public health in this study was received with different feelings to some participants. They assumed that the researcher knows a lot about SRE in teachers' colleges since he has worked as a teacher for more than eight years in secondary schools in Tanzania. To make it clear, the researcher told the participants that he came to seek their experiences of SRE into teacher education curriculum. This can be considered as among the factors that might have been shaped the participants' statements during the interviews. Furthermore, the research information sheet (see appendix 9.5) was clearly clarified to the participants and appointments for interviews were arranged with the participants. The participants provided written consents to the researcher for their participation in this study.

All interviews were conducted in Kiswahili, audio-recorded and notes taken. Due to the sensitivity of the topic investigated, the interview sessions were conducted in the private rooms within the college premises where tutors were anticipated to feel free and comfortable to talk to the investigator given their familiarity with the setting. The discussion lasted for approximately 40 minutes for each participant. The next section summarizes the data processing and analysis processes.

3.7   Data processing and analysis

The aim of data analysis in phenomenographic study is to expose how individuals differ in the ways they perceive or conceive the investigated phenomenon (Yates, Partridge & Bruce, 2012). Data analysis was guided by the theoretical ideas underpinning this research. In this study, tutors assumed to have their own views and perceptions towards the integration of SRE into teachers'

education curriculum and these would be elicited and elaborated through interviews (Dahlberg, Drew & Nyström, 2001). In order to capture well the ideas and become familiar with meaning of the answers given by the participants towards the phenomenon studied, audio-recorded interviews were transcribed verbatim in original language (Kiswahili) used to collect data and analysed. Yates, Partridge and Bruce (2012, p.103) put forward that "there is no single process or technique prescribed for the analysis of phenomenographic data and an array of approaches are reported in the literature". Therefore, data analysis in this study followed six phases of theoretical thematic analysis as proposed by Braun and Clarke (2006) and summarized in table 3 below.

Table 3. Phases of Thematic Analysis

Phase	Description of the process
1. Familiarization with data	Transcribing data (if necessary), reading and re-reading the data, noting down initial ideas.
2. Generating initial codes	Coding interesting features of the data in a systematic fashion across the entire data set, collating data relevant to each code.
3. Searching for themes	Collating codes into potential themes, gathering all data relevant to each potential theme.
4. Reviewing themes	Checking if the themes work in relation to the coded extracts (Level 1) and the entire data set (level 2), generating a thematic 'map' of the analysis.
5. Defining and naming themes	Ongoing analysis to refine the specifics of each theme, and the overall story the analysis tells, generating clear definitions and names of each theme.
6. Producing the report	The final opportunity for analysis. Selection of vivid, compelling extract examples, final analysis of selected

extracts, relating back of the analysis to research question and literature, producing a scholarly report of the analysis.

Source: Braun & Clarke (2006, p.87)

Following Braun and Clarke (2006) phases, interview transcripts were read several times to obtain the general meaning demonstrated by tutors' statements. To make sure that the meanings expressed by tutors are not altered, interview transcripts were supplemented by the field notes taken during the interviews. Statements were initially grouped based on their similarities and differences. Then grouped texts were read again and again to identify sub-categories and categories emerged and were labelled with different names. The interview guide helped as an aid to sort out the tutors' statements to establish meaningful concepts that were further grouped to form major categories. Names for the sub-categories and categories originated from the meaning demonstrated within participants' statements. For example, the name of sub-category labelled "stigmatization" originated from the meaning formed within the statements of the participants; Ngicha and Sera. However, in some cases, the names of the themes, categories and sub-categories were labelled to give insight into people's views.

In another approach, labelling and naming of the themes and categories originated from names or concepts from the theoretical framework adopted in this study and presented in chapter 2. For instance, the name of the theme "Tutors' perspectives regarding challenges and setbacks they face in teaching SRE" is an example of naming categories employed under this approach. Critical analysis of the sub-categories and categories continued until four major themes emerged in this study. Finally, the tutors' statements used to support the findings were translated into English without altering the original meaning.

3.8   Research quality issues

The ways in which validity and reliability might be treated in qualitative studies different from quantitative studies has been debated (Bryman, 2008). Qualitative studies have been regarded by positivists as less scientific (Liang, 2010) when quality issues comes, while Kimaryo (2011, p.80) emphasizes that "the findings of scientific research are valuable when the researcher is able to prove the validity and reliability of the results". Validity and reliability are research quality

terminologies used widely in quantitative researches rather than in qualitative studies. However, Guba and Lincoln (1985) suggest that qualitative study should be evaluated based on its trustworthiness which is made up of four aspects having their equivalent to criteria in quantitative research. These are; *credibility* which corresponds to internal validity, *dependability* which is similar to reliability, *confirmability* which relates to objectivity and *transferability* which is parallel to external validity (generalizability). Furthermore, Botchway (2010) elucidates that the quality of research findings in qualitative research is approached differently compared to quantitative research. The next paragraphs explain how trustworthiness has been achieved in this study based on the criteria suggested by Guba and Lincoln (1985).

In order to attain credibility in this study, data triangulation method was used. Triangulation method assumes that no single approach ever really validates a particular problem (Bryman, 2004). Data triangulation has regarded to have an advantage in nature and amount of data collected for interpretation in assuring credibility in qualitative studies (Shenton, 2004). Therefore, in this study tutors with different educational backgrounds and experiences of teaching at teachers' colleges were interviewed individually. Their experiences on teaching subjects containing SRE highlighted different aspects on provision of SRE within the teacher education curriculum. By interviewing tutors, the researcher believed to have attained a high degree between the concepts have been used and the findings.

Furthermore, during data analysis process, transcribed interviews were read several times and compared by notes taken by the researcher during the interview sessions. Interviews were also compared against interpretations made, the themes, categories and sub-categories emerged were discussed with the study supervisor and representative quotes from transcribed interviews are presented. Moreover, the researcher's background as a teacher in secondary school in Tanzania has helped to increase the credibility of this study.

Dependability shows how the researcher carried out the investigation in a truthful way to reach to the results. Open explanations on how the study was carried out increases transparency to the reader to judge the findings and welcomes criticisms from the reader where is applicable. Therefore, the whole process on how final results have been reached in this study has been guided by various principles and theoretical framework underpinned this study.

Positivists do argue that it is difficult for knowledge generated from qualitative research to be generalized beyond the social context (Shenton, 2004) in which the study is conducted. Furthermore, Shenton (2004) points out that when findings of a qualitative study are specific to a particular context and individuals, it is difficult to claim that the findings and conclusions reached in the study are applicable to other situations and populations. Also, Scott and Marrison (2005) in Meena (2009) assert that the issues of transferability of results in qualitative studies requires a thick description of the setting in which the research is being conducted. Considering all these arguments, it is difficult for the findings from this study to be transferred (generalized) to other settings because the study was conducted in a specific context with specific characteristics. In this study, purposive sampling technique used in selecting the teachers' colleges and the participants based on criteria as elaborated earlier in this chapter. Also, some information describing the setting of the study and the participants remained confidential to the researcher only and no one can access them as stipulated in the ethical considerations guided this study.

In order to maintain confirmability in this study, the researcher has tried several times to reduce the biasness and remained objective when collecting, analyzing and interpreting data although Bryman (2008) argues that it is difficult to attain total objectivity in qualitative studies. Through balancing analysis work and quotes from the participants helped to strengthen the results. However, the researcher admits that in some cases, analysis and interpretation of data might have involved a degree of subjectivity.

3.9   Ethical Considerations

Ethics issues will emerge in any research which involves people (Kimaryo, 2011). Ethical issues in research must be considered to protect both the researcher and the participant from the potential harms that may be caused as a result of the study (Bryman, 2004). Kvale (1996) points out three ethical considerations to be taken into consideration when one is conducting a research which involves people. These are informed consent of the participants to participate in the study, confidentiality and consequences. Furthermore, Masson and Bramble (1997) add that a researcher is responsible for acknowledging literature source and people who have participated

in the study. Thus, in this study several ethical considerations were maintained as discussed below.

Research ethical approval of conducting this study obtained from the Norwegian Social Science Data Service (NSD) and the permission from Hedmark University College were earlier obtained (see appendices 9.1 and 9.6). After these being accomplished in Norway, permissions of gathering information from the targeted population in Tanzania were granted from Tanzania Commission for Science and Technology (COSTECH) and the offices of the Regional Commissioners in two regions where data was collected (see appendices 9.2 and 9.7). Furthermore, oral permission was given by the teachers' college principals by introducing the researcher to the participants prior to the commencement of data collection processes. Written consents were obtained from all participants prior to their participation in this study after they have been briefed about the aim of the study and their rights of participation.

To maintain confidentiality and protect the privacy of all participants involved in this study, no information collected was or will be disclosed to any other person. Names of the regions, teachers' colleges and participants are kept anonymous. Similarly, no private data identifying the tutors and their colleges included in this report, instead pseudonymous names of the tutors were used in presenting their statements. The participants were informed on their freedom and voluntarism of participating in the study and the right to choose not to continue with the study at any time whenever they decided (Silverman, 2000). This information was clearly stated on the research information sheet. Fortunate enough, there was no participant who withdrew from the study. The results from tutors' voices are presented in chapter 4 following the guidelines discussed in this chapter.

4. Presentation of the findings

The main aim of this study was to investigate perceptions of tutors in teachers' colleges towards the integration of sex and relationships education into teacher education curriculum in Tanzania. The presentation of the findings has been structured reflecting research questions stated in chapter one. The findings are presents in the following major themes:

4.1 Tutors' perceived meaning and goals of SRE

4.2 Tutors' perspectives regarding the integration of SRE into teacher education

4.3 Tutors' perceptions on the provision of SRE in teachers' colleges

4.4 Tutors' suggestions for improving provision of SRE in teachers' colleges

Themes are presented and described with reference to the concepts that underpin them and illustrated by examples from the interview data. Each quotation contains the name and gender of participant (e.g. James, M).

4.1 Tutors' perceived meaning and goals of SRE

The first research question seeks to find out how tutors understand the concept SRE. The aim of posing out this question is to explore the ways tutors' are conceptualizing and perceive the meaning of SRE. There is direct association between the way a tutor understand the concept or phenomenon and how the concept is communicated to his or her teacher-students. A clear understanding of the concept simplifies its elaboration. Therefore, understanding how tutors are conversant with the concept SRE is very important because it reflects how they teach or transmit that knowledge to the teacher-students in teachers' colleges. The findings indicate that tutors displayed a diverse understanding of the meaning and goals of SRE in teachers' colleges. Almost all participants thought that SRE is focusing on young people.

Some tutors thought that SRE is concerned with teaching young people about gender difference (being a male or female), biological development of their bodies and relationships between two genders. This group of tutors thought that SRE aims to equip young people knowledge and skills that enable them to develop self-awareness of taking care themselves in their daily life. The following excerpts below are examples of how this group of tutors described SRE:

When we talk about sex education we refer to education that helps one to understand what sex in general is about. Sex is a state of the biological nature of being a male or

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female. And when we talk about relationships education, it is education which explains how these two sexes [male and female] are interacting. Therefore, relationship can be of the same sex or of the opposite sex (Sera, F).

In short, sex and relationships education is that kind of education given to the students to help them to recognize changes in their sexual matters especially from the time they are at puberty stage. It helps them to know whether they are girls or boys and understand their gender roles and how to deal with challenges they are facing during that period[puberty] (Ngicha, M).

The tutors' perceived meaning and goals of SRE tend to narrow the scope of this concept. They described SRE as education which aims to explain differences in two sexes, that means being a female or male in nature and enable young people to develop gender awareness and identity.

Other tutors perceive SRE as education concerned with protecting young people from early pregnancies and sexually transmitted infections such as HIV/AIDS and other STDs through promoting safer sex. This group of tutors viewed SRE as a strategy of equipping young people with knowledge and skills that can enable them to prevent and reduce sexual health problems and preparing them to make informed choices for healthy sexual life. This is affirmably illustrated by the tutors' statements below:

This education [SRE] helps a person to be aware with his body and even be careful in his or her life. In some cases it helps young people to gain knowledge on how to tackle some problems they are facing at puberty stage such as sexually transmitted diseases and issues related to early pregnancies and live according to the norms and customs in their societies (Koku, F).

This education [SRE] is very important and I will explain in two main ways. One, it supports young people to develop self-awareness. Two, it helps them to understand the importance of relationships in their life. An example is young people are growing up and usually have misconceptions about the changes in their bodies during puberty stage. Most of them do not know much about changes in their bodies and are not aware about issues like pregnancies. Therefore, sex and relationships can enable them to gain

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knowledge on sexual health issues and helps them to be aware of and to prevent sexual diseases (Ngicha, M).

However, tutors seem to have a fairly understanding of meaning and goals of SRE as demonstrated in the statements above, they have narrowed the scope of definition of SRE. In all definitions given out during the interview session none of the tutors mentioned intimacy, family life, sexual communication and emotional health as aspects of SRE. Even though there are common characteristics in SRE definitions mentioned by tutors, variations in understanding of the goal of SRE to the young people have been demonstrated within these definitions.

4.2 Tutors' perspectives regarding the integration of SRE into teacher education

The second research question in this study aimed to explore the tutors' perceptions of the integration of SRE into teacher education. In this context, integration refers to 'linking or making connections across the disciplines' (Kimaryo, 2011, p.98). In this study, integration of SRE refers to the situation where SRE components are included and taught within other subjects in teacher education curriculum. Findings for this research question were presented into three themes. These are: tutors' perceptions of the integration of SRE into teacher education curriculum, tutors' views about the amount and importance of SRE in teachers' colleges, and tutors' preferred educational level to introduce SRE in Tanzania.

4.2.1 Tutors' perceptions of the integration of SRE into teacher education curriculum

Teaching of SRE concepts within teacher education curriculum depend very much on the ability how tutors understand to link and interpret the SRE contents integrated in the subjects they are teaching. When tutors were asked to explain the extent to which SRE is integrated in their subjects, a difference was noted between social science and natural science subjects in terms of amount of contents integrated. Tutors in teachers' colleges specialized in social science subjects said that only a few concepts related to SRE were integrated in their subjects' syllabi while tutors from natural science based teachers' colleges mentioned Biology and Home economics to have many SRE contents in their subjects' syllabi.

Moreover, when tutors were asked to describe the ways how SRE is integrated in their subjects' disciplines their experiences varied from social science to natural science subjects. The statements of the tutors teaching natural science subjects show that SRE is well integrated in the syllabi. These tutors were focused on the ways how contents are integrated as subject matter related to SRE. Here the term subject matter refers to the content that needs to be taught in a particular subject as spelt out in the syllabus. Furthermore, tutors teaching natural science subjects said that they can identify SRE topics easily due to the ways how they are integrated in their subject syllabi. For example, one tutor said that [...] *in Biology, SRE topics are well arranged in the syllabus and can be identified easily" (Kikae, M).*

The tutors teaching social science subjects indicated that SRE contents are not well integrated in their subjects and difficult to identify them. Also, their statements indicated that most of the topics were not well linked together in some topics. This means that, there is no clear link between SRE topics and other topics in the subject. A General studies tutor said that:

> *[SRE] topics are not well integrated as they don't show connections of one topic to another. For example, in General studies, you will find concepts like 'what is sex', 'what is gender and relationships', 'courtship and marriage', 'family', and 'HIV/AIDS' but we do not teach in depth and are [...] not well integrated in the syllabus (Sera, F).*

However, social science tutors claimed to find that integration of SRE in their subjects' specializations do not match with nature of some subjects where is integrated and making teaching some concepts to be difficult. This can be supported by the following tutor's utterance as follows:

> *[...] some topics are difficult to teach. For example, you can find that in my Civic subject I am required to teach about body changes or sexually transmitted diseases like HIV/AIDS, these are biological concepts. They are supposed to be in Biology or natural science subjects only (Lautani, M).*

In this theme, tutors seem to have variations on their experiences of the integration of SRE into teacher education curriculum. Tutors who teach natural science subjects are comfortable with the ways and extent to which how SRE topics are integrated in their subjects. Tutors teaching social

science subjects seem to be dissatisfied with the ways how SRE is integrated in their subjects and it makes difficult for them to identify SRE contents in the syllabi.

4.2.2 Tutors' views about the amount and importance of SRE in teachers' colleges

The interview discussions revealed that there was little amount of SRE integrated in social science and natural science subjects taught in teachers' colleges in Tanzania. Tutors showed dissatisfaction with the quantity of SRE topics currently offered in teacher education curriculum. Even though there was no comparison of amount of SRE within social science and natural science subjects, tutors acknowledged that many SRE topics are in natural science subjects. One respondent said that:

> *It is not easy to quantify the amount of sex and relationships education in teacher-education curriculum; this is because this education [SRE] is given in different subjects. You know, topics are integrated into Biology, Civics, Home economics and even in General studies and they [...] differ in length and contents [...] (Ngicha, M).*

When tutors were asked why they cannot cover a lot of SRE in their subjects they are teaching in teachers' colleges, they blamed the syllabus of not allowing them to do so. Without explaining what consequences they might face if they will dare to teach beyond the syllabus. One tutor remarked as follows:

> *[...] even in Biology, we don't go deep in some topics related to sex and relationships education because the syllabus don't allow us to do so. We teach what is instructed in the syllabus only. For example, when you teach a topic like HIV/AIDS, you will explain the meaning, ways of transmission and negative consequences. You don't go further even though there are a lot of things that can be covered in this sub-topic (Kikae, M).*

Tutors thought that provision of SRE is concerned with development of knowledge and skills on self-awareness of the youth. Almost all participants in this study explained that the provision of SRE into teacher education curriculum aimed at developing knowledge and skills on self-awareness to the youth. Tutors said that SRE is crucial for enabling the youth to develop knowledge and skills that enable them to be aware of their gender and gender roles. The aspects

which the tutors were concerned within this category were the development of gender identity among the adolescents. Tutors assume that, when adolescents gain knowledge and skills on SRE enable them to live according to the norms and customs of the society they belong to. One tutors described the importance of providing SRE to the youth in this way: *This education [SRE] helps a person to be aware of his/her gender […] and knowing gender roles will help him/her live according to the norms and customs in the societies (Koku, F).*

Other participants saw SRE as a way of developing positive attitude towards safe sexual lifestyle behaviours. When discussing about the importance of SRE, for example, some tutors consider the provision of SRE as a "preventive weapon" that will help the adolescents to avoid risks resulting from unsafe sexual behaviours. As the adolescents are living in the community where they are facing HIV/AIDS and early pregnancies and it is not possible to stop them to not engaging into sexual intercourse, tutors are insisting that teacher-students at the teachers' colleges should gain knowledge and skills that will be imparted to students in primary and secondary schools to enable them to say "no" to unsafe sex. One tutor said that:

> *You know what, if we say that children in primary schools are not engaging in sexual intercourse, we are cheating ourselves. Today, there are a lot of reported cases of pupils in primary schools to engage in sexual intercourse with older people especially in urban areas. The situation is worse. Think of these young girls in primary schools, do you think are they well knowledgeable about risks resulting from HIV/AIDS or pregnancies at their ages? So, what are we hiding? If we need to protect them from STIs, therefore, SRE should be given to our teacher-students at this college, they will transfer it to students in primary and secondary schools when they will be employed (Ngianasia, F).*

In addition, participants saw the potential benefits of SRE to be provided hand in hand with physical education in order to help teacher-students in teachers' colleges to gain skills that will enable them to help adolescents to cope with sexual drives through physical body exercises. The following statement given by one of the participants expresses this suggestion:

> *I have studied physical education from [xx] teachers' college in my diploma course and I know and appreciate the importance of body exercises to the adolescents. Therefore, it will be of value if all teacher-students in teachers' colleges are exposed to physical*

education trainings that will help them to teach their students to cope with sexual drive through body exercises (Koku, F).

4.2.3 Tutors' preferred educational level to introduce SRE topics

Tutors were asked to propose the level of education which is suitable for introducing SRE topics. Most of the tutors preferred SRE to start at primary school level. They mentioned from class five to class seven (age 11-13) and they wanted most of the topics given at this level should cover basic knowledge on STIs, HIV/AIDS and contraceptives. The tutors remarked:

Currently the situation is terrible. I find it better for this education [SRE] to be given from standard five or seven in primary schools. This is because at this age children are growing and changes in their bodies begin at this time. [...] and most of them have started having sex in primary schools (Kikae, M).

Sex and relationships education should be taught from primary school. Teaching those young people about sex and relationships education will enable them to develop self-awareness quickly at early stage and build a good foundation for understanding changes in their bodies when the time will come (Ngianasia, F).

Even though many of the participants supported a primary school to be the appropriate education level to introduce SRE, one tutor is still worrying about teaching SRE to the primary school pupils that it might cause early initiation of sexual intercourse and increase risks resulting from unsafe sex to them. She said that:

From my perspective, I suggest that this education should be taught from secondary schools to higher institutions and not in primary schools. It is difficult for pupils in primary schools to understand the real meaning of sex and relationships [...]. This education if not well prepared and delivered in a careful way, can lead young people to initiate sexual intercourse at early age (Sera, F).

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4.3 Tutors' perceptions on the provision of SRE in teachers' colleges

The last research question sought to explore how tutors integrate SRE components into the subject content and the methods which they employ in delivering SRE to the teacher-students in actual classroom practice in teachers' colleges. Although there was no classroom observations during data collection, interviews guide was formulated to lead discussions on the knowledge and skills of teaching SRE within subject disciplines. Additionally, methods and techniques used in teaching SRE topics, challenges and setbacks for teaching SRE in teachers' colleges were explored. The results from the tutors' interviews were presented into the following sections.

4.3.1 Tutors' knowledge, skills, methods and confidence in teaching SRE topics

The analysis of the tutors' responses concerning their knowledge and skills of teaching SRE in their subject disciplines showed that most of the tutors were less knowledgeable and they are lacking skills to teach SRE topics effectively to teacher-students. Tutors claimed of not being well trained at the university level to teach topics related to SRE in teachers' colleges. To emphasize this, tutors said:

> *I can admit that I don't have enough knowledge and skills to teach sex and relationships education at teachers' college level. I have not well prepared at the university to teach topics related to sex and relationships education in my teaching specializations. We were taught general principles of teaching and not to teach specific topics especially these complex topics (Ngichopasia, F).*

> *I don't feel competent to teach sex and relationships education topics because I am not well informed in the details of some topics. I studied biology in lower secondary schools only and now I found that I am supposed to teach topics containing some elements related to biology. For example, I am required to teach sexual transmitted diseases in Civics, I find it is difficult to teach well this topic because I don't know well the subject (Sera, F).*

Even though tutors said that many SRE topics are in science subjects, tutors teaching science-based subjects such as Biology indicated that training at the university level do not cover many

topics related to SRE. What is mostly insisted and covered in educational studies at the university level are philosophies and pedagogies of teaching. There is less subject contents taught at this level. The following quote from the interview session is standing as evidence.

> *[…] even in Biology subject at university level do not cover many issues related to sex and relationships education. We are exposed on different contents that we have covered in advanced level [upper secondary school] and how to teach those topics […] (Kikae, M).*

Some tutors said that they were not feeling competent to teaching topics related to SRE due to lack of basic knowledge on concepts used in SRE. However, tutors said that, they were struggling alone to find the ways of implementing the syllabi even though they were facing difficulties in teaching the SRE related topics. One tutor said that:

> *[…] teaching is an art, therefore, I struggle myself to improve my knowledge on sex and relationships by searching materials from the internet or from books and magazines. Currently, there are Fema magazines, these magazines are distributed freely in education institutions by a non-governmental organization. I learn a lot from these magazines because they have many issues concerning SRE for the adolescents […] (Ngianasia, F).*

The majority of participants mentioned participatory method as their main way of delivering contents related to SRE. This method reduces the notion of a teacher to be regarded as only source of knowledge and a learner is not considered to be a recipient only during lesson sessions in the classroom. It is a method which is engaging learners to interact with a teacher and learning materials. Methods used were questions and answers, small group discussions, team teaching, classroom demonstrations and debate. Only one participant mentioned role plays and drama as participatory teaching techniques because she has basic knowledge on theatre arts. During the interview sessions, participants were asked why they use participatory methods. Apart of acknowledging the challenges of using participatory method in a big class, some tutors pointed out that participatory method enable teacher-students to develop independent learning skills. Also, participatory methods are emphasised in teachers' colleges in order to enable teacher-students to learn how to apply these methods of teaching in their future careers. Some of the responses were as captured below:

Even though it is challenging to use participatory method in a big class but learners have enough time to explore themselves the topics they are studying. This is emphasized in teacher-education curriculum and spelt out in the subject syllabus to use participatory methods. For example, teacher-students can have a debate on the motion concerning pregnancies among secondary school girls or dating issues in teachers' colleges and they may come up with different opinions over the topic (Sachi, M).

[…] techniques like questions and answers, discussions, demonstrations and debate give a chance to teacher-students to participate fully in the lesson instead of waiting to gain everything from their tutors. We don't use spoon-feeding techniques to adult learners. They need to develop skills of thinking and find solutions to problems. Also, these are future teachers; they should learn practically how to apply participatory method in teaching (Ngianasia, F).

Even though there was no classroom observations to observe how tutors are applying participatory methods in their teachings, their responses show that participatory methods have positive impacts to teacher-students. On the other hand, tutors were asked about their comfort of teaching controversial and difficulty topics in SRE such as homosexuality. When the participants were asked if they would find it easy or difficulty to teach homosexuality topic in case is to be included in the SRE syllabus in teacher education. None of the participants displayed confidence of teaching issues related to this topic due to traditional and cultural barriers. One of the participants illustrated:

Mmmh! This is another issue. I can't manage to teach homosexuality in the classroom. You know this is a sensitive issue to discuss in our culture. Homosexuality has been a controversial thing and is regarded unethical to talk in our tradition. This is a western issue having no value to Tanzanian culture. I think it can be difficult to almost all people in Africa to discuss it openly. I am sure if it will be included in the sex and relationships education curriculum is going to face a big resistance from the people. For example, I don't think if teacher-students can tolerate to listen to issues of homosexuality in the classroom. It will be opposed by many, Christians and Muslims teacher-students. They will not understand me. Listen; do you remember what happened in Uganda…eeeh in

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2013 about homosexuality? Today, you cannot talk issues related to homosexuality in Uganda in the public hence otherwise a prison is welcoming you (Sera, F).

From the statement above, it shows that homosexuality a sensitive topic to discuss in Tanzania and in other countries in Africa. The inclusion of homosexuality in SRE curriculum can be received in different feelings and might be opposed due to negative perceptions people have over the topic. The sentence "*This is a western issue having no value to Tanzanian culture*" reflects that issues concerning homosexuality has regarded to be fussed in African culture from western countries. Tutors were asked about the challenges and setbacks they are facing when teaching topics related to SRE and their responses were presented in the next section.

4.3.2 Tutors' perspectives regarding challenges and setbacks they face in teaching SRE

The participants mentioned different challenges hindering smooth implementation of SRE in teachers' colleges. The challenges mentioned are related to policy and low status of the subject. These challenges are discussed below.

4.3.2.1 Policy related challenges

Challenges related to policy implementation could be categorised as a lack of clear policy guiding the provision of SRE within the teacher education curriculum and time allocated in the syllabus regarding teaching contents related to SRE.

All participants in this study said that they have never seen the guideline issued in 2004 by MoEVT in Tanzania to guide the provision of SRE in educational institutions. They said that the National Educational Policy of 1995 does not explain anything concerning the provision of SRE in teacher education curriculum. Tutors said that they teach only what is spelt out in the subject syllabus and not otherwise. This is exemplified by one tutor who uttered that:

> *[…] mmh! I have never seen the guideline you mentioned, and this is a challenge to many of us [tutors] and I am not sure, if my fellows have seen it either. But I will try to check if it is available in our library. You know, the National Education Policy does not say anything concerning sex and relationships education in teacher education and what I teach is only what is in the syllabus and not otherwise. (Koku, F)*

Although, participants did not state how lack of clear policy guiding the provision of SRE in teachers' colleges affect them in teaching, the situation seem to have impact in the implementation of the syllabus. In teachers' college TC_1, after being informed by the researcher on the presence of the SRE manual issued in 2004 by MoEVT, the principal (person in charge of the college) promised to contact the MoEVT in Tanzania to get the SRE manuals for his staff members who are teaching subjects related to SRE.

Most of the participants were not satisfied with time allocated in the syllabus for SRE topics. In teachers' colleges each period (duration of teaching a single lesson) is 40 minutes. The number of periods for each topic is shown in the subject syllabus. Tutors said that some teaching methods need enough time for effective teaching of topics in the syllabus. They claimed for some topics to be allocated fewer periods compared to the length of the topic. The tutors' complains on the time allocated for teaching topics containing SRE seem to limit the amount of knowledge related to SRE to be given to the teacher-students in teachers' colleges. Example of tutor's argument concerned with time is presented below:

> *You know some methods are time consuming, for example, group discussions need much time. If you are not careful you can spend a lot of time teaching few concepts. The time allocated in the syllabus for some topics does not match with the length of the topics (Sachi, M).*

4.3.2.2 Challenges related to low status of the subject

Challenges related to low status of the subject could be categorised as stigmatization, SRE not be a standalone subject, lack of support from the society and teaching and learning materials. These challenges are presented below:

Among the challenges about teaching SRE raised by tutors during the interview sessions stemmed from the tutors' experiences of teaching topics related to SRE. The main aspect in this category is *stigmatization*. Stigmatization here refers to the lack of support from other staff members. Some tutors pointed out that, sometimes tutors who are teaching topics related to SRE are regarded as hooligans. Also, tutors indicated that even teacher-students are not supportive,

some perceive SRE negatively. This tendency is demoralizing them from communicating SRE to teacher-students effectively:

> *The biggest challenge is a negative attitude on the topics related to sexuality. Many people have a negative view on these topics and even tutors do have the same attitudes. […] even tutors who speak about sexuality and relationships openly are seen as hooligan and immoral (Ngicha, M).*

> *When teaching topics containing sexuality issues to teacher-students, I need to be very open. If you decide to be open expect different perspectives from them. Some will be negative and others will be positive. If the topic is perceived negatively, makes the tutor to find it difficult to explain some of the components in the topics related to sexuality deeply. Also, some teacher-students may label you as a hooligan. This is because their perceptions towards sexuality issues are influenced by religion and cultural norms (Sera, F).*

Likewise, tutors were not sure if SRE can be support by parents when SRE will be integrated as a standalone subject covering a lot of contents in sexual health and sexual education. Tutors indicated that talking sexual issue in public is a taboo in Tanzania and parents are not well informed about goals of SRE in schools and they believe that provision of SRE can initiate early sexual intercourse to their children. One of the participants said:

> *It is true! Some parents are not supporting this education in Tanzania. You know, since "unyago" and "jando" (traditional initiation education to adulthood, jando for male and unyago for female) disappeared in our society, many parents are worried of the kind of education given to their children. Our traditions are not allowing sexual issues to be discussed in the public. These are private matters. It is a taboo. So parents are wondering how teachers can dare to talk those issues to their children. Listen, you know parents are part of educational stakeholders in Tanzania. I am not sure if they will support the idea of teaching sex and relationships education in teachers' colleges for 100%. Parents believe that this education [SRE] is teaching prostitution in the society. But all these are happening due to our traditions. That is all (Ngianasia, F).*

However, tutors said that SRE being integrated into other subjects in teacher education does not show priority to this education. SRE could have been a standalone subject and made compulsory to all teacher-students like other subjects taught in teacher education curriculum. Tutors said that at the present the SRE contents/topics integrated in the subjects they are teaching are not well organised since they are scattered in different social and natural science subjects. Although this study did not analyse the depth of the SRE contents in the subject syllabi, tutors said that most of the SRE topics are to give basic knowledge to teacher-students and emphasise is on how to teach those topics in primary and secondary schools. Moreover, tutors sought that if SRE will be an independent and compulsory subject in teachers' colleges there will be a subject syllabus guiding them; what contents should be taught, how to teach them and all contents in the syllabus will be well covered. The following extracts illustrate more on these arguments:

> *You know it is like there is no sex and relationships education in teachers' colleges, what is taught is what is shown in Biology syllabus, but if you analyse the contents you will find that the subject matter to be covered is less compared to the level and ability of our teacher-students. We mostly teach how to teach, mmh I mean we teach more methods and techniques rather than contents. We assume they have studied contents in advanced secondary school. So we don't teach things outside the syllabus (Kikae, M)*

> *Our education curriculum is spiral. This means that basic concepts are learned first before the complex one. I think it will be better if sex and relationships education will be taught as an independent subject from primary schools to university level. It will have its own syllabus; textbooks, teaching aids, and teachers will be trained to teach that subject effectively (Koku, F).*

> *[…] mmh! I think if SRE will be taught as a separate subject, eeh! All contents allocated in the syllabus will be covered because we are required to teach everything indicated in the syllabus (Ngichopasia, F).*

Tutors mentioned shortage of teaching and learning materials as among the factors contributing low status of SRE in teachers' colleges. They said that, even the existing teaching and learning materials were out-dated compared to recent changes in science and technology in the globalized world. Books were mentioned to be main source for teaching topics related to SRE in Civics,

General studies/Developmental studies and Home economics subjects. Only few models were mentioned in Biology subject. Concerning lack of teaching and learning materials, one tutor said:

> *In order to teach well a number of concepts on SRE to teacher-students, teaching aids are very important. We don't have enough teaching and learning materials to teach sex and relationships education to teacher-students. We have few books and models to use in teaching topics related to sexuality in Biology and Home economics (Ngicha, M).*

Teaching and learning materials for each topic in all subjects in teacher education curriculum are suggested in the syllabi. Tutors considered lack of teaching and learning materials as a result of poor planning at the ministerial level. They are wondering how possible to design and suggest teaching and learning materials that cannot be obtained easily and why educational authorities are not putting efforts to solve this problem in teachers' colleges. This is problem have a multiplier effect in the whole process of transferring knowledge and skills in education system in Tanzania. This does not end in the teachers' colleges only; their effects are going a far to pupils and students in primary and secondary schools where teachers graduating from teachers' colleges are assigned to teach. This can be seen from the following interview extracts:

> *Teaching and learning materials are suggested for each topic in the subject syllabus. For the case of sex and relationships education topics, some of the teaching aids suggested in the syllabus are difficult to be obtained in our local environment. Imagine, in the syllabus it suggested to use a video tape showing people affected with HIV but a college has no even single equipment for video show, how are you going to cast it? I can say this is poor planning from the curriculum developers (Sera, F).*

> *[…] the effects of not using relevant teaching and learning materials to teach SRE in teachers' colleges do not end up here. The teacher-students who graduate here will fail to teach effectively the topics related to sex and relationships education in primary and secondary schools (Kikae, M).*

4.3   Tutors' suggestions for improving provision of SRE in teachers' colleges

Tutors suggested how provision of SRE in teachers' colleges can be improved. Their suggestions include recommendations for: the need to revise existing national education policy, training for tutors and provision of teaching and learning materials. All these suggestions are related to policy implementation as they depend on the implementation of government's policies in education sector. The paragraphs below give more details on these suggestions.

Teacher education in Tanzania is guided by the National Education Policy of 1995, education regulations and circulars issued by the government through the MoEVT. Most of the participants spoke about the revision of existing National Education Policy in order to enrich the teacher education curriculum with in-depth contents of SRE. They said that, the current National Education Policy does not state in details issues concerning SRE. Tutors suggested that, the MoEVT, the Ministry of Health and Social Welfare and Ministry of Community Development, Gender and Children should work together to find out what contents of SRE should be taught in primary and secondary schools. They said that the contents that will be included within the primary and secondary school curricula should be included in the teacher education curriculum at both teachers' colleges and university levels. The following extract illustrates more on inclusion of all levels of education:

> *It will be better if the government will involve all education stakeholders to decide what should be included in the curriculum and how to implement it. The Ministry of Education and Vocational Training, The Ministry of Health and Social Welfare and Ministry of Community Development, Gender and Children can sit together on the round table and come out with one policy guiding the provision of SRE in schools and higher education institutions in Tanzania (Ngichopasia, F).*

Also, the participants suggested in-service training for tutors through seminars and workshops. They argued that, since they are required to teach SRE within the teacher education curriculum, trainings should be given to all tutors regardless of the subjects they teach at teachers' colleges. They argued that training to teach SRE topics will improve their teaching ability and also will reduce stigmatization to tutors teaching subjects containing sexual issues. In-service trainings are

acknowledged to make teachers up-to-date and improving their knowledge and professional skills in education system. The statements given by tutors during the interview express their need for further training:

> *To tell you the truth, I do not think that I have enough knowledge and skills to teach sex and relationships education to teacher-students. I teach what I know. Therefore, I need to be trained to teach these topics [topics related to SRE] at teacher education level (Lautani, M).*

> *My suggestion is that, tutors should be given in-service training on how to teach SRE in teachers' colleges and these trainings should include all tutors regardless of the subjects they teach in teachers' colleges. They can be provided through seminars and workshops. This will help to minimize stereotyping shown to tutors teaching topics related to SRE in their subjects (Ngianasia, F).*

Furthermore, tutors insisted on the provision of teaching and learning materials in teachers' colleges. They suggested that in order to improve teaching and learning of SRE topics, there should be modern teaching resources. Some tutors spoke about the use of computers, projectors and internet facilities. They explained the importance of using modern equipment in helping teacher-students to gain knowledge and skills on the topic related to SRE. Also, they emphasised on the MoEVT to supply teaching and learning materials in government owned teachers' colleges. The following utterance is an example to express the tutors' claims.

> *To improve delivery of this education [SRE] is essential to have modern equipment that will help college students understand better the lesson. Equipment like computer, projector and even internet facilities will help both tutors and teacher-students to gain more knowledge on sex and relationships (Kikae, M).*

From the tutors' perspective, several initiatives should be taken to ensure distribution of teaching and learning materials in teachers' colleges. The presence of teaching and learning materials will help to increase confidence to tutors and improve the quality of education provided to teacher-students.

4.4.1 Concluding remarks

The findings from three research questions have been presented in this chapter. In the first research question, the findings show that understanding of the meaning and goals the concept SRE in teacher education curriculum vary among tutors. These variations indicate that their understandings of the meaning and goals of SRE were not consistent and their understandings of SRE were limited (partly with an emphasis on biological aspects of SRE) and SRE as preventive education. The findings for the second research question reveal how tutors perceive the integration of SRE into teacher education and how their perceptions are likely to shape the ways they teach SRE in teachers' colleges. Furthermore, the findings for the third research question show what challenges tutors are experiencing when teaching SRE in subjects where SRE is integrated and suggestions how provision of SRE in teachers' colleges can be improved. The next chapter presents further discussions of the results in highlights of the three research questions.

5 Discussion of the findings

This qualitative study aimed to fill a gap in tutors' knowledge about SRE, status of SRE in the teacher education curriculum and provision of SRE in teachers' colleges in Tanzania. The study explored tutors' experiences of SRE in Tanzania. This chapter will discuss the findings provided in chapter four in relation to the existing literature. The discussion will be done focusing on three research questions which this study sought to answer. The discussion starts with the tutors' perceived meaning and goals of SRE. This will be followed by a discussion of tutors' perspectives regarding the integration of SRE into the teacher education, tutors' perceptions on the provision of SRE in teachers' colleges and tutors' suggestions for improving provision of SRE in teachers' colleges. Finally, a discussion of the strengths and limitations of this study are presented at the end.

5.3 Tutors' perspectives of the meaning and goals of SRE

The findings of this study show that tutors had perspectives of the meaning and goals of SRE in teachers' colleges. Their understanding of the meaning and goals of SRE were not consistent. Lack of consistent understanding of SRE among the tutors supports the argument drawn by Harrison (2000) that among the controversial issues facing provision of SRE is lack of agreed universal definition of it. Tutors understandings of the meaning and goals of SRE were limited, partly with the emphasis on the biological aspects of SRE. Some tutors perceived SRE as *biological education.* This means that tutors regard SRE as education aims to teach young people about biological development of their bodies by equipping young people with skills that enable them to develop self-awareness in their daily life. This definition is limiting the scope of SRE as it tends to focus on biological issues only and setting aside social factors such as relationships, gender issues and intimacy which are constructed within SRE. Stone and Ingham (2006) point out biological and psychological aspect as one of the characteristics of a SRE definition. In this case, tutors thought that SRE aimed to protect young people from early pregnancies, STIs and STDs such as HIV/AIDS through promoting safer sex. For tutors it seems that SRE is concerned with equipping the young people with knowledge and skills that can enable them to prevent sexual health problems.

By reflecting on the SRE definitions of Lenderyou (1993), DfEE(2000), Sex Education Forum (1999) and Bruess & Greenberg (2004) which are presented in chapter two in this study, the findings show that tutors tend to define SRE in a narrow and limited perspective. This could be because most of the tutors claimed on not being trained at the university level to teach topics containing SRE in their subject disciplines. Although tutors claimed of being unaware of the SRE policy guiding the provision of SRE in educational institution in Tanzania, it is unsurprising to one to believe that tutors understanding of the meaning and goals of SRE are influenced by the aims spelt out in that policy. The guidelines for SRE emphasis two elements; namely, (a) providing basic information and facts about the transmission and prevention of HIV and STI and (b) promoting responsible sexual behaviours, including delaying sex and protected sex (Mkumbo & Ingham, 2010). However, this lack of understanding of the meaning and goals of SRE seems to have implications for tutors in teaching of SRE. It can be strongly argued that the variations on meaning and goals of SRE that tutors demonstrated in this study is among the factors limiting their scope of covering some topics related to SRE in the teacher education curriculum. Therefore, as tutors in this study suggesting that train on SRE can improve their knowledge and skills of teaching SRE in teachers' colleges is very important.

5.4   Tutors' experiences of the integration of SRE into the teacher education

Tutors managed to show concerned about the way SRE has been integrated into teacher education curriculum. While some tutors said that SRE is well integrated in natural science subjects, others said that it was not well integrated in social science subjects. Some topics particularly science-oriented topics seem to be difficult for social science tutors to teach them effectively. In this case, the social science tutors suggested that some SRE topics such as STIs and STDs suit better in natural science subjects as they need a background in biology subject. These variations in their perceptions on how SRE is integrated indicate that some tutors were satisfied with the situation while others were not.

Despite the fact that tutors demonstrated limited meaning of SRE in this study, they were able to mention some topics containing SRE in their subjects. This indicates that tutors are informed about the presence of SRE in teacher education curriculum. On the other hand, the findings

revealed that tutors are not aware of the presence of the guideline issued by the MoEVT in 2004 to guide the provision of SRE in educational institutions. All tutors participating in this study claimed that they had never seen such document. This shows that tutors are relying on the subjects' syllabi without knowing what SRE policy is directing them to teach in teachers' colleges. Similarly Mkumbo (2008) found that teachers were not aware of the SRE policy in Tanzania. This is contrary to the findings reported in the study of Liang (2010) carried out in UK and Taiwan which discovered that teachers were teaching SRE in schools with confidence because they are aware of the policy guiding the provision of SRE in schools.

For that reason, information to tutors about policy guiding provision of SRE in teachers' colleges is inevitable to inform them about what is supposed to be covered in SRE and not relying on the subject syllabi only. Tutors are translators of the teacher education curriculum and in this case they need to be well informed about policies guiding the provision of SRE in education institutions in order to translate the curriculum.

When tutors were asked to suggest the way on how SRE can be provided in the teachers' colleges, there was no variation in their responses. All participants in the study suggested the need to introduce SRE as a standalone subject in schools and at teachers' colleges and be a compulsory subject to all students. Mkumbo (2008) reported the difficultness of assessing the effectiveness of SRE in both primary and secondary schools in Tanzania as it is integrated in social and natural science subjects. Therefore, if SRE will be introduced in teachers' colleges as a standalone subject, its subject contents will have an organised structure and its effectiveness can be assessed easily.

5.4.1 Appropriate educational level to introduce SRE in schools

Tutors suggested the primary school level to be the appropriate stage for introducing SRE in Tanzania. Tutors mentioned SRE to start from class five to class seven (age 11-13) and the aim is to provide basic knowledge on STIs, HIV/AIDS and contraceptives. Although some tutors raised cautions on introducing SRE at primary school level, almost all participants indicated that it should start at early age. Perhaps unsurprisingly, given the seriousness of the adolescents' pregnancies and the HIV/AIDS epidemic in Tanzania and other Sub-Saharan African countries

(Mlyakado, 2013; Mufune, 2008) that is why the majority of participants wanted SRE to be introduced at the primary education level. The similar results on the level of education to which SRE appropriately get introduced in schools were reported in Mufune (2008) from Namibia. Given that the introduction of SRE within the schools curricula need careful planning, it suggested that curriculum planners and developers should involve diverse groups of educational stakeholders in Tanzania to decide what contents should be included in the subject syllabi and how should be taught in schools. Furthermore, teachers should be well equipped with SRE contents and be trained on how to teach that education [SRE] at every education level.

5.5 Tutors' knowledge, skills and mastery of teaching SRE

Tutors reported that they did not feel sufficiently competent to teach topics related to SRE at teachers' colleges level due to lack of knowledge and skills on SRE. Findings show that incompetence of tutors to master teaching SRE at teachers' colleges rooted at university level where SRE is not a part of teacher training programme. From the findings, tutors are teaching things that are shown in the syllabus, but without knowing the level and depth of the contents that is supposed to be taught to teacher-students. This situation leads tutors to be less competent in mastering the SRE subject matter. Tutors possess little knowledge on SRE, and the reason is rooted at the university level where SRE is not part of teacher education trainings. Inadequate training in any subject may affect the teacher's mastery experience and emotional arouse of teaching that subject effectively. There is a close relationship between knowledge and skills possession in a subject and self-efficacy in teaching that kind of knowledge to the learners (Lin, Chu & Lin, 2006). Also, Kimaryo (2011, p.160) asserts that "for teachers to be able to teach efficiently, they need also to be trained adequately". For example, in this study, tutors teaching social science subjects complained about teaching topics, which were supposedly to be taught by tutors specialized in natural science subjects. Therefore, tutors' beliefs in teaching SRE topics depend on the knowledge and skills they possess in SRE and how they believe in their own ability (self-efficacy) to teach topics containing SRE components to teacher-students in teachers' colleges.

Studies of Aarø et al.(2006), Bilinga and Mabula (2014) and Helleve et al. (2009) report similar findings that teachers in Tanzania are lacking knowledge and skills for teaching SRE at both

primary and secondary school levels. In this study, tutors suggested in-service training for tutors in teachers' colleges as one of the solutions to improve teaching and learning of SRE. This can be practical, but depends on the budget allocated for this type of training and the priorities given to this kind of education in the country. In this case, tutors who teach subjects where SRE is integrated should take self-initiatives to equip themselves with SRE in their subject area instead of waiting for in-service training opportunities. Taking self-initiatives to learn something from others who are teaching SRE will enhance vicarious experience (Bandura, 1997) of the tutors. The educational planners and curriculum developers in Tanzania should focus up-stream (at the university level) where tutors are trained and SRE should be included in their education training package.

5.5.1 Methods and techniques used in teaching SRE topics

Teaching methods and techniques are crucial in facilitating effective learning. Tutors mentioned participatory method as a main method for teaching topics related to SRE in their subject disciplines. According to the tutors, participatory methods are engaging more teacher-students to participate in SRE lessons. They claim that participatory methods are encouraging teacher-students to ask many questions when are learning topics containing SRE. The use of participatory method in teaching is likely to improve self-efficacy of teacher-students. For example, using of a technique such as small group discussions allow teacher-students to master challenging tasks in the lesson with limited assistance from a tutor or group members. Working together in groups enable teacher-students to support each other and improve their knowledge and skills in learning.

The applicability of participatory methods in a class with a big number of learners and shortage of teaching and learning materials can be questioned. A large number of learners in the class tend to limit application of some teaching techniques like small group discussions. It is not difficult for tutors to teach effectively using this technique when there are many groups to be supervised under a limited time allocated for teaching in the syllabus for teaching SRE in teachers' colleges.

Other techniques such as educational drama and role-play can be used to teach SRE in classrooms. Ponzetti et al. (2009) report the effectiveness of using educational drama and role-

play in teaching SRE in schools in Canada. The uses of educational drama and role-play may improve mastery experience and vicarious experience of teacher-students who seems not to be active to take part in SRE lessons. For example, a teacher-student who is a fast learner may experience high efficacy when is placed in a group of teacher-students who are slow learners, while he or she can experience low efficacy when participating in a group with other teacher-students who are fast learners (El-Biza, 2010).

5.5.2 Barriers to the teaching of SRE in teachers' colleges

The barriers which tutors faced in teaching of SRE in teachers' colleges included policy related challenges and challenges related to low status of the subject. Effective teaching preparation requires a great deal of clear information on the policy and weight of the topics as well as enough time to accomplish the allocated teaching tasks. In this study, tutors pointed out that the National Educational Policy of 1995 does not state anything about provision of SRE in teachers' colleges and the participants said that they had ever seen the policy document namely *Guidelines for Implementing HIV/AIDS and Life-Skills Education Programme in Schools* (URT, 2004). This indicates that tutors are lacking clear information about provision of SRE in teachers' colleges.

As discussed previously, the teaching of SRE involves participatory methods. They claim that the use of participatory method such as group discussions in teaching requires enough time to allow learners to explore the topic intensively and they see 40 minutes not enough to finish group tasks. It is clear that, as tutors stated in their interviews; they would prefer to teach something that they are well informed with and they can have enough time to handle it. However, limited time for SRE topics allocated in the subjects' syllabi seems to hinder effective teaching of SRE in teachers' colleges. Liang (2010) asserts that unclear information and limited time on some topics [SRE] indicates low priority to SRE. However, one can tend to agree with Liang that unclear information and limited time about provision of SRE in teachers' colleges in Tanzania indicates low priority to SRE. Therefore, time for SRE in the syllabi need to be revised and allocated according to the length of the topic.

Integrating SRE within the normal school curriculum needs a clear policy of guiding its provision. In the UK and Taiwan, Liang (2010) found clear guidelines for teaching SRE in schools. Presence of these guidelines helps teachers in both UK and Taiwan to teach SRE in

schools with confidence. On the other hand, Mufune (2008) states clearly the availability of Namibia's reproductive health policy, which guides the provision of SRE in schools. The policy normally states the scope and depth of knowledge supposed to be given to learners. Tutors are among of the educational agents who interpret and implement the goals of educational policies in a real situation. Therefore, lack of the clear SRE policy reduces the commitment of the tutors in teachers' colleges to teach SRE effectively.

Moreover, teaching and learning materials were mentioned by tutors among major setbacks hindering effectiveness of teaching SRE in teachers' colleges. Bilinga and Mabula (2014) reports that the MoEVT is responsible for purchasing and distributing teaching aids in government owned educational institutions but distribution is low due to lack of enough funds. It is difficult for tutors to elaborate some concepts in SRE if there are no appropriate teaching aids. If this problem persists for a long time, there is a possibility of affecting knowledge and skills of tutors to teach topics related to SRE in teachers' colleges.

In addition, tutors with a stronger sense of efficacy will tend to be more creative and adopting teaching materials to facilitate teaching SRE to the teacher-students. Even though educators are cautioning on associating self-efficacy and confidence, it is clear that tutors with high or positive teacher efficacy have also confidence in classroom teaching. Lack of teaching and learning materials may lead to a lack of confidence and comfort of tutors to teach some SRE topics and hence accelerates low self-efficacy in teaching SRE in teachers' colleges.

The use of teaching and learning materials help in making teaching sessions effective and enable active participation of learners in the lesson. The widely use of teaching and learning materials in educational programmes or interventions are potentially designed focusing on providing mastery experiences to increase self-efficacy to both teachers and learners. For example, demonstrating the use of condoms in the classroom will help teacher-students to develop a variety of knowledge and skills of using condoms. Bandura (1986) points out that an individual's efficacy beliefs are built from different sources of information that can be conveyed vicariously.

According to the teacher education curricula of Tanzania (TIE, 2007, 2009), teachers' colleges are regarded as the 'workshop' where teacher-students are expecting to learn how to produce and

practice the use of teaching and learning materials obtained from their local environment. However, some of the teaching resources, particularly those needed to teach topics like HIV/AIDS, STIs and STDs, family planning and maternal health, can be obtained freely from Population Service International (PSI) Tanzania. Although tutors implied for the need of modern equipment to support teaching and learning SRE in teachers' colleges, currently MoEVT has made the priority to supply teachers' colleges with ICT equipment. Expectations are that, within time the situation will be improved and modern equipment will be available in teachers' colleges (URT, 2012).

Other challenges related to low status of the subject included stigmatization and lack of support from the staff members. The analyses of the statements from the tutors show that there is no teamwork among the tutors regarding planning for and teaching SRE. Tutors who openly teach SRE to teacher-students are lacking support from their colleagues. In the present study, self-efficacy among the tutors is associated with support from their fellow members of teaching staff. Therefore, in order for the tutors to teach SRE effectively they need to get support and encouragement from their staff members. Findings in this study show that verbal persuasion (Bandura, 1997) decreases tutors' efficacy of teaching SRE smoothly. The use of negative appraisals to tutors teaching subjects containing SRE topics do more weaken their self-efficacy beliefs than to strengthen such belief through positive appraisals (Lee, Arthur & Avis, 2008). According to Bandura (1997), social persuasion manifests as encouragement or discouragement from another person. Discouragement is generally more effective at decreasing a person's self-efficacy than encouragement is at increasing it (Bandura, 1997). Therefore, stigmatization and lack of support from other staff members is likely to decrease tutors' self-efficacy of teaching SRE effectively in teachers' colleges. In this case, tutors who are labelled to be hooligans (negative label) by their fellows may feel to be socially withdrawn and develop a low sense of self-worth and lower efficacy (Bandura, 1997) of teaching SRE in teachers' colleges.

One can be tempted to believe that lack of support to tutors teaching subjects containing SRE is constructed within cultural perspectives as discussed in chapter two, many African countries including Tanzania, regard sexual issues as a private matter that cannot be discussed openly (Bilinga & Mabula, 2014). It is a taboo to talk about sexual related issues in public. One might therefore understand that tutors, belonging to this culture also see sexual issues as private, and

therefore are not supportive of teaching SRE in teachers' colleges. Since SRE is integrated in subjects and supposed to be taught at teachers' colleges, and tutors who teach subjects containing SRE should get support from their fellow college staff.

5.6 Rescuing and strengthening provision of SRE in teachers' colleges

In this study, some recommendations with regard to rescuing and strengthening the provision of SRE in teachers' colleges have been put forward by the participants. Tutors suggested that, there is a need of revising the existing national education policy of 1995 (URT, 1995) in order to state clearly what should be included within SRE. This will give a chance for the tutors to understand the scope of SRE in the teacher education curriculum and how to implement it. Similarly, Mlyakado (2013) reported teachers' complaints on the lack of SRE policy guiding about what is supposed to be taught, and on how teaching is required to be implemented in the educational system. In 2004, the government of Tanzania issued SRE policy entitled as *Guidelines for implementing HIV/AIDS and Life-skills education programmes in schools* (URT, 2004) to guide the provision of SRE in educational institutions, but the policy has been criticized for its contents and scope. Mkumbo (2008) reports that, the focus of SRE policy in Tanzania is to give basic knowledge to the adolescents on how to protect themselves from HIV/AIDS and leaving aside a lot of issues that are supposed to be covered in SRE. In most developed countries like Canada, UK and USA the provision of SRE through educational premises is to help young people to prepare themselves for adulthood life and not only to focus on HIV/AIDS prevention. For example, SRE in USA is designed to enable the adolescents to "be prepared for puberty and adolescent changes, appreciate that life changes are normal, recognize their own bodies as good, beautiful and private, learn to make decisions that take into account possible consequences and understand the place of sexuality in human life" (Bruess & Greenberg, 2004, p.16). So, in order to achieve such objective a clear and well-stated SRE policy is needed. The analysis of the tutors' discussions on the provision of SRE in teachers' colleges show that what is provided is only a little amount covering SRE compared to the meaning, goals and scope of SRE as a discipline of study or as a sexual health promoting subject. This means that SRE in teacher education is focusing on developing basic knowledge of SRE to teacher-students and not on

competence in SRE. Tutors are suggesting revising the existing education policy and to make SRE as a standalone subject. This will further be discussed in the next paragraph.

Tutors suggested SRE to be a standalone subject in the teacher education curriculum. Tutors' arguments in this aspect were based on introducing SRE as a standalone subject and making it compulsory for all teacher-students in the teachers' colleges. Tutors see the way how SRE is integrated in teacher-subjects is limiting tutors' ways of teaching it effectively. If SRE is going to be introduced as a standalone subject in teachers' colleges will be well delivered by well-trained tutors at the university level to teach that subject. Also, the scope and weight of the contents will be prepared according to the level and ability of the teacher-students.

Also, tutors suggested that there is a need of in-service training for tutors on SRE regardless of what subjects they are teaching at the teachers' colleges. Since most of the participants in this study admitted not being exposed to SRE at university level, the in-service training is seen to be a solution to enable them to acquire knowledge and skills on how to teach topics containing elements of sexuality in their subject disciplines. A comparative study conducted in Taiwan and England by Liang (2010) reveals that, trainings for teachers towards SRE help to make them competent and comfortable to deliver such knowledge to their students. Tutors suggested that in-service trainings can be a conducted inform in seminars and workshops. A study of Helleve et.al (2011) proved that, teachers' capacity building through in-service trainings is a vital tool to enable them to be confident and competent to teach sexuality issues in schools. It seems that tutors are facing some difficulties in delivering SRE to teacher-students in teachers' colleges because they were not trained at the university level to teach topics containing SRE. Kimaryo (2011) points out that further training for teachers help to upgrade their knowledge and improve the quality of teaching. Tutors believe that training on how to teach SRE in teachers' colleges can reduce stigmatization (discussed in section 5.5.2) depending on all tutors to be given a chance to participate in these training sessions. To teach SRE in teachers' colleges require tutors to have knowledge and skills that enable them to know how to integrate SRE in their subject disciplines. Since teachers' colleges tutors are trained at the university level, it is important for the education policy makers to think about ways of integrating SRE in education packages offered to teachers at the university level. The university education should reflect what teachers

are prepared to teach at all levels of the education system in the country as spelt out in each education curriculum.

Tutors suggestions focused on the need for textbooks and modern equipment such as computers, projectors and internet facilities to facilitate teaching SRE. The need for modern resources is crucial in facilitating the process of teaching and learning in this globalized world. A study of Liang (2010) discovered that, in high-income countries, such as UK, the teaching of SRE is made easy due to the presence of modern equipment. MoEVT should look on how to equip the teachers' colleges owned by the government with modern equipment such as internet. While investigating the quality of teacher education in Tanzania, Chambulila (2013, p.138) recommended on the use of Information Communication Technology (ICT) facilities in teacher education and he pointed out that, "[ICT] is an instrumental tool for internalizing and globalizing teacher education".

5.7   Strengths and Limitations of this study

As an exploratory research that was designed to investigate how tutors experiences provision of SRE in the teacher education in Tanzania, its main strengths are: the first study to explore the provision of SRE in teachers' colleges in Tanzania. This qualitative study gave the opportunity to the tutors for their voices to be heard to educational stakeholders and health promoters in Tanzania. In addition, the inclusion of the researcher, a native Tanzanian teacher as the investigator, has enabled the researcher to gain deep insight on how SRE is provided in teachers' colleges in Tanzania. Furthermore, the study has also managed to shed light on the status of SRE in teachers' colleges in Tanzania. With a small sample having diverse educational background and teaching experiences, the study have portrayed a picture on how tutors perceive the meaning and goal of SRE, how they are experiencing teaching of SRE within social and natural science subjects and what barriers do they face in teaching SRE in teachers' colleges.

Apart from the strengths of the study, two limitations are evident in this work. First, the study was limited in one part of the country (i.e. northern) and involved a small sample which was selected purposively based on criteria described in section 3.4.1. In this case, the study provides an informative picture about the provision of SRE in few teachers' colleges rather than a

definitive picture of all teachers' colleges in Tanzania. Conducting a study in different geographical area and involving a large sample can increase comprehensiveness of the study and may lead to gain many findings presenting different views of tutors about provision of SRE in government owned teachers' colleges in the country.

Secondly, the investigation was done through interviews among the tutors. This did not allow the researcher to; observe how of SRE teachings are put into practice in teachers' colleges, analyse the teaching infrastructure and subjects' syllabi where SRE is integrated due to limited time for data collection and shortage of research fund to enable the researcher to stay in the field for a long time. The next chapter concludes discussion of the results and examines their implications.

6 Conclusions, implications and suggestions for further research

This study explored tutors' experiences of SRE in Tanzania. The intention of this study was to gain insight on how; tutors understand the concept of SRE, perceive the integration of SRE into the teacher education curriculum and how do they teach sex and relationships knowledge to the teacher-students. A qualitative phenomenographical approach was adopted in data collection aimed to give deep insight on how SRE is perceived in a small sample of the participants limited to two administrative regions in the northern part of Tanzania. The participants and teachers' colleges that participated in this study were purposively selected to explore their experiences of teaching SRE in teachers' colleges. Therefore, findings should be interpreted cautiously if one is going to make generalization, yet the findings from this study can be transferred to another population of similar characteristics such as government owned teachers' colleges in Tanzania. The findings in this study revealed that; tutors have limited understanding of the meaning and goals of SRE, most of the participants are unaware of the 2004 policy issued by the government to guide provision of SRE in educational institutions, their perceptions on how SRE is integrated in teacher education curriculum differs and provision of SRE are facing challenges and setbacks which can be summarised as; challenges related to policy and challenges related to low status of the subject.

In addition, tutors suggested that in order to improve the provision of SRE in teachers' colleges the following should be done: revising the existing national education policy of 1995 and state clearly what should be included in SRE, introducing SRE as a standalone subject and be compulsory subject in teachers' colleges, provision of SRE in-service trainings to tutors and providing modern resources to facilitate teaching and learning of SRE.

This study being the first empirical research to investigate how SRE is integrated into the teacher education curriculum reveals findings that can be useful to different stakeholders in Tanzania in several various ways. Some beneficiaries of the findings of this study are education curriculum planners and developers, and The Ministry of Education and Vocational Training. The ways on how these stakeholders can benefit from the results are explained below.

6.4　Education curriculum planners and developers

This study has shown that the existing SRE policy guiding the provision of SRE in teachers' colleges in Tanzania is not known to the tutors, and the integration of SRE components into few subjects done does not meet the scope required. On the basis of these findings, the current SRE policy needs to be revised and adjusted to include more SRE components. Also, SRE should be introduced as an independent subject in teachers' colleges with a clear guideline for easy implementation. Alongside introducing it in teachers' colleges, SRE should be introduced in the university teacher education training courses so as to equip would be tutors with the knowledge and skills and confidence to teach SRE in teachers' colleges.

6.5　The Ministry of Education and Vocational Training

Tutors in this study mentioned the need for implementing SRE into in-service training through seminars and workshops. The teacher education department at the Ministry of Education and Vocational Training is a responsible organisation, which can facilitate this demand. The teacher education department could develop a budget plan for each financial year that could be used to support seminars and workshops to all tutors teaching subjects where SRE is integrated in all teachers' colleges in Tanzania. This would help building capacity on how to teach SRE to teacher-students. Furthermore, the teacher department should find a way of distributing the current SRE policy document in all teachers' colleges and prepare the teaching manuals to help tutors to facilitate their teaching processes.

6.6　Suggestions for further research

This study investigated three broad areas, which are tutors' understanding of SRE, how tutors perceive the integration of SRE into teacher education curriculum and how tutors are teaching SRE to teacher-students. In this study only tutors' voices were heard through interviews in three teachers' colleges in the northern part of Tanzania. A further study is required to investigate how tutors are teaching SRE to teacher-students by observing classroom sessions and to explore how teacher-students perceive the integration of SRE into the teacher education curriculum. Specific studies, for instance, may explore the attitudes of teacher-students towards SRE in teacher education curriculum.

The findings in this study revealed that tutors were not well trained at university level to teach SRE in teachers' colleges. Conducting a research in this area is very important in order to investigate how tutors are prepared at university level to teach SRE in teachers' colleges. The results from such a study can contribute to the existing knowledge on SRE in Tanzania, and act as the base for planning a better way of providing SRE at all levels in the education system.

6.7 Concluding remarks

If SRE is well integrated into the teacher education curriculum could have positive impacts not only to the teacher-students but also to the students in primary and secondary schools in Tanzania. Teacher-students are expected to be posted in primary and secondary schools after their graduation. Among the topics they are expecting to teach are containing SRE. Teachers are translators of the curriculum at a classroom level. They need to be well trained during in teachers' colleges and at university level to develop mastery experience, vicarious experience and emotional arousal in teaching SRE in their subjects of specializations.

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8   Norsk sammendrag

Hovedformålet med denne studien var å undersøke lærerutdanneres erfaringer med sex- og samlivslære (sex and relationships education - SRE) i Tanzania. For å kunne oppnå dette, ble det utarbeidet tre problemstillinger som var veiledende i forskningen. Den første problemstillingen søkte å identifisere de ulike måtene lærerutdannere forsto begrepet SRE i lærerutdanningen. Den andre problemstillingen fokuserte på å få en forståelse av lærerutdanneres oppfatninger av hvordan SRE skulle integreres i lærerutdanningen, og hvordan lærerutdannere formidlet kunnskap om SRE til lærerstudenter[2]. Videre søkte den tredje problemstillingen å utforske hvordan lærerutdannere integrerte komponenter av SRE i det faglige innholdet i undervisningen, og hvilke metoder de benyttet seg av i klasseromsundervisningen ved lærerskolene. Dette var en kvalitativ studie med en fenomenografisk tilnærming til problemområdet. Semi-strukturert intervju var hovedmetoden anvendt i innsamlingen av empiriske data fra deltakerne i studien. Utvalget av lærere ble gjort på et strategisk utvalg og åtte lærere med arbeidserfaring fra 3-25 år fra tre lærerutdanningsinsitiusjoner i nordlige Tanzania ble valgt. Intervjuene ble tatt opp på bånd, transkribert, analysert og tolket.

Funnene fra undersøkelsen indikerte at lærerutdannere har en begrenset forståelse for hensikten med SRE. De fleste av deltakerne i undersøkelsen var uvitende om at det fantes retningslinjer utstedt av myndighetene i 2004 med hensikt for å veilede bestemmelsen om undervisning i SRE på utdanningsinstitusjoner i Tanzania. Et annet viktig funn var variasjonen i hvordan lærerutdannere oppfattet målet og hensikten med SRE. Resultatene avdekket at lærerutdannere har ulike syn på hvordan SRE er integrert i lærerutdanningens planer og derfor møter lærerutdanningsinstitusjonene en rekke utfordringer og tilbakeslag når slike temaer skal formidles.

I lys av denne studie anbefales en revisjon og tilpassing av dagens retningslinjer for SRE slik at den inkluderer flere SRE fagkomponenter i tillegg å introdusere SRE som et eget fagområde ved de øvrige lærerutdanningene i Tanzania. Ved siden av SRE som del av lærerutdanningen på universitetsnivå bør lærerutdannere på lærerskolene tilbys seminarer og *workshops*. Dette vil kunne øke lærerutdanneres kompetanse for en effektiv formidling av SRE til lærerstudentene.

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[2] Denne studien referer til lærerstudenter som utdanner seg til barneskolelærer (one year teaching certificate for primary school) og ungdomsskolelærer (two year teaching diploma for lower secondary school) innenfor det offentlige tanzanianske lærerutdanningsprogrammet på lærerskoler i Tanzania.

9   Appendices

Appendix 9.1 Research permit from NSD (Norway)

Norsk samfunnsvitenskapelig datatjeneste AS
NORWEGIAN SOCIAL SCIENCE DATA SERVICES

Miranda Thurston
Institutt for idrett og aktiv livsstil Høgskolen i Hedmark, campus Elverum
Postboks 400
2418 ELVERUM

Vår dato: 05.12.2014   Vår ref: 40551 / 3 / KH   Deres dato: Deres ref:

TILBAKEMELDING PÅ MELDING OM BEHANDLING AV PERSONOPPLYSNINGER

Vi viser til melding om behandling av personopplysninger, mottatt 31.10.2014. Meldingen gjelder prosjektet:

40551	*Tutors perceptions towards integration of sex and relationships education in teacher education curriculum in Tanzania*
Behandlingsansvarlig	*Høgskolen i Hedmark, ved institusjonens øverste leder*
Daglig ansvarlig	*Miranda Thurston*
Student	*Mbezi Benjamin Shegesha*

Personvernombudet har vurdert prosjektet og finner at behandlingen av personopplysninger er meldepliktig i henhold til personopplysningsloven § 31. Behandlingen tilfredsstiller kravene i personopplysningsloven.

Personvernombudets vurdering forutsetter at prosjektet gjennomføres i tråd med opplysningene gitt i meldeskjemaet, korrespondanse med ombudet, ombudets kommentarer samt personopplysningsloven og helseregisterloven med forskrifter. Behandlingen av personopplysninger kan settes i gang.

Det gjøres oppmerksom på at det skal gis ny melding dersom behandlingen endres i forhold til de opplysninger som ligger til grunn for personvernombudets vurdering. Endringsmeldinger gis via et eget skjema, http://www.nsd.uib.no/personvern/meldeplikt/skjema.html. Det skal også gis melding etter tre år dersom prosjektet fortsatt pågår. Meldinger skal skje skriftlig til ombudet.

Personvernombudet har lagt ut opplysninger om prosjektet i en offentlig database, http://pvo.nsd.no/prosjekt.

Personvernombudet vil ved prosjektets avslutning, 15.06.2015, rette en henvendelse angående status for behandlingen av personopplysninger.

Vennlig hilsen

Katrine Utaaker Segadal

             Kjersti Haugstvedt

Kontaktperson: Kjersti Haugstvedt tlf: 55 58 29 53
Vedlegg: Prosjektvurdering
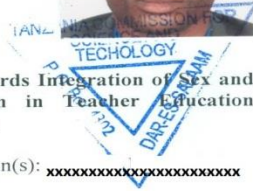
Dokumentet er elektronisk produsert og godkjent ved NSDs rutiner for elektronisk godkjenning.

Appendix 9.2 Research permit from COSTECH (Tanzania)

TANZANIA COMMISSION FOR SCIENCE AND TECHNOLOGY (COSTECH)

Telephones: (255 - 022) 2775155 - 6, 2700745/6
Director General: (255 - 022) 2700750&2775315
Fax: (255 - 022) 2775313
Email: rclearance@costech.or.tz

Ali Hassan Mwinyi Road
P.O. Box 4302
Dar es Salaam
Tanzania

RESEARCH PERMIT

No. 2015–01-NA-2014-262   08th January 2015

1. Name   :   **Mbezi Benjamin Shegesha**

2. Nationality   :   **Tanzanian**

3   Title   :   **Tutors Perceptions towards Integration of Sex and Relationships Education in Teacher Education Curriculum in Tanzania**

4   Research shall be confined to the following region(s): **xxxxxxxxxxxxxxxxxxxxxxx**

5. Permit validity from: **08th January 2015 to 7th January 2016**

6. Contact /Collaborator: **Dr. Cornelius D. Chambulila, Marangu Teachers College, P.O. Box 266, Marangu, Kilimanjaro**

7. Researcher is required to submit progress report on quarterly basis and submit all Publications made after research.

M. Mushi

for: **DIRECTOR GENERAL**

Appendix 9.3 Interview guide

Interview Guide

"Tutors' perceptions towards integration of sex and relationships education in teacher education curriculum in Tanzania"

A: Introduction

Description of the researcher and the purpose of the study.

B: Personal information of the Tutors

Can you tell me about your career before coming to this college?

C. Interview Guide Questions.

Research Question 1: How do tutors make sense of sex and relationships education?

    i. What do we mean by Sex and Relationships Education?

Research Question 2: How do Tutors perceive the integration of SRE into Teachers' Education Curriculum?

    i. What do you think about SRE in teachers' college?

    ii. What role does SRE play in sexual health promotion in Tanzania?

    iii. What are topics/contents do you think teacher-students need to know about SRE?

    iv. Are the SRE topics taught as separate topics in your subjects or are the issues covered within other subjects?

    v. Do you find it easy to identify them in every topic? If no, give reasons?

    vi. What do you perceive as the ideal way of including SRE into the Teacher Education Curriculum? To be taught as a separate subject or integrated within other subjects?

vii.   Which level of education do you think is appropriate for school pupils to start SRE in Tanzania? Why do you say that?

Research Question 3: How do Tutors teach SRE to teacher-students?

i.   Do you feel equipped to teach SRE content to student teachers? Do you feel that you have adequate knowledge and skills of teaching SRE in your subject? (What is your own experience of SRE as student-teacher?)

ii.   What ways/techniques do you use in teaching SRE in your subject? Why do you use them?

iii.   How do you think the teaching of SRE in Teachers' Colleges can be improved?

iv.   How do you think SRE should be provided? Should be integrated in other subjects or offered as a standalone subject?

v.   What do you think are the main challenges and constraints for teaching SRE in Teachers' Colleges in Tanzania?

Thank you for providing this valuable information

Appendix 9.4 Introduction letter

LETTER OF INTRODUCTION

To: The College Principal

Dear Sir/Madam,

REF: Permission to conduct a research project at your College

As the heading above is concerned. I am **Mbezi Benjamin Shegesha**, a student at Hedmark University College in Norway pursuing a Master's degree in Public Health with emphasis on Lifestyle Behaviour changes. For the partial fulfilment for my studies, I intend to conduct a research project on the topic: *Tutors' perceptions towards integration of Sex and Relationships Education in Teacher Education Curriculum in Tanzania*. I chose your college to be the site of my study, because it is one of the Teachers' Colleges allocated in the northern part of Tanzania.

The main aim of this study is to explorer the perceptions of tutors in teachers' colleges towards the integration of sex and relationships education (SRE) in teacher education curriculum in Tanzania. However, during my field work I would like to work with two/three tutors teaching one of the following subjects; Biology, General Studies, Home Economics (Diploma level) and Science, Civics and Social studies (Certificate level).

The results from this study will be for the benefit of the investigator for the fulfilment of the required degree programme at Hedmark University College. This study will also help to understand more about the role of the tutors in preparing the teacher-students to teach subjects containing sexuality contents in both primary and secondary schools' curricula. Furthermore, results will be helpful for education policy maker and curriculum designers in Tanzania for developing effective integration of SRE in teacher education curriculum. Moreover, the investigation will expose the knowledge of the tutors on SRE and the nature of SRE in the teacher education curriculum and its implementation in teachers' colleges.

All issues discussed and information collected from the tutors will be treated with confidentiality. Also, the participation in the study will be voluntary and the participants will be free to withdraw at any time they wish. After the finalization of this study, with your wish, you will be welcomed to have a copy of the report.

It is my hope that, my request will be considered positively.

I am looking forward for your response.

Yours faithfully,

Mbezi Benjamin Shegesha.

+255752226388

Email: mbezib@yahoo.com

Appendix 9.5 Research information sheet and participant's consent form

<u>**Research Information Sheet**</u>

<u>**Study title:**</u> Tutors' Perceptions towards integration of sex and relationships education in teacher education curriculum in Tanzania.

<u>**Study background**</u>
This study explores the perceptions of tutors towards integration of sex and relationships education in teacher education curriculum in Tanzania. This study will help to understand more about the role of the tutors in preparing the teacher-students to teach subjects containing sexuality contents in both primary and secondary schools curricula. The study is being conducted as part of a Masters of Public Health at Hedmark University College.

<u>**Why have I been approached to take part?**</u>
Interviews will be held among some tutors teaching who have taught at a teachers' college for more than three years and teaching one of the following subjects; Biology, General Studies, Home Economics and Educational Psychology and Counselling.

<u>**What will participation involve?**</u>
You will be asked to take part in a one-to-one interview with the researcher. The interviews are expected to last for approximately 40 minutes. The interviews will be audio-recorded. Your participation is voluntary and you will be free to withdraw from the interview at any time. You may withdraw your data up to a few days after the interview because after analysis has started, it becomes impossible to 'withdraw' data. The information will be analysed and a report written. If you decide to participate, I request you to read carefully through statement on page two before signing it. This is to make sure that the information you share with me will not be misused.

<u>**What will happen to the results of the research project?**</u>
Your participation in this study will help me to obtain valuable information regarding integration of sex and relationships education in teacher education curriculum in Tanzania. This report will be made available at the Ministry of Education and Vocational Training, Hedmark University College (Norway) and Tanzania Commission for Universities (TCU). Any information that you provide will be treated confidentially and your data anonymised before analysis, only the researcher and supervisor (where necessary) will have access to all the data collected. You will not be identified in any reports from the study. The audio recordings will be deleted and transcripts destroyed after the Hedmark University College in Norway accepts the final report in summer of 2015.

Who can I contact if I have any complaints about the study?

If you have any questions or complaints about this study, please contact Shegesha, Mbezi Benjamin through +255752226388 /+4745039534 or mbezib@yahoo.com. If you have any questions or concerns about your rights as a research participant, please contact Professor Eivind Å. Skille at Hedmark University College (Campus Elverum) at +4762 43 00 00 or eivind.skille@hihm.no

Thank you for considering this information.

Shegesha, Mbezi Benjamin

Participant consent form

Title of Research Project: Tutors' Perceptions towards integration of sex and relationships education in teacher education curriculum in Tanzania.

Name of Researcher: Shegesha, Mbezi Benjamin

Participant Identification Number for this project:

I, the undersigned, confirm that (please initial box):

1. I have read and understand the information sheet dated ……………………………….
    explaining the above research project and I have had the opportunity to ask
    questions about the project.

2. I understand that my participation is voluntary and that I am free to withdraw
    at any time without giving any reason and without there being any negative
    consequences. In addition, should I not wish to answer any particular
    question or questions, I am free to decline. You can contact the researcher through
    +255752226388 or +4745039534

3. I understand that my responses will be kept strictly confidential.
    I understand that my name will not be linked with the research materials, and
    I will not be identified or identifiable in the report or reports that result from
    the research.

4.   I agree for the interview to be audio-recorded

5. I agree to take part in the above research project.

_____   _____   _____
Name of Participant   Date   Signature

_____   _____   _____
Lead Researcher   Date   Signature

To be signed and dated in presence of the participant

Copies:
Once this has been signed by all parties the participant should receive a copy of the signed and dated participant consent form, the letter/pre-written script/information sheet and any other written information provided to the participants. A copy of the signed and dated consent form should be placed in the project's main record (e.g. a site file), which must be kept in a secure location.

Thank you for your time and support.

Appendix 9.6 Introduction letter from Hedmark University

Høgskolen i **Hedmark**
Campus Elverum

17th October, 2014

To whom it may concern

I am writing in support of Benjamin Mbezi, who is currently a student on the Masters in Public Health programme at Hedmark University College, Elverum, Norway. I am writing to you in my capacity as the Study Leader for this Masters programme.

Benjamin plans to return to Tanzania for the period 1st December 2014 – 31th January 2015 in order to collect data for his Masters research project (the dissertation), a compulsory component of the programme. The title for Benjamin's research project is *Tutors' perceptions towards integration of Sex and Relationships Education in Teacher Education Curriculum in Tanzania*. I am therefore requesting your support for Benjamin's project by giving him permission to collect the required data from relevant Teachers' Colleges.

Since joining the Masters programme in August 2013 Benjamin has been a dedicated and conscientious student who has achieved very good grades in all his assignments. He has my full support for this research project.

Please do not hesitate to contact me if you have any further questions or queries.

Yours faithfully

Miranda N Thurston

Miranda N. Thurston
Professor of Public Health
Study Leader for the Masters in Public Health
Faculty of Public Health Sciences
Hedmark University College
Elverum
Norway

miranda.thurston@hihm.no

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Appendix 9.7 Research permit from Regional Commissioner's office

THE UNITED REPUBLIC OF TANZANIA
PRIME MINISTER'S OFFICE
REGIONAL ADMINISTRATION AND LOCAL GOVERNMENT

OFFICE OF REGIONAL COMMISSIONER,
P.O. BOX

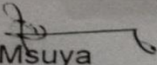Ref.No. FA. 228/276/03/30   26th November, 2014

Principal,
_____eacher's Training College,

Principal,
_____eacher's Training College,

Re: **RESEARCH PERMIT**

Refer to the above subject. I wish to introduce to you **Mr. Benjamin Mbezi** who is bonafide Researcher of the Hedmark University College Elverum Norway and who is at the moment conducting research.

2.   The title of research is *"Tutors' Perceptions Towards Integration of Sex and Relationships Education in Teacher Education Curriculum in Tanzania"*.

3.   Permission has been granted to conduct the research *from 1st December, 2014 to 31st January, 2015*.

4.   Kindly give him the required cooperation and make sure that he abides by all government regulations and directives.

5.   Thank you for your cooperation.

O.B. Msuya
For: **REGIONAL ADMINISTRATIVE SECRETARY**

for, Regional Administrative Secretary

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