Are we ready to talk about sex to youth? A qualitative case study in Colombia
Soatá, Boyacá (Colombia)

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Abstract

In the last decades, there has been an increase in the worldwide awareness on including sexuality education at school as an effective method of sexual health education. Previous studies have found that effective sexuality education programmes led to positive outcomes on child’s sexual behaviour. The aim of the present study is to conduct a qualitative case study at a Catholic secondary school in the region of Soatá in Boyacá, Colombia. A school-based sexuality education programme was examined to see its implementation/mediation. Perceptions of students, teachers, counsellor, director, parents, health-worker and governmental offices about the relevance and outcomes of the programme were analysed as well as the discourses and policies on sexuality education along with the challenges of implementation.

Documentary analysis, 7 observations, 36 semi-structured interviews and a field diary were used to collect the qualitative data. Results of the case study showed that predominantly the method and content that shape sexuality education at school is a mixture of morality and health-based approach with a main focus on abstinence. Comprehensive knowledge was not always identified in the classroom. Additionally, some harmful practices were identified within some activities such as compulsory heterosexuality, gendered discipline patterns and hegemonic masculinity. Overall, even if the policy is rather progressive, the practice of sexuality remains conservative. Besides, classroom practices are largely influenced by teacher’s attitudes, religiosity and cultural norms, which are not beneficial for youth’s SRH.

To overcome the gap between national policies and the local context it is recommended to train teachers appropriately. Teacher’s training on sexuality education must encourage them to avoid including their personal opinions, reinforce gender equality and use student-centred techniques to deliver sexuality education.
Table of contents

Abbreviations

Acknowledgements

1. Introduction ............................................................................................................. 8
   1.1. Problem statement ............................................................................................. 8
   1.2. The present study .............................................................................................. 9
   1.3. Academic and social relevance ........................................................................ 10
   1.4. Outline of the study ......................................................................................... 11

2. Theoretical review ................................................................................................. 13
   2.1. Sexuality education ......................................................................................... 13
   2.2. Programme implementation ............................................................................. 14
   2.3. School as a site ................................................................................................. 15
   2.4. Actors in sexuality education .......................................................................... 15
       2.4.1. Teachers ................................................................................................... 16
       2.4.2. Students .................................................................................................. 17
   2.5. Challenges in implementing sexuality education programmes .................. 18

3. Country background ............................................................................................. 21
   3.1. Colombia ......................................................................................................... 21
   3.2. Concerns related to sexual and reproductive health rights ......................... 23
   3.3. Current policies and education programmes on sexuality education .......... 24
       3.3.1. National policies ..................................................................................... 24
       3.3.2. Education programmes on sexuality education ...................................... 26
   3.4. Research location ............................................................................................ 27

4. Methods ................................................................................................................ 29
   4.1. Sample ............................................................................................................. 29
   4.2. Instruments ..................................................................................................... 30
       4.2.1. Documentary analysis .............................................................................. 30
       4.2.2. Observations ......................................................................................... 31
       4.2.3. Semi-structured interviews ..................................................................... 32
       4.2.4. Field Diary ............................................................................................. 33
   4.3. Data analysis ................................................................................................... 33
   4.4. Ethical considerations ...................................................................................... 33
   4.5. Limitations of the research ............................................................................. 34
5. “Me conozco, me respeto y aprendo a vivir bien” programme........................................35
  5.1. Discourses on sexuality education in Colombia.......................................................35
  5.2. Influence of the Catholic Church..............................................................................37
  5.3. Objectives of the programme....................................................................................39
    5.3.1. Education programme for sexuality and citizenship - PESCC...........................39
    5.3.2. Motivation behind the Me conozco, me respeto y aprendo a vivir bien...............43
  5.4. Implementation/mediation of the programme.........................................................44
    5.4.1. General activities.................................................................................................44
      5.4.1.1. Conference for parents..................................................................................48
      5.4.1.2. Conference for students...............................................................................51
    5.4.2. Classroom activities...........................................................................................52
      5.4.2.1. Teachers in the classroom.............................................................................53
      5.4.2.2. Students in the classroom............................................................................56
    5.4.3. Activities outside school......................................................................................58
      5.4.3.1. Parents...........................................................................................................58
      5.4.3.2. SRHR services.............................................................................................59
  5.5. Concluding remarks..................................................................................................60

6. Challenges of implementation from different actors perspective..............................62
  6.1. Students....................................................................................................................62
  6.2. Teachers....................................................................................................................63
  6.3. Other key informants...............................................................................................65
  6.4. Concluding remarks................................................................................................66

7. Quality, Relevance and Outcomes of the programme.................................................67
  7.1. Quality......................................................................................................................67
  7.2. Relevance................................................................................................................69
  7.3. Outcomes................................................................................................................70
  7.4. Concluding remarks...............................................................................................72

8. Conclusion......................................................................................................................73
  8.1. Overview of main findings.......................................................................................73
  8.2. Implications for policy and practice.......................................................................78
  8.3. Recommendations....................................................................................................79
  8.4. Future research.......................................................................................................80

References.........................................................................................................................81

Appendix..........................................................................................................................89
**Abbreviations**

COMFABOY: Caja de Compensación Familiar de Boyacá (Family Compensation Fund of Boyaca)

DANE: Departamento Administrativo Nacional de Estadística (National Administrative Department of Statistics)

ELN: Ejercito de Liberacion Nacional (National Liberation Army)

EPL: Ejercito Popular de Liberación (Popular Liberation Army)

ETN: Equipo Técnico Nacional (National Technical Team)

ETRI: Equipos Técnicos Regionales Intersectoriales (Regional Technical Team)

FARC: Fuerzas Armadas Revolucionarias de Colombia (Revolutionary Armed Forces of Colombia)

HIV/AIDS: Human immunodeficiency virus infection and acquired immune deficiency syndrome

LGBT: Lesbian, Gay, Bisexual, and Transgender

M-19: Movimiento 19 de Abril (19th of April Movement)

MAQL: Movimiento Armado Quintin Lame (Quintin Lame Armed Movement)

MEN: Ministerio de Educación Nacional (Ministry of National Education)

MPS: Ministerio de la Protección Social (Ministry of Social Protection)

PEI: Proyecto educativo institucional (School Educational Project)

PESCC: Programa de Educación para la Sexualidad y Construcción de Ciudadanía - (Education programme for sexuality and citizenship)

PNES: Proyecto Nacional de Educación Sexual (National Project of Sexuality Education)

SE: Secretaria de Educación (Secretary of Education)

SRH: Sexual and Reproductive Health

SRHR: Sexual and Reproductive Health and Rights

SRR: Sexual and Reproductive Rights

STI: Sexually Transmitted Infection

UNAIDS: The Joint United Nations Programme on HIV and AIDS

UNFPA: United Nations Population Fund

WHO: World Health Organization
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1. Introduction

1.1. Problem statement

Sexuality is a natural part of human development. It includes physical, psychological and social components (WHO, 2010). Sexual ignorance and disempowerment have led to high rates of unwanted pregnancy, HIV and sexually transmitted infections (STI) for many of the world’s youth population (Braeken & Cardinal, 2008). Based on the UNFPA report (2010), developing countries count with around 1.1 billion people between the ages of 15 and 24 among which 40 per cent of girls have their first child before 18 years of age. In Latin America, 29 per cent of the girls got married before 18 years old. Latin America and sub-Saharan Africa have the highest rates of women with STI, excluding HIV. Overcoming the sexual and reproductive health needs of adolescents is essential.

Extensive studies have demonstrated that comprehensive sexuality education programmes lead to positive outcomes of child’s mental, physical and sexual health (Dodge, Sandfort & Yarber & de Wit, 2005; Braeken et al., 2008). To be more precise, effective sexuality education programmes can increase children’s knowledge about sexuality, potentiate positive values, make responsible decisions, understand peer groups and social norms, enhance communication with parents, delay first sexual intercourse, avoid unprotected sexual activity, reduce sexual partners and increase protection to avoid pregnancy and STIs (UNESCO, 2009; WHO, 2010).

Misinformation or low levels of knowledge on sexuality education in adolescents might be due to the difficulties youths face when discussing topics about sexuality. When children see sexuality as a taboo, children might feel shame, fear and guilt of expressing their opinions about sex. Students may feel that others could judge them. As a result, children are not well informed on sexuality or the services available for sexuality and reproductive issues and they may find it difficult to assume sexuality as a natural development of human being (Hughes & McCauley, 1998).

Overall, lack of knowledge about the consequences of unprotected sex, misinformation or low levels of knowledge on sexuality education, limited health care services for sexual and reproductive issues, gender inequalities and difficulties to express their own opinion (because of shame, fear or guilt) are some of the main sexual and
reproductive problems young people face. This study will focus on the implementation of a school-based sexuality education programme. Perceptions of different actors on the quality, relevance and outcomes of the programme as well as the challenges of implementation and some suggestions to overcome them will be examined throughout a case study conducted in Colombia.

Sexuality education has been compulsory in every Colombian school since 1993 (Congreso de la República, 1994). Curriculum policy, however, does not necessarily translate into practice. As a result, the PESCC “Programa de Educación para la Sexualidad y Construcción de Ciudadania” (Education programme for sexuality and citizenship) was designed by the Colombian Ministry of education (MEN) and the United Nations Population Fund (UNFPA) to offer a collection of scholarly guides for schools and teachers to include sexuality education and citizenship at school (MEN & UNFPA, 2008). Nevertheless, teaching sexuality education remains as a challenge especially because in some regions it is considered a taboo and some schools provide sexuality education with a main focus on abstinence (Kohler, Manhart & Lafferty, 2008).

1.2. The present study
This thesis looks at the local implementation of a comprehensive sexuality education programme “Me conozco, me respeto y aprendo a vivir bien (I know myself, I respect myself and I learn how to live healthy)”, which is based on a national programme, the PESCC project (MEN & UNFPA, 2008).

The objective of the research is to conduct a case study at a Catholic secondary school in the region of Soatá in Boyacá-Colombia to examine how the programme is implemented, explore the perceptions of students, teachers, counsellor, director, parents, health-worker and governmental offices about the relevance and outcomes of the programme. Besides, the case study aims to analyse the discourses and policies on sexuality education along with the challenges of implementation and offer some strategies to overcome those challenges.

Research question
From the perspective of various actors involved, to what extend and how is the “Me conozco, me respeto y aprendo a vivir bien” programme implemented in a Catholic secondary school in Colombia?

The following sub-questions are developed to address the main question:
1. What are the main discourses and the official approach to sexuality education in Colombia?
2. What are the objectives of the case study school for implementing the “Me conozco, me respeto y aprendo a vivir bien” programme?
3. How is the “Me conozco, me respeto y aprendo a vivir bien” implemented/mediated at schools by teachers and students?
4. What are the challenges of implementation encountered by teachers and students?
5. From the perspectives of different actors how is the quality, relevance and outcomes of the programme viewed?

1.3. Academic and social relevance

The societal relevance of the study is the possibility that this type of research has to increase the awareness about sexual reproductive health and rights (SRHR) in youth population. Previous studies have proved that comprehensive sexuality education programme improves health outcomes in youth such as early pregnancies, school drop-out, sexually transmitted diseases and increase of contraceptive use (Kirby, Obasi & Laris, 2006; Collins, Alagairi & Summers, 2002).

Comprehensive sexuality education programmes can also help young people to develop healthy sexual identities, sexual well-being and higher quality of life (Kirby, Obasi & Laris). Therefore, the promotion of these programmes may help in achieving some of the Millennium Development Goals, such as a) Reduce poverty and hunger, b) Achieve universal primary education, c) Promote gender equality and empower women, d) Reduce maternal mortality and e) Combat HIV/AIDS and other diseases (Altinyelken et al., 2014; Braeken et al., 2008).

The scientific relevance of the study will be in the knowledge gain about the learning-teaching process of sexuality education programmes within schools that could benefit policy makers and educationalist. Traditional attitudes about gender roles are
associated with earlier sexual intercourse, higher number of partners, more frequent intercourse, less protective sex and increase of HIV infections (Karim, Magnani, Morgan & Bond, 2003; Dunkle Jewkes, Brown, Gray, McIntyre, & Harlow, 2004).

In fact, previous studies have found that teacher’s behaviour and teacher’s ability to discuss sexual issues are influenced by sociocultural norms (Mkumbo, 2012) and teacher’s individual characteristics (Berger, Bernard, Carvalho, Munoz, Clement, 2008). As a result, sexuality educational programmes may suffer modifications, even when teachers have being trained because of the context and the individual features of each teacher.

It is also considered that students’ own characteristics and sociocultural norms may influence the participation in sex programmes. Gender norms and power disparities negatively impact in the attitudes, practices and health of both boys and girls (Rogow & Heberland, 2005). It is expected that boys will be more participative than girls if girls are more vulnerable in that specific context.

This study aims to contribute in the discussion of how teachers and students’ own characteristics and sociocultural environment affect teaching strategies. Besides, it aims to analyse the challenges and developing policies and practices to overcome those challenges to make sure that good quality and effective educational programmes can be offered.

1.4. Outline of the study

Having introduced the aim and relevance of the study, a theoretical chapter, chapter 2, is presented with the main approaches on sexuality education, the role of different actors in implementing sexuality education and the challenges of implementation. Then, a third chapter describes the context where the study took place as well as sexuality education programmes and policies that have existed in Colombia. Chapter 4 describes the instruments, methods, sample used in the study, the ethical considerations and the limitations of the study. Chapters 5, 6 and 7 describe the outcomes of the research: chapter 5 addresses sub-questions 1, 2 and 3, discourses on sexuality education, objectives of the case study school for implementing the “Me conozco, me respeto y aprendo a vivir bien” programme; and the implementation/mediation of the programme at
school. Chapter 6 addresses sub-questions 4 challenges of implementations faced by students and teachers. Finally, chapter 7 addresses sub-question 5 quality, relevance and outcomes of the programme viewed from different actors. Chapter 8 presents the conclusions. It includes a summary with the main findings, implications for policy and practice as well as recommendations and suggestions for future research.
2. **Theoretical framework**

2.1. **Sexuality education**

Sexuality is a natural characteristic of being human. Therefore, understanding our own nature will unquestionably lead to a healthier sexual well-being (Goldman, & Bradley, 2001). In the last decades, there has been an increase in the worldwide awareness on including sexuality education in primary and secondary school. The WHO Regional Office for Europe with the Federal Centre for Health Education and the UNESCO have published documents with recommended standards for sexuality education. Both initiatives concur that sexuality education must be taught with a comprehensive focus, programmes should be locally designed and address the reality of young people’s sexuality (WHO, 2010; UNESCO, 2009). Besides, the WHO guidelines state that sex education must be delivered to children from 0 to 18 years old.

The most persistent discussion about sexuality education has been between those considering that sexuality education programmes should promote abstinence-only and those asking for comprehensive sexuality education programmes (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014). Results from studies in the United States suggest that the efficacy of abstinence-only programmes has not been supported by scientific results (Santelli, Ott, & Lyon, & Rogers, & Summers, & Schleifer, 2006; Kohler et al., 2008). Traditional sexuality education mainly focuses on risks of sexual intercourse, teen pregnancy and STI’s (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014). According to the WHO guidelines, traditional sexuality education has negative effects on children behaviour towards sexuality (WHO, 2010). By contrast, contemporaneous sexuality education programmes include a holistic and comprehensive focus. It incorporates different aspects of sexuality such as: biological, emotional, cognitive, social and cultural; and have a main focus on human rights (UNESCO, 2009).

Braeken & Cardinal (2008) offer three approaches that shape the content and method of sexuality education:
Morality approach: Here sexuality education has a main focus on religious, moral values and norms. Teachers within this approach usually assume that there is a right and wrong and students are supposed to follow those norms and not their own. Parents and teachers have moral norms that influence the way they deliver sexuality education as well as their perception of the community resistance to sexuality education (Braeken et al., 2008). As for students, they are frequently invalidated and assumed as passive subjects.

Under this approach there is a dominant discourse in sexuality education programmes based on heterosexuality and conservative opinions. There are certain topics that are not well described such as sexual diversity and homosexual relationships. Abstinence is a term widely used within these programmes and mainly defined in moral terms like a commitment. Students are frequently encouraged to abstain on sexual intercourse (Santelli et al., 2006).

Health approach: This approach has a main focus on encouraging juveniles to take care of their health outcomes. Sexuality education is addressed by presenting facts about sexuality, unwanted pregnancy and STI. Here, some important topics are not covered in depth such as relationships, pleasure, desires, passion, agency, mistakes and respect (Braeken et al., 2008)

Rights-based approach: This approach has a main focus on rights and aim to allow all members of society to take their own decisions on sexuality. It addresses social inequality and exclusion by questioning gender roles and social stereotypes, which led to each member of the populace to make their own choices about their sexuality (Braeken et al., 2008 p 52). Here children and young people are seen as active subjects that can discuss sensitive issues, explore their opinions and question cultural norms (Altinyelken et al., 2014). Education is then assumed as a political, social, developmental process where empowerment and participatory education are strongly correlated (Braeken et al., 2008).

2.2. Programme implementation
It is recognised that boys and girls maturate earlier nowadays. Pubertal characteristics are appearing at earlier years (Goldman, 2011). In fact, compared with previous decades,
Western society is witnessing the highest level of sexualisation (Goldman et al., 2001). Images, movies, pictures, expressions, magazines include sexual content. Additionally, relevant processes for the consolidation of the identity, gender and values development occur when children are attending school (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014). As a result, schools and teachers are facing new challenges about sexualisation at all educational levels.

2.3. School as a site

School is a suitable environment to include sexuality education. Other sites delivering sexuality education such as hospitals and SRHR services depend on students’ willingness to participate voluntary. However, previous studies have found that students are rarely willing to use SRH services because they worry being seen and judged (Browes, 2014). Additionally, apart from schools, it is difficult to find any other space that allows gathering a similar number of juveniles.

The school board, however, may provide some harmful practices within sexuality education programmes. An ethnographic study from Mirembe & Davies (2001) found that school members might generate four types of control over students:

Hegemonic masculinity: it refers to the power of men over women, a patriarchy system where leadership is defined in male terms, which means that leaders should be the strongest and toughest ones.
Gendered discipline: here there is an emphasis on gender roles. Girls are defined only in relation to boys.
Sexual harassment: it refers to corporal punishments and sexual contact.
Compulsory heterosexuality: it refers to the sexual behaviour expectations of girls and boys.

Thus, even when dangerous practices exist within some schools, they still remain as the most neutral and safe environment to promote sexuality education and the most suitable site to raise student’s awareness about SRHR.

2.4. Actors in sexuality education
2.4.1 Teachers

Teachers are the direct actors who interact with students in daily activities. Therefore, they might be very influential on sexuality education programmes. As reported by the Kirby et al. (2006), in order to provide effective sexuality education programmes teachers must be trained appropriately. Thus, it is important to keep in mind that teacher’s own characteristics, knowledge, beliefs and norms might play an important role on their sexuality education practices.

First, lacking levels of training and the dominance of didactic teaching methods may lead teachers to sometimes avoid using student-centred techniques, which are important for effective skill building (Kirby et al., 2006). Similarly, inadequate training on sexuality education usually means that those teachers that felt uncomfortable if discussing topics about sexuality, hardly ever gain confidence to do so later on (Buston, Wight, & Scott, 2001). Resistance among teachers to discussing sexual behaviour with adolescents may mean that pupils, teachers, or both, feel uncomfortable discussing sexual matters in the classroom. Teachers may especially avoid talking about condom use, but when they do; they might dissuade its use and encourage abstinence (Kirby et al., 2006). According to Kirby et al. (2006) those limitations make schools approval using health-workers or other local experts to teach sensitive issues. Health-workers might help in this regard, but because of resources and availability, activities will be less frequent and have less impact on children SRH.

Second, teachers’ own features might influence their sexuality education practices (Berger et al., 2008; Mathews, Boon, & Flisher, & Schaalma, 2006). Attitude, subjective social norms and self-efficacy have been found to be influential when implementing sexuality education programmes (Paulussen, Kok, & Schaalma, 1994). A study with data from 12 countries in Europe, Asia and Africa found that when teachers have high levels of religious practices, they have difficulties accepting equality, homosexual rights, abortion and including sexuality education before 15 years old (Berger et al., 2008). It is particularly frequent that teachers in developing countries encounter problems to discuss openly about sex because of traditional norms and religion (Hughes, & McCauley, 1998).

Third, teachers struggle to accept that adolescents are also a sexual person (Braeken & Cardinal, 2008). Even when sexuality education is widely accepted in youths
(WHO, 2010), there is still reluctance from adults to accept juveniles as sexual beings (Hughes et al., 1998). From a traditional perspective, teachers usually assume youth as passive subjects that must be told about the good and bad behaviours that are culturally accepted. Teachers cannot deny student’s sexual behaviour and impose their will. As stated by Francis (2010), in order to have empowered juveniles it is important to treat them as agents.

Fourth, teachers might feel that they are in position of authority and could use regulatory sanctions, such as corporal punishments, or use sexual contact (Dunne, Humphreys, & Leach, 2006). According to the WHO (2012. p.4) studies in Africa, south Asia, and Latin America have reported a large number of girls experiencing sexual harassment and on school and university premises by peers and by teachers.

Dunne et al. (2006) state that other type of violence can occur at school, such as verbal abuse and bullying. Gordon (1995) found that some teachers perceived female students as less successful on the academic level, lazy and less concentrated. Considering that sexuality education at school encompasses student-teacher interactions, the way teachers view their students is important. Specially because it has been found that it might affect teaching strategies (Browes, 2014).

2.4.2 Students

Even when teachers have an important role on implementation, students are also acknowledged as crucial actors of the implementation because they are the main reason of including sexuality education at school. Still, previous studies have found that typically students are viewed as passive subjects (Prophet & Rowell, 1993) while teachers are portrayed as dominating the teaching-learning process.

Tabulawa (2004) states that participation of students within the activities in the classroom is associated with other factors such as the position students occupy in relation to other students and their teachers. According to the author, background factors like age, race and grade might have an influence on the dynamic of the classroom and may explain why students hesitate to participate. For instance, teachers within the classroom are viewed as wiser just because they are older, which can make students not question them.
Regarding sexuality education programmes, there is still no agreement about what makes a programme effective (Kirby et al., 2006). Discussions on this regard have claimed that existing sexuality education programmes may not be appropriated because it does not include all the female population. Rogow & Haberland (2005) argue that in developing countries access to sexuality education is especially difficult for girls because a considerable number of them are not at school. Additionally, the needs of both boys and girls regarding to SRHR might differ, considering that the reasons for having sexual intercourse are different for boys and girls; where girls state looking for love and approval and boys declaring be motivated by curiosity and pleasure (Rogow & Haberland, 2005).

Differences between boys and girls are also evident in their power. As Gupta (2000) explains, there is an unbalance in the heterosexual relations within cultures where power favours man because man's pleasure prevails over woman's pleasure. Men have the power of deciding when, where and how sexual intercourse takes place. Patriarchal beliefs led to the spread of gender inequality (Mirembe & Davies, 2001). Schools with patriarchal settings can be harmful, especially for girls because their sexual behaviour is frequently seen as immoral and rebel (Smith & Harrison, 2013). Besides, in those schools it is common to assume that girls participating on sexuality education programmes are ‘easy’. Sexuality educational programmes need to address and create room for discussing such issues to encourage gender equality.

Student’s opinions are quite important as well as their role in the implementation on the sexuality education programme. This study aims to know student’s behaviours and perspectives about the programme because it will provide valuable information on it. Students here are not assumed as passive subjects, but as active actors (Browes, 2014). Still, it is important to keep in mind that student’s needs and behaviours depend of previous education, previous experience and their beliefs of what is culturally appropriated (Wight, 1999).

2.5. Challenges in implementing sexuality education programmes
Including sexuality education at school is not an easy task (Buston, et al., 2001). This section focuses on the challenges of implementing sexuality education. One of the main
challenges of implementing sexuality education at school is to transform traditional conceptions of those who claim that when providing information on sexuality to young adults it will encourage them to have sexual intercourse.

There is a traditional impression that sexuality education and promiscuity are the same. However, an extensive number of studies have demonstrated that sexuality education does not lead to early sexual intercourse or an increase in sexual activity (Dodge et al., 2005; UNESCO, 2009; WHO, 2010). When sexuality education is compared to promiscuity, it focuses on the negative aspects of sexuality. Similarly, it might strengthen existing inequalities and stereotypes where boys are seen as sexual predators and girls as passive receivers of male desires (Braeken & Cardinal, 2008).

The challenge of including comprehensive sexuality education must be a priority to improve youth’s SRHR. Even when programmes claim to be comprehensive, teacher’s fear of encouraging youth to have sexual intercourse, and to lack support from parents and school fellows may lead them to use abstinence-only education (Braeken & Cardinal, 2008). However, previous studies have shown that abstinence-only education is ineffective and do not improve juvenile's SRHR (Kohler et al., 2008; Santelli et al., 2006).

Teachers should be aware that classroom practices on sexuality education might relate to gender inequalities within the society. Teacher’s own opinion of gender roles might determinate the treatment of their female students inside and outside school. Mirembe & Davies (2001) found that teachers sometimes picture girls as victims, which reinforce female weakness. Thus, in order to promote gender equality at the community level, teachers must avoid exposing gender inequalities by assuming girl’s sexuality in relation to boys.

Traditionally, parents encourage their children to grow with the same values and views. By contrast, when teaching sexuality education, teachers encounter the opposite feeling. Teachers must try really hard no to show their own values and norms so students will not feel judged about their perceptions and choices regarding to their own sexuality (Buston, Wight, & Scott, 2001). As stated earlier, teacher’s beliefs influence their acceptance to certain sensitive topics on sexuality education (Berger et al., 2008).
Finally, a barrier for teachers to implement sexuality education is the very little time available for teachers to develop, and prepare for sex education (Buston, 2001). Teachers usually had to teach their subject, attend parents, give careers advice, give grades, prepare their classes and implement other projects (which, like sex education, usually lacked specific training and a prescribed curriculum). Lack of resources and funding relate to this matter. Statutory training and appropriated materials will make easier for teachers to deliver sex education.
3. Country background

3.1. Colombia
Colombia, officially called as Republic of Colombia, is located at the North-West of South-America, bordered to the North-West by Panama; to the east by Venezuela and Brazil; to the south by Ecuador and Peru (Figure 1). It shares maritime limits with Costa Rica, Nicaragua, Honduras, Jamaica, Dominican Republic and Haiti. Colombia has a GDP of 377.7 billion (US$), an inflation of 2.9% and 48.93 million of inhabitants (World Bank, 2014).

![Map of Colombia in Latin America (2015)](http://familiesworldwide.co.uk/images/buttons/maps/Colombia.png)

Population is highly diverse, the National Administrative Department of Statistics (DANE, 2005 a) reported that 14% of the Colombian population belong to some minority ethnic group such as: Afro-descendants 10.6%; Indigenous 3.4% (represented in 80 different cultures); and Roman 0.01%. Population adhere to Christianity accounts for 87.6% of the total population of which 70.9% are Roman Catholic and 16.7% are Protestant or Pentecost. From the remaining 12.4% of the whole population, 4.7% are atheist and 3.5% define their religion as “I believe in God, but do not follow any religion” (Beltrán, 2012).
Colombia has been in conflict since the 60’s with different actors involved: left-wing guerrilla (such as the FARC, ELN, EPL, MAQL and M-19), right-wing paramilitaries, drug traffickers, the government, the military forces and the civilians (Yaffe, 2011). The illegal armed groups were originated after the civil conflict called “La Violencia” which took place between 1946 and 1966 (Ibáñez, & Vélez, 2008). The country was drastically divided between two Colombian Parties, “Liberales” and “Conservadores”. After this period, the left-wing guerrilla group was created to protect the democratic government. In the early 80’s the illicit drug trade emerged with the cultivation and tracking of marijuana and cocaine. Later on, drug traffickers, ranchers and some people serving in the military created the right-wing paramilitaries groups to protect economic interests and mitigate the violence from guerrilla (Yaffe, 2011). The intensity of the civil war is one of the longest on-going domestic confrontations in the world; only Israeli-Palestinian and the Indian-Pakistani conflicts overcome it (Rodriguez, & Sanchez, 2012).

Effects of the war have been reflected on the high number of internal displacements and humane lost. Cycles of violence persists with homicide rates tripling between 1970 and 1991 (Ibáñez et al., 2008). According to the World Bank (2014), since 1985 to 2012 between 4.7 million and 5.7 million people were internally displaced, 220,000 people were killed, 27,000 people were kidnapped, 25,000 people disappeared and 6,421 children were recruited by insurgent forces. Lack of presence of the government in certain areas, high local earnings from natural resources’ extraction and the predominance of presence of guerrilla or paramilitaries are some of the main reasons why some areas within the country are more vulnerable. Besides, rural population, afro-Colombian and indigenous population are over-represented and remain as the most vulnerable population of the conflict.

The conflict has not only impacted on human lives, but also on the economical progress of the country (World Bank, 2014). The DANE (2014) informed that in 2002 poverty rated at 49.7% and extreme poverty rated at 17.7%. Nevertheless, in the last years, poverty has been reduced significantly in the country. In 2014, 29.3% of the population were living in poverty, from which 8.4% were living in extreme poverty. Still, poverty and extremely poverty remain considerable high in rural areas accounting for
22.75% of the total. Regarding to inequality, the Gini coefficient indicate that it has also fallen in the last years from 0.57 in 2002 to 0.54 in 2012 (World bank, 2014). Disadvantaged groups such as afro-descendants, indigenous and displaced by violence are the most vulnerable to poverty and inequality (Agudelo-Suárez, Martinez-Herrera, Posada-Lopez, Sanchez-Patiño, & Viñas-Sarmiento, 2014).

The Colombian education system has also suffered the consequences of the war. Schools have been used as military base and armed groups have used schools as recruitment places. Between 1991 and 2011, 9000 teachers have been threatened, 1100 have been forced to escape and 60 have disappeared (Watchlist, 2012). In 2001, only 49% of girls between 15 years old and 19 years old were in school (Population Council, 2001). The government have made big efforts to cover all youth population in the education system. However, until 2012 data showed that an estimated of 11% of the total population of juveniles between 5 and 16 are unschooled, it is 1’199.936 of children (SIMAT, 2012). The main reasons for which students drop out are child labour, the civil war, forced displacement and lack of economic resources (SIMAT, 2012; Watchlist, 2012).

3.2. Concerns related to sexual and reproductive health rights
Adolescent population in Colombia (youth between 10 and 19 years old) is about 8 million, and constitutes one-fifth of the country’s total population (20%) (Perez & Dabis, 2003). UNAIDS estimates that 71000 adults and children live with HIV/AIDS in the country. According to the National Survey of Demography and Health (Profamilia, 2010), one in five women (19.5%) between the ages of 15 and 19 years are either mothers or pregnant and 36% of adolescent pregnancies end in abortion. In 2013, 6389 girls between the ages of 10 and 14 years gave birth.

Socio demographic features show that teen pregnancy in Colombia is higher in rural areas (22%), among individuals with lower educational levels (54% not educated adolescents and 42% for adolescents with primary education) and adolescents displaced by the civil war (35.4%). Colombia has the highest rate of children living without either of their parents 11% (Child Trends, Incorporated, 2014). 85% of the 20.739 victims of
sexual assault in 2013 were women and the majority of them were girls from 10 to 14 years old (Forensis, 2013).

Women are a vulnerable group of violation of health and rights in the country. The Colombian Constitutional Court stated that violence against women is a habitual, extensive, systematic and invisible practice in the Colombian armed conflict (Watchlist, 2012). Statistics on this topic are scarce because researchers have been afraid of facing retaliation by armed groups. According to the UNFPA report (Ward & Marsh, 2006), in 2003, 36% of internally displaced women in the country had been forced by men into sexual relations, the on-going conflict have lead to an estimated of 35,000 to 50,000 trafficked women in 2000.

Sexual violence, repression of feelings for men and suppression of pleasure for women are social norms in Colombia (MEN & UNFPA, 2009). The vulnerability of women rights and the limited access to reproductive-health services (Ward & Marsh, 2006) have obstructed the development of the country. The Colombian government has been aware of these problems and as a result several projects and laws aim to counteract them.

3.3. Current policies and education programmes on sexuality education.

Colombian policies on SRHR have been based on currently national policies and the agreements assumed by the country within the international conferences in this regards.

3.3.1. National policies

Retrospectively, Colombian government recognized the importance of SRH and sexuality education. In this regards, from regulating laws to building up long term national policy plans, the government took several actions that acknowledge the right for children and adolescents to have access to information about SRH:

National Constitution (1991)

The Colombian government include SRH not only as a fundamental right, but also as a social, cultural and economic right (Constitucional, 1991).

Resolution 3353 (1993)
Sexuality Education is required to be mandatory in all national schools from preschool to secondary school (MEN, 1994 a).

**General Education Law - Law 115 (1994)**

It indicates that all educational levels must focus on the integral development of the juveniles. Additionally, it affirms that sexuality education must be mandatory in all, public or private, schools and should be instructed according to the physical, psychic and affective needs of the students and her/his age (Congreso de la República, 1994).

**Education Programme for Sexuality and Citizenship-PESCC (2007)**

The PESCC programme is a policy from the MEN, the objective is to improve the educational sector by strengthen the pedagogical projects of sexuality education with a main focus on citizenship, human, sexual and reproductive rights (MEN & UNFPA, 2007).

**Law 1098 – Childhood and Adolescence Code (2006)**

It states that children are subjects of rights. The code contains the norms to protect children and adolescents. Regarding to the schools, article 44 number 10 states it is mandatory for all schools to guide all juveniles on the learning process of SRH and married life (Congreso de la República, 2006).

**Ten-year Public Health Plan (2012-2021)**

Within the Ten-year Public Health Plan the dimension of rights and sexuality is considered. Some strategies were planned to improve SRR on juveniles such as the improvement of the “Servicios Amigables - Frindly Services”. Friendly Services are institutions for general population, especially adolescents, who need information, guides, attention and help on SRRH (MPS, 2013).

**Law 1620 (2013)**

This law lead to the creation of the National System of Scholar Coexistence and the education based on human rights, sexuality education, prevention and reduction of scholar violence (Congreso de la República, 2013).

**National Policy of SRH (2014-2021)**

It considers “sexuality” as human condition, a normal practice within human rights, where sexual and reproductive rights are considered. The National policy of SRH (2014-
2021) is based on human rights applied to sexuality and reproduction (MPS & UNFPA, 2014).

Sexuality education has led to many discussions within the country in the academic field, governmental and non-governmental institutions (Brigeiro, Melo Moreno, Rivera Amarillo, & Rodríguez Rondón, 2010). Discourses on sexuality education in Colombia have mainly focused about the inclusion of sexuality education at early age, its objective, method and content. Within the country, sexuality education has been predominantly contemplated as genitality\(^1\). When sexuality is contemplated as genitality, sexuality education then is assumed to include only certain topics such as puberty, reproduction, contraceptive methods and STI’s (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014).

Even when sexuality education has been mandatory in all Colombian schools since 1993 (MEN, 1994), it is limited and insufficient in most schools, especially because a considerable number of schools are lacking ways to include sexuality education in their curriculum (MEN & UNFPA, 2005). As a result, the MEN with the help of national and international organizations have designed sexuality education programmes thereby sexuality education can be included in all national schools.

3.3.2. Education programmes on sexuality education

Sexuality education programmes in Colombia have been scarce. Only in 1993 when sexuality education became mandatory under the resolution 3353 (MEN, 1994a), the first National Project of Sexuality Education (Proyecto Nacional de Educación Sexual-PNES) was created. The PNES programme was included at school as a pedagogical project (MEN & UNFPA, 2008).

In 1999, the MEN with the UNFPA created a new programme to reduce the pedagogical challenges of including sexuality education at schools. The Education Programme in Sexual and Reproductive Health for Juveniles was meant for children

\(^1\) Genitality, or sexual intercourse, is only one aspect of the large spectrum of sexuality.
within and outside the schools from Bolivar, Cauca, Córdoba, Nariño and Sucre (MEN & UNFPA, 2008).

Between 2006 and 2007, the MEN, the UNFPA, national and international organizations with expertise on sexuality education discussed alternatives to reduce the educational difficulties encountered by teachers to include sexuality education. Sexuality education and citizenship were connected and the PESCC programme was created. The programme has been implemented since 2008 and has been adopted in 53 schools within 235 branches in 5 regions of the country (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014).

3.4. Research location

The catholic school “Escuela Normal Superior la Presentación” is located in Soatá, a small town in the North-East of the department of Boyacá (Figure 2). Soatá has an extension of 136 km² and a population of approximately 9,313 inhabitants of which 5,752 people are living in the urban area and 3,561 in the rural area (DANE, 2005 b). Its economy is mainly based on agriculture and ranching industry in form of minifundios.

![Figure 2. Map of Soatá in Boyacá, Colombia (2015) Image: Taken from the website of the mayoralty of Soatá](image)

The school is placed in the main square of the town, next to the main church (Figure 3). It counts with 45 teachers and enrolls approximately 885 students from preschool,
primary, secondary and complementary education. As most of the national school in Colombia, the “Escuela Normal Superior la Presentación” preserves in its education system citizenship education, information-transmission and imposition of catholic values (Jaramillo & Mesa, 2009). Students are characterised mainly by being from families with low socio economic status and low educational level where the familial organization is irregular with a big number of female heads of household.

![School “Escuela Normal Superior de Soatá” (right) and the Main Church of Soatá (left)](image)

**Figure 3.** School “Escuela Normal Superior de Soatá” (right) and the Main Church of Soatá (left)

*Photo: Oscar Javier Dávila (2015)*

“Me conozco, me respeto y aprendo a vivir bien” is a cross-sectional programme designed and implemented by the public school “Escuela Normal Superior la Presentación”. The cross-sectional programme was adopted to teach sexuality education based on the PESCC project with the support of the MEN and the Secretary of Education (SE) of Boyacá (MEN & UNFPA, 2008). In chapter 5 the programme is explained in more detail.

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2 Complementary education refers to the 2 extra years that Central Normal Schools have for students that want to have a 2-years degree to teach at primary school.
4. Methods

The main research question and the following sub-questions are mainly based on perceptions and involved gathering views of students, teachers, parents and governmental offices. As perceptions of the community are not susceptible to numerical analysis and given that the intention is to analyse rather than generalize, the research uses a qualitative approach (Cohen, Manion & Morrison, 2007). The design is a single instrumental case study (Creswell, Hanson, Plano & Morales, 2007).

As a case study, in order to gain deep understanding of how the “Me conozco, me respeto y aprendo a vivir bien” programme is implemented and what are the perceptions about the pertinence of the programme and the outcomes, the research focuses on one specific school “Escuela Normal Superior La Presentación”. The contact with the school was established through the Ministry of Education in Colombia. Francine Botero, who is in charge of the PESCC programme in the MEN, recommended the school because of its good results, the Escuela Normal Superior La Presentación was chosen as one of the schools with the highest level of implementation of the PESCC project at the national level (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014).

4.1. Sample

For this study, the sample size was taken as follows:

1) Students: students from grades 10 and 11 of secondary education within the Escuela Normal la Presentación were randomly selected. 7 boys and 8 girls. In total 15 students participated in this research.

2) Teachers: teachers with higher involvement in the programme were prioritized. It was 2 males and 9 females. In total 11 teachers participated in this research. Interviewed teachers were between 40 and 58 years old with only few of them in the 30’s. Most of the teachers have postgraduate studies and the majority were Roman Catholic with few being Pentecost.

3) Director of the school: the principal sister Marisol Mendoza was 40 years old and has been in the school for three years.
4) Counsellor of the school: A female psychology of 35 years old who is in charge of counselling child with academic, personal and familiar impediments. She is adhering to Catholicism.

5) Parents: 5 mothers of some of the interviewed students were randomly selected. All of them were Catholic.

6) Governmental offices: 2 governmental officers (Secretary of Health and Secretary of Education) were selected by using purposive sampling because they were knowledgeable people. Both participants were Catholic and female.

7) Nurse in the Hospital of the town: the nurse interviewed was 38 years old, female and Catholic, she was part of the “Unidad Amigable (Friendly Unit)” an institution within the hospital that helps adolescents with sexual and reproductive services. The Friendly Unit and the school have an agreement to create activities in conjunction on sexuality education within the school at least once in a year.

The total sample size consisted of 36 participants (see Table 1 & Table 2).

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Participants (interview duration)</th>
<th>Number of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interviews</td>
<td>Teachers (between 30 to 60 min)</td>
<td>9 female, 2 male</td>
</tr>
<tr>
<td></td>
<td>Students (between 15 to 30 min)</td>
<td>8 female, 7 male</td>
</tr>
<tr>
<td></td>
<td>School Counsellor (35 min)</td>
<td>1 female</td>
</tr>
<tr>
<td></td>
<td>Director (60 min)</td>
<td>1 female</td>
</tr>
<tr>
<td></td>
<td>Parents (between 20 to 50 min)</td>
<td>5 female</td>
</tr>
<tr>
<td></td>
<td>Representative of the Hospital (60 min)</td>
<td>1 female</td>
</tr>
<tr>
<td></td>
<td>Representative of the Secretary of Health (30 min)</td>
<td>1 female</td>
</tr>
<tr>
<td></td>
<td>Representative of the Secretary of Education (22 min)</td>
<td>1 female</td>
</tr>
</tbody>
</table>

Total interviews: 36

4.2. Instruments

The instruments selected for collecting qualitative data were:

4.2.1. Documentary analysis

Documentary analysis helped to answer sub-questions 1, 2 and 3. The purpose of analysing these documents was to gain in depth understanding of:

a) The main discourses and official approach on sexuality education in Colombia (sub-question 1). Policy briefs and research of sexuality education were the documents of
interest. They provided the main input about sexuality education in Colombia, the policies that guide sexuality education and the discourses that have taken place in the last years.

b) The objectives of the school for implementing the “Me conozco, me respeto y aprendo a vivir bien” programme (sub-question 2) and the manner in which the programme is implemented/mediated at school (sub-question 3). The curriculum of the school, which provides the main interest of the school to implement the project, documents from the MEN about the PESCC, which provides the main objects to include sexuality education within the school and reports of the scholar project, which provides the evidence of what is stated in these documents.

All documents were analysed by skimming (superficial examination), reading (thorough examination) and interpretation (Bowen, 2009).

4.2.2. Observations

Observations helped to answer sub-question 3. The object of doing observations was to identify the complexity and situatedness of teaching and learning sexuality education. Observations were held with a non-participant observer (myself) sitting in the back of the classroom. Attention was paid to the teacher's interventions, student’s participation and the following interactions: teacher to student, student to teacher and student to student. When observing, the researcher took notes to register the findings.

Table 2. Total Sample size of the observations

<table>
<thead>
<tr>
<th>Instrument</th>
<th>Participants</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observations</td>
<td>Parents</td>
<td>Conference for parents</td>
</tr>
<tr>
<td></td>
<td>Students (in grades 9, 10 y 11)</td>
<td>Conference for students</td>
</tr>
<tr>
<td></td>
<td>Students (in grade 10)</td>
<td>Class: human &amp; sexual rights</td>
</tr>
<tr>
<td></td>
<td>Students (in grade 8)</td>
<td>Class: Reproduction</td>
</tr>
<tr>
<td></td>
<td>Students (in grade 11)</td>
<td>Quarter of instruction: Equality</td>
</tr>
<tr>
<td></td>
<td>Students (in grade 9)</td>
<td>Class: National Constitution</td>
</tr>
<tr>
<td></td>
<td>Students (in grade 8)</td>
<td>Class: Self-esteem</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total observations: 7</td>
</tr>
</tbody>
</table>

Observations were held in two places:
a) Within the classrooms. Activities of the programme were observed in the classroom, for a total of 5 observations approximately. Each observation took between 20 and 50 minutes. Observations were held in 8, 9, 10 and 11 grades).
b) In the auditorium. 2 activities were observed here, one for parents and one for students. Lecturers were from the Rotary Club (external institution that support the school with talks and activities on sexuality education) to reinforce the activities of the “Me conozco, me respeto y aprendo a vivir bien” project.

4.2.3. Semi-structured interviews
Interviews helped to answer sub-questions 1, 3, 4 and 5. The object of interviewing students, teachers, counsellor, director, parents, governmental offices and a health-worker was to gain depth understanding of:

a) The main discourses and official approach on sexuality education in Colombia (sub-question 1). Here the Secretary of Health and the Secretary of Education helped to understand the discussion.
b) How the “Me conozco, me respeto y aprendo a vivir bien” is implemented/mediated at schools (sub-question 3). Students, teachers, the counsellor and the director of the school implementing the programme provided information in this regard.
c) Challenges of implementation experienced by teacher and students (sub-question 4). All participants provided information in this regard.
d) Quality, relevance and outcomes of sexuality education from the perspective of students, teachers, parents, director, counsellor of the school, and governmental offices (sub-question 5). All participants were asked about this issue.

Audiotaping and notes were used for registering the interviews (Kajornboon, 2005). Teachers were interviewed within their own classroom when students were not present; students, parents and the school counsellor were interviewed in the school counsellor office, which is located within the school. The director of the school was interviewed in her own office within the school and representative offices were interviewed in their own offices within the Secretary of Education and Secretary of Health in Tunja, capital city of the province of Boyacá (An example of students interview is presented in APPENDIX I).
4.2.4. Field Diary

A field diary was used to register the information of the whole data collection. It was specially used during observations because those were not recorded. Most of the information within the field diary describes attitudes, behaviours, expressions and interactions between teachers and students within the classroom, activities with parents, informal activities and conversations outside the classroom. Besides, the diary contains the research own impressions, preliminary conclusions, reflections on policies and suggestions for future research. All information, interviews and observations were made in the mother tongue of the community, Spanish.

4.3 Data analysis

Document analysis, notes from observations, interviews and the field diary were transcribed in the original language (Spanish) in a word document. Considering that the amount of data was large, the word document was exported into the computer programme Atlas.ti. Then, data was read and re-read for first interpretations. Afterwards, data was organized by research questions and theory. Some pre-defined codes were used such as ‘discourses’, ‘objectives’, ‘implementation’, ‘challenges’, ‘quality-relevance’ and ‘outcomes’. With the help of the Atlas.ti software, codes and sub-codes were created. After re-reading more codes emerged. Finally, participants were categorized according to their roles (male student, female student, male teacher, female teacher, director, counsellor, health-worker and government member). Finally, a summary of the patterns and findings were presented. Quotes were given to clarify the analysis.

4.4. Ethical considerations

Keeping in mind that sexuality is such a sensitive topic, privacy and anonymously were respected for all participants, especially for the children involved in the study. Topics were discussed with all respect and without judging or alarming the participants. All participants were informed about the aim of the study and were asked for permission to be recorded and freely withdraw from the interview/observation.
However, it is acknowledged that as a qualitative study, there is an influence from the researcher on the study. Having lived in big cities and studying abroad gave me a different perspective on topics that might be culturally accepted. It is not intentional, but is also very difficult to avoid. In this regard, the information will be presented as unbiased as possible.

4.5. Limitations of the research

Some limitations were identified in the study. First, the most representative activity of the project the “carnival of sexuality” could not be observed. Therefore, it was not possible to appreciate how most sensitive topics are included at school. Still, some data was collected from interviews and documents from previous years, but remains unclear how those topics are addressed. Second, sample of parents only included mothers, from interviews it was found that fathers are less involved on sexuality education discussions with their children and students feel less comfortable talking about it with them. Therefore, interviews with fathers would have provided some information on this regard. Finally, as a case study, the results of this study cannot be generalized to other schools and/or other sexuality education programmes in Colombia as explained earlier, that was not the intention of the research.
5. “Me conozco, me respeto y aprendo a vivir bien” programme
This chapter addresses sub-questions 1, 2 and 3. Question 1 relates to the discourses and the official approach to sexuality education. Here, only the discourses will be presented because the official approach to sexuality education in Colombia was widely explained in section 3.3.1. Questions 2 and 3, refer to the objectives of the case study school for implementing the “Me conozco, me respeto y aprendo a vivir bien” programme and the implementation/mediation of the programme at school for teachers and students.

5.1. Discourses on sexuality education in Colombia
Discourses on sexuality education refer to participant’s opinions about including sexuality education at early age, its objective, whether it is acceptable or not sexual intercourse among students and the reasons behind early sexual intercourse.

The vast majority of participants agreed that sexuality education must be included from early childhood. Teachers and principals of the school claim that sexuality education should be based on prevention, values and self-care. By contrast, representatives of the government, representative of the hospital and only one teacher (the leader of the project), consider that sexuality education must be based on student’s rights and sexuality must be considered as a natural part of human development. Furthermore, some teachers and the principals of the school believe that it is important that students understand the difference between sexuality and sex. As seen in previous studies, there is a tendency among Colombian schools of assuming sexuality education as genitality (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014). Therefore, teachers want sexuality education to be understood as a wide concept that includes values and cultural aspects.

In general, from the three approaches on sexuality education (morality, health and right-based) offered by Braeken et al. (2008), results in this chapter show that the moralistic approach is the discourse that prevails among the school board where abstinence to sexual intercourse is the main focus. Only those in the government, the hospital and a teacher with extensive training advocate for the right-based approach.
Within the school, students are mainly seen as passive subjects and for some of the school members it is difficult to accept that they are allowed to express themselves freely. The comments of the director of the school illustrate this trend.

“I consider that the Law 1098 (Childhood and Adolescence, 2006) has been a failure. It assumes that we, as adults, should respect the free development of personality in all children. No, definitely no. It is a misunderstanding. Parents should provide everything to their children in such a way that children could make responsible decisions. A person is an adult when he/she knows how to make decisions... Do you think a mother is in favour of the free development of personality of her children when she allows her 10 years old daughter to have an older man as her boyfriend and allow them to have sexual intercourse? I really don’t think so (Director of the school)”

In line with previous studies, results here show that indeed teachers are reluctant to accept that adolescents are sexual subjects (Hughes et al., 1998; Braeken et al., 2008). When participants were asked whether it is acceptable for adolescents to have sexual intercourse, apart from those working with the government and the hospital, sexuality was not considered acceptable for adolescents.

“... At the end we always send the message of not having sexual intercourse. We have to make them know that as students it is not a good decision...they are not prepared for it (counsellor of the school)”

“Under any circumstance it cannot be allowed. I always compare it with an orange tree. It is not fair for a 20 cm plant to bear an orange. They must follow the natural track for which they have been created. If students are allowed to have sexual intercourse, they will lose their autonomy, respect for themselves and the control of their life (female teacher of Spanish, 38 years old)”
“Adolescents should not have sexual intercourse. I always say: if they start early, they will get tired early. That’s why many marriages are ending up in divorce nowadays. I’ve been married for 35 years now and by that time we were not allowed to have sexual relations until marriage (female teacher of pedagogy and psychology, 55 years old)”.

Discourses about the causes of early intercourse varied among participants. The most common reasons given were lack of family support, peer or partner pressure and curiosity. Other causes mentioned were: media/Internet, adolescents are alone at home for long periods of time, adolescent are under the influence of alcohol or drugs, lack of sexuality education and when adolescents want to hold his/her partner. Some misconceptions were seen in this regard, a biology teacher stated that one of the reasons for early intercourse is the food juveniles eat.

“As far as I know, one of the reasons for early intercourse is the amount of hormone in the food. For instance, chicken has a lot of hormones that make that adolescents have a faster growing, which lead to an acceleration in their sexual needs (female teacher of biology, 43 years old)”.

5.2. Influence of the Catholic Church
Colombia is widely characterised by the high number of Catholics (World Bank, 2014). Consequently, it is expected that the Catholic Church may have an influence on the national discussions on sexuality. Representatives from the Secretary of Education and Health states that the Church has not direct influence on this because the Church do not have representation on the National Congress. Therefore, they are not deciding on laws and policies. However, they recognise that there is an indirect influence.

Policy makers, politicians, teachers and general population have a strong moralistic approach regarding to sexuality based on their Catholic believes. The government is aware of this and as a result hospitals with the help of “Friendly Units” are drawing the attention of parents, representatives of the Church and other institutions
to make them aware of the importance of talking about sexuality to children and assuming sexuality as a natural development.

“We have seen many cases within Catholic and not Catholic schools where teachers are not allowed to talk about sexuality because it is argued that children can become more promiscuous. Nevertheless, when we talk to the community and explain that sexuality not only refers to sexual activity but also to friendship, gender, affection and is part of human development, they change their preconceptions. When people have clear conceptions on sexuality many personal barriers are removed... I don’t think there are some sectors against sexuality education what I think is that some sectors don’t know the policies (Representative of the Secretary of Education)”

As seen in previous studies, the present study shows that when teachers have high levels of religious practices they avoid discussing about sensitive issues of sexuality (Hughes et al., 1998). Inside the Escuela Normal Superior la Presentación most teachers argued that some topics were not covered in depth because of the religious background of the school.

“I think it is important for children to understand pretty well conception methods. However, because of the religious background of the sisters, this information is scarce (female teacher of chemistry, 52 years old)”

“There are some topics that are difficult to include in the classroom we may mention some, but superficially. It is mainly because this is a Catholic school (female teacher of pedagogy and psychology, 29 years old)”.

Additionally, norms within the school seem to shape student's behaviour. According to the representative of the hospital there is an impact of the religious background of the school on student’s behaviour and their silence regarding sexuality.
“I think juveniles behave differently within and outside the Catholic school. Usually, they have many questions and make questions very openly about sexuality and reproduction. However, if the activity (talk, conference, carnival of sexuality etc.) is developed with some sisters around, their behaviour change because they are conditioned. They know they should behave in certain way within the school according to what the teachers and the sisters want (Representative of the Hospital)”.

5.3. Objectives of the programme

5.3.1 Education programme for sexuality and citizenship - PESCC

The PESCC programme assumes sexuality as a human dimension that provides well-being and health for Colombian youth. Sexuality education is therefore suggested as cross-sectional programmes that must be built in each school according to the school’s own needs and support all young responsible decision-making. The objective of the programme is

“Create pedagogical activities that promote the development of skills on students so they can incorporate SRHR in their daily life. As a result, students could make responsible decisions that allow them to have a healthy sexual and reproductive life that enrich their life project (MEN, 2008)”

The PESCC includes a fundamental element “hilos conductors (conductive threads)”. The conductive threads provide the matrix of the main topics included within each area at school, it means, it provides the concrete pedagogical actions that should be developed within the school to achieve certain academic competence. The conductive threads must be included after performing an analysis of the context in each school (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014).

The implementation of the programme is coordinated by the MEN, which is the maximum authority, then the Secretaries of Education in each department (Colombia is conformed by 32 departments). Additionally, the MEN created two technical teams to
train teachers on sexuality education “Equipo Técnico Nacional, National Technical Team” (ETN) and “Equipo Técnicos Regionales, Inter-Sectoral-Regional Technical Team” (ETRI). Sexuality education training for teachers has been done through the Central Normal Schools. The ETRI trained few teachers from the Central Normal Schools of each department. Then, trained teachers train other teachers from other public schools in their respective department (MEN, 2008). National, local and school teams are supposed to meet regularly to discuss the programme, share outcomes and design future plans in a research-action-reflection.

The PESCC does not provide the plan for a standardized and unique project of sexuality education for all schools. It rather proposes the conductive threads that organize and articulate the basic competences on sexuality and citizenship. In this sense, schools are autonomous and independent in the design and creation of their own sexuality education project (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014). In summary, the PESCC more than a programme is a policy and a guide to help schools and teachers to include sexuality education as a cross-sectional project by using conductive threads.

The PESCC programme provides 3 guides (Figure 4) (MEN & UNFPA, 2010):

![Guides of the PESCC-MEN & UNFPA (2008)](image)

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3 Central Normal Schools are schools with 2 more grades for students that want to have a 2-years degree to teach at primary school.
Guide 1: “Sexuality education for children, adolescents and youth”

It describes and defines the conceptual principles or themes of the PESCC.

1. Human being: it refers to equality and dignity. All humans being are active subjects of rights.

2. Gender: Sexual differences are cultural and social conventions that have lead to unequal assessments between men and women. The PESCC invites to assume men and women equal, free and active social subjects of rights.

3. Education: Education should promote the construction of meaningful knowledge. It must include situations from the daily life so students can take part of the decision-making of their context.

4. Citizenship: Including citizenship at school is a strategy to strengthen the democracy of the country, increase the critical thinking of Colombian citizenship and enforce human, sexual and reproductive rights.

5. Sexuality: It is considered as a symbolic social convention. It influences emotions, behaviours, cognition and communication. The PESCC programme suggests defining sexuality by its components and functions.

Components:

a. Gender identity: It invites the community to be subjective and understand the variations that exist on people self-concept about men and women. A distinction is made between gender identity and sexual identity.

b. Cultural gender behaviours: Social conventions make that masculinity and femininity features determine men and women roles. The PESCC suggests transforming those social conventions to make society more equal and inclusive.

c. Sexual orientation: It includes homosexuality, heterosexuality and bisexuality.

Functions:

a. Erotic

b. Affective

c. Reproductive

d. Communicative-relational.
6. Sexuality education and citizenship: The PESCC programme proposes the promotion of knowledge, skills, attitudes, values and behaviours that stimulate the human dignity and SRR

Guide 2: “The pedagogical project and its conductive threads”
This guide describes the characteristics of educational projects on sexuality education. It describes the use of “conductive threads” and the inclusion of citizenship skills. This guide suggests the design of sexuality education projects based on: The functions, the context and the components of sexuality (Figure 5).

![Figure 5. Elements of sexuality (Guide 2, PESCC)](image)

This guide suggests 41 conductive threads to implement at school. It contains 16 conductive threads for the components of sexuality and 25 conductive threads for the functions of sexuality. (See APPENDIX III for more details).

Guide 3: “Route for the implementation of a pedagogical project on sexuality education and citizenship”
It defines and explains the main components of a sexuality education project. Four components are necessary for implementing sexuality education projects:

1. Scholar management: It includes the specific actions that will take place to develop the pedagogical project (activities, homework, person in charge of the activities, dates and materials)
2. Pedagogical outcomes: sexuality projects should integrate the social context and must be coherent with the PEI of the school.

3. Permanent training: teachers should be in permanent training. For this purpose, it is proposed the construction of “Mesa de Trabajo (Work-Table)” This “Work-Table” consists of several members of the school board that discuss and promote strategies of improvement. Here teachers have a permanent learning and training process.

4. Sustainability management: In order to make the sexuality project sustainable, it is important to create support networks to include other sectors outside the school.

5.3.2. Motivation behind the “Me conozco, me respeto y aprendo a vivir bien”

The reasons to create the “Me conozco, me respeto y aprendo a vivir bien” programme are not very clear. Documents about the project indicate that the school board among with some parents designed and implemented a contextual study to evaluate the main problems at school. The results of the survey indicated that some strategies had to be implemented to improve students’ aggressive behaviour, disinterest, bulling, cyber-bullying, teen pregnancy, suicide attempts and drug use. Thus, the school decided to attend the recommendations of the MEN and SE of Boyacá and create the project of sexuality, which later on was named “Me conozco, me respeto y aprendo a vivir”.

On the other hand, according to the director of the school and the teacher leader of the project, it was only when few teachers were trained on sexuality education by the MEN, when they started the project within the school. Finally, the counsellor of the school stated that the project of sexuality education started because the SE made it mandatory to include projects of sexuality education in all schools in Boyacá.

Regarding the name of the project, the documents of the school and all interviewed people agreed that considering that at that time there were about 11 cross-sectional projects within the school, the director of the school decided to combine them all. Thus, the projects of healthy lifestyles, good use of leisure time and Sexuality were combined in one project because they were in some way connected. The project of sexuality was then assumed as the main project and the other projects supported it. The combination of
these three projects was then called: the “Me conozco, me respeto y aprendo a vivir bien”
project.

The objective of the project is to create learning environments in which students appreciate the recreational, cultural and sport activities that led to the body harmony, self-awareness, responsibility, self-esteem, faith, solidarity and responsibility with their own life and body. Information from interviews suggests that the programme has been implemented in the school since 2010 or 2011.

5.4. Implementation/mediation of the programme
The cross-sectional programme “Me conozco, me respeto y aprendo a vivir bien” was adopted to teach sexuality education within the “Escuela Normal Superior la Presentación”. It was created based on the PESCC project and has been supported by the MEN and the SE of Boyacá (MEN & UNFPA, 2008).

In order to include sexuality education within the school as a cross-sectional programme (MEN, 2008), the school board and some parents chose one conductive thread, Valuing yourself, which is taken from the recommendation on guide 2 of the PESCC. Then, a contextual analysis was done (interviewing teachers, parents and students to see the main problems at school). Finally, a pedagogical matrix was designed to specify the objectives, description, methodology and activities of the “Me conozco, me respeto y aprendo a vivir bien” programme.

Based on interviews and documents of the school, the implementation of the project for sexuality education consists of general and classroom activities.

5.4.1 General activities
Usually the counsellor of the school and the teacher leader of the project of sexuality education organize all general activities, which are meant for both students and parents.

A review of sexuality education in developing countries (Kirby et al., 2006), showed that resistance of teachers to address sensitive issues, led school to using health-workers to help in this regard. The “Escuela Normal Superior la Presentación” has implemented this strategy by creating an agreement with the local hospital so they can support the
school and provide information about those issues that are difficult to address by the school. The external institutions that support the school with talks and other activities on sexuality education are:

- The Friendly Unit (a section of the local hospital)
- “Club Rotario (Rotary club)” (Nonprofit organization)

Activities with the hospital are organized at the beginning of the academic year and other activities are organized when available in the Rotary Club and the school. Table 3 describes the general activities for 2015.

Table 3. General activities of the “Me conozco, me respeto y aprendo a vivir bien” project (2015)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
<th>People in charge</th>
<th>Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjustment and socialization of</td>
<td>February-March</td>
<td>Leaders of the project and the student representative</td>
<td>Make sure other teachers and students know the project.</td>
</tr>
<tr>
<td>the project</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conference</td>
<td>April 17th</td>
<td>Leaders and members of the project and representative of the Hospital</td>
<td>Motivate students to have a healthy lifestyle and an appropriate sexuality education and citizenship.</td>
</tr>
<tr>
<td>Carnival of sexuality</td>
<td>May 8th</td>
<td>Leaders and members of the project and representative of the Hospital</td>
<td>Make students understand the value of sexuality and citizenship through recreational activities that allow them to make responsible decisions.</td>
</tr>
<tr>
<td>Bio fashion</td>
<td>July 16</td>
<td>Leaders of the project and the student representative</td>
<td>Give information about solid waste recycling and encourage students to handle recyclable material properly.</td>
</tr>
<tr>
<td>Inter-courses games</td>
<td>During the academic year</td>
<td>Leaders of the project, the student representative and COMFABOY (Non-profit organization)</td>
<td>Strengthen the recreational activity and sports on children to have a healthier development.</td>
</tr>
<tr>
<td>Cheer festival</td>
<td>School (October 23rd)</td>
<td>Leaders of the project, the student representative and COMFABOY (Non-profit organization)</td>
<td>Strengthen the recreational activity and sports on children to have a healthier development.</td>
</tr>
</tbody>
</table>
Healthy life week (Depending on availability) School Leaders of the project, the student representative and Hospital. To promote innovative strategies on healthy life style.

The observation period of the “Me conozco, me respeto y aprendo a vivir bien” programme was held from April 13th until May 29th. Therefore, only few general activities were observed. Initially, two general activities were supposed to be observed: the conference and the carnival of sexuality. However, due to a teacher’s labour strike that took place in all public schools around the country it was not possible to observe the Carnival of sexuality because it was rescheduled.

The vast majority of students agreed that the most enjoyable, dynamic and interesting activity of the “Me conozco, me respeto y aprendo a vivir” project is the carnival of sexuality.

“I really enjoy the carnival of sexuality, we were allowed to speak and participate in all activities, we were able to discuss whatever we wanted... even our fears (female student, 18 years old, 11 grade)”.

As planned with the hospital, the Carnival of sexuality includes the following topics for 2015 (see table 4). As reported on interviews, in previous Carnival of sexuality students participate very actively. They were asked to visit stands, which include different topics on sexuality presented by means of games and/or interactive tasks (Figure 6).

**Table 4. Activities of the carnival of sexuality (2015)**

<table>
<thead>
<tr>
<th>In charge of</th>
<th>Courses</th>
<th>Topics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital (Friendly Unit):</td>
<td>6 and 7</td>
<td>• My body</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Understanding sexuality</td>
</tr>
<tr>
<td></td>
<td>8 and 9</td>
<td>• Self-esteem</td>
</tr>
<tr>
<td></td>
<td>10 and 11</td>
<td>• Risk behaviours on adolescence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Mental health</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Prevention on the courtship period</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Life project (SRR)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Pregnancy, contraceptive methods, STI’s</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Violence and attachment in the courtship</td>
</tr>
<tr>
<td>Teachers of the</td>
<td></td>
<td>• Personal recognition</td>
</tr>
</tbody>
</table>
The observed conference actually refers to several conferences. Each day, 3 conferences were presented for a total of 6 conferences (See Table 5).

**Table 5. Conferences of the general activities**

<table>
<thead>
<tr>
<th>April 15(^{th}):</th>
<th>April 16(^{th})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents with children in grades 6 or 7 Parents with children in grades 8 or 9</td>
<td>Students in grades 6 and 7 Students in grades 8 and 9</td>
</tr>
<tr>
<td>with children in grades 10 or 11</td>
<td>Students in grades 10 and 11</td>
</tr>
</tbody>
</table>

Two doctors, one nurse (from the “Rotary Club”) and the counsellor of the school were in charge of the activity. Personal from the Rotary Club were all trained for teaching sexuality education, while the counsellor of the school have not ever received training for teaching sexuality. All speakers were friendly when talking and they seemed comfortable when approaching topics on sexuality. Conferences were organized in the theatre of the school.
school and took around 90 minutes each. Presenters were located in front of the whole audience. All conferences started with a pray and the presenters were mainly talking to the audience located in the first lines excluding those in the back.

5.4.1.1. Conference for parents
All conferences were highlighted by the low number of parents, the counsellor of the school stated that parent-teacher meetings usually count with around 60% of the total assistance where parents of students with academic, personal or disciplinary difficulties are frequently absent. All conferences initiated with a reflection of how to talk to children without using physical or psychological violence. Later on, the “Me conozco, me respeto y aprendo a vivir bien” project was introduced.

Results from the context analysis were presented to explain parents the main problems at school. Parents were invited to discuss topics on sexuality with their children. The majority of parents seemed interested in the topics (Figure 7). However, after 20 minutes some parents started to leave the place and some were just entering to the auditorium. It seemed that those at the back of the auditorium got distracted.

Figure 7. Conference for parents (2015). Parents of children in grades 10 y 11.

There were around 30 slides and 3 videos covering the following topics: SRHR services in Soatá, problems when talking about sexuality, relationships between teenagers, prevention of teen pregnancy, consequences of sexual relations, dangerous of early
intercourse, STI’s, parenting styles, and the importance of having a life project. Even when the PESCC asks for comprehensive sexuality education (MEN & UNFPA, 2008), topics on sexuality were covered with the main message of “abstinence”.

In fact, the speakers presented a prime called “La canasta de Sueños, enfocandote en tu futuro (Dream Baskets, focusing on your future)” (Figure 8). It is meant for both parents and students to address topics on sexuality at home (Warren, 2012).

![Dream Basket](image)

**Figure 8.** Material used in the conferences for both parents and students (Warren, 2012)

The Dream Basket, focuses on the importance of having a life project and also gives the main message of abstinence until marriage.

“She very best and safest way to prevent pregnancy is to not having sexual relationships until after you are married... That is the only 100% safe way to avoid pregnancy and sexually transmitted diseases (The Dream Basket, p7)”.

After presenting the slides and the videos, parents were invited to participate with questions. Because of time pressure, there were only few questions. Some of the questions were related to the importance of talking about values, affection and self-esteem rather than contraceptive methods, teen pregnancy and so on.
“I think sexuality education must focus on love, affection, self-esteem and values because teenagers are looking for relationships that provide the affection they do not receive at home (mother)”

One father stood up and questioned the inclusion of condom dispenser because it encourages children to have sexual intercourse. The school has not condom dispenser though.

“I don’t think teaching children about contraceptive condoms is a good think. For instance, those condoms dispenser only encourage children to have early intercourse (father)”

The speaker clarified that they were not advertising contraceptive methods, but they only wanted students to know them for future times when they have the responsibility of having sex.

Representative of the hospital stated that talks, conferences and other activities from the hospital and other external institutions are free to include sensitive topics within the school. However, she also stated that they are not allowed to talk about abortion and to provide condoms or any other contraceptive methods to students within the school.

“There is something we haven’t been able to do in the Escuela Normal Superior. We cannot provide contraceptive methods (like condoms) to children, which I think is due to the catholic philosophy of the school. Therefore, we invited them to come to the hospital in the Friendly Unit section so they can get condoms or contraceptive pills. Nevertheless, girls hardly ever come and some boys come and ask timidly (Representative of the hospital)”

Representative of the hospital and the counsellor of the school agree that speaking about sexuality has become more common in the town and school. Specially, since the director of the school Sister Marisol Mendoza arrived to the school.
5.4.1.2. Conference for students

Conferences for students were held in the same place with the same speakers (Figure 9). They were more interactive, speakers showed some videos and about 20 slides, and in between them there were random questions. Each of the conferences for students congregated about four courses; so there were about 100 or 120 students in each conference. It made very problematic for all students to listen and participate.

Students in the first lines were more focused on the conference, especially because they were asked about the videos. While students at the back were more distracted mainly because the speakers were always interacting with students seated in the front.

Figure 9. Conference for students (2015). Students from grades 10 and 11

Conferences for students in lower grades (6, 7, 8 y 9) were mainly focused on the Dream Basket prime, which discusses the life project, avoiding sexual intercourse and teen pregnancy. For the highest grades (10 and 11), topics were addressed in a more straight way. Again, topics of the Dream Basket prime were discussed as well as drugs, STI’s and contraceptive methods.

Topics were addressed along with some random questions. Students were asked publically and then they had to answer with the microphone in front of the whole audience. Students were not very pleased with the way they were asked about the topics, because other students laugh at them or commented on their answers.
“I enjoy the conferences, but I feel very nervous of asking or being asked about sexuality. There are a lot of students looking at you, I think that’s why other students avoid participating in these activities (male student, 17 years old, grade 11)”

Conferences had an alarmist approach, where the main message was “avoid sexual intercourse”. Sexual intercourse was seen as dangerous and the cause of many diseases. It seems that student’s answers were based on what they believe is culturally acceptable or what the speakers wanted to hear. Messages about abstinence from sexual intercourse as well as cultural norms seem to shape student's beliefs of what is and what is not socially acceptable. For instance, when a student was asked if the condom was the best way to avoid pregnancy and STI’s, the student replied:

“I don’t think so because the security is not 100%, the best and safest way is just not having sexual intercourse ‘all other students applauded’ (female student, 10 grade)”

The last videos were about real cases of teenagers being parents at early age and teenagers with STI. There was a main focus of encouraging students to take care of their health outcomes, which relates to the health approach (Braeken et al., 2008).

5.4.2. Classroom activities

The pedagogical matrix specifies which particular activities each knowledge area implements in each specific course. These activities are implemented within the classroom and each teacher is responsible for implementing the activities either in her/his classes or in the “quince minutos de instrucción (Fifteen minutes of instruction4)”. The pedagogical matrix can be found in the appendix section (APPENDIX IV).

4 Fifteen minutes of instruction refers to a monthly activity. Each course discusses topics that have been selected by students and the head teacher at the beginning of the academic year. It takes 15 minutes and is done on Monday morning. Usually students ask for topics about sexuality education.
Social sciences and Natural sciences were the areas more closely involved with the project. The area of natural sciences was responsible of teaching: values, respect and care of the body, anatomy and physiology of the male and female reproductive systems, contraceptive methods, STIs, body care, prevention of pregnancy and abortion. While the area of social sciences was responsible of teaching: the PESCC project, SRR and human dignity. Table 6 describes the classroom activities for 2015.

Table 6. Classroom activities of the “Me conozco, me respeto y aprendo a vivir bien” project (2015)

<table>
<thead>
<tr>
<th>Activities</th>
<th>Date</th>
<th>People in charge</th>
<th>Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>No smoking day commemoration</td>
<td>May 30</td>
<td>Leaders of the project and the student representative</td>
<td>Make students aware of the harmful effects of cigarette and motivate students to have a healthy lifestyle.</td>
</tr>
<tr>
<td>Brochure design and socialization</td>
<td>From March until September</td>
<td>Leaders of the project, teachers from all knowledge area and the student representative</td>
<td>Guide students to have healthy lifestyle and an appropriate sexuality education and citizenship.</td>
</tr>
</tbody>
</table>

5.4.2.1. Teachers in the classroom

Interviewed teachers had little or no sexuality education when they were students themselves. Five out of 11 teachers received training for teaching sexuality education either by the MEN or the SE of Boyacá, of which only two teachers received specific training for the PESCC programme. Only two teachers received training from trained teachers within the institution. The permanent training suggested by the PESCC is not longer implemented at school since the Work-Tables disappeared years ago and the school is not longer receiving support from the MEN and the SE in this regard.

Given that it is not specified at what specific time sexuality education is included within the classroom, teachers decided to do it when the class relates to some of the topics of sexuality or when they think it is necessary. Based on interviews and observations, most of the topics covered by the teachers within the classes are: values, respect, equity, body care, self esteem, life project, human rights, healthy life, tolerance,
courtship, conception of sexuality (it not only refers to having sex) and physical changes when growing. Mainly teachers from natural sciences and psychology include other topics such as: pregnancy, abortion, contraceptive methods, STI’s, masturbation, homosexuality, anorexia, menstruation and reproductive systems. However, teachers claimed that most of these topics are only included when students ask.

Gender differences where identified within some activities mainly because certain teachers find difficult to abandon their cultural norms on classroom practices. For those teachers female students have a bigger responsibility to avoid sexual activity among adolescents because they are the ones that must decide to have or not sexual intercourse. As a result, to avoid early sexual intercourse those teachers focus prominently on girls and ‘empower’ them to always say no. This results show that teacher’s attitudes over girls tend to be more judgmental where men hyper-sexuality is an accepted fact, while female hyper-sexuality is not.

“I don’t know whether we are discriminating, but the main emphasis here is ‘men proposes and woman decides’. We want girls to understand the big responsibility they have when they say yes or no (male teacher of social sciences, 31 years old)”

Contrary to our expectations, it was found that boys and girls participated more or less equally in all activities. Similarly, there were no differences between female and male teacher’s class regarding to their ability to approach sensitive topics.

When teachers and students were asked whether they believe it is more difficult for girls than for boys to discuss topics about sexuality, there was not agreement among them. According to the majority of students, it is indeed more problematic for girls to discuss those topics because boys make fun of them and due to the male chauvinist culture. Whilst for teachers it is basically the same for both. In fact, few teachers argued that it is actually harder for boys than for girls. Some of the reasons given are: girls are more mature when talking about sexuality and girls outnumbered boys.
Results also showed, that some sensitive topics are not included because the counsellor of the school and some teachers believe they do not have cases that make it necessary to include them, such as sexual orientation.

“At any time, a student with different sexual orientations can come. Therefore, we need to be prepared, especially because their classmates could make fun of her/him.... I’ve never included topics about sexual orientation because I have not seen any case (female teacher of biology, 43 years old)”

“I only include topics about sexual orientations when students ask, but I think we don’t have any case of students with different sexual orientations because of the culture. There are not cases or maybe there are some initiations, but not many. Actually, I’ve never asked myself about this topic (counsellor of the school)”

Teachers within the school were asked whether they were willing to be observed while including topics of the project. Teachers from natural sciences and social sciences were the most enthusiastic when they were asked and kindly allowed to be observed on several classes. Five classes were observed, two classes of biology, two classes of social sciences and one session of 15 minutes of instruction.

Given that the teacher of social sciences was currently the leader of the project of sexuality, received training and have trained other teachers of the region on sexuality education. It was clear that he was especially more comfortable talking about sexuality. He encouraged students to ask and participate. In one of his classes of social sciences it was observed that students were allowed to ask about any question related to sexuality anonymously. Students wrote down questions and place them in a box. One of the questions was: if only the tip of the penis is introduced the woman will not get pregnant, will she? The teacher answered without judgment and alarming. He explained what might happen and encouraged students to freely ask.

By contrast, most of the observed lessons from other teachers had the main message of abstinence, had a main focus on student’s health outcomes and sexuality was explained from the biological side rather than as a human and natural development.
Teachers were mainly seemed as leaders and some topics were difficult to discuss for them. Within the observed activity of ‘15 minutes of instruction’, students were asked to present posters about equity (Figure 10). A group of students decided to talk about LGBT rights instead and how people have rejected this community with no reason. After seeing their presentation, the teacher stated ‘As a catholic community, we have difficulties discussing about LGBT. I am very surprised you are talking about this’. As seen in previous studies, there is a barrier for participants to abandon their own norms and religious values when delivering sexuality education (Berger et al., 2008).

![Figure 10. Posters from the 15 minutes of instruction. “Teen pregnancy” (left corner), “Gender equality” (right corner) and “Society cannot limit homosexuality. Homosexuality is not a disease, homophobia is” (down) (2015).](image)

Overall, the content and method of sexuality education within the school are mainly shaped by traditional sexuality education where the dominant approaches are morality and health.

### 5.4.2.2. Students in the classroom

Interviewed students were between 15 and 18 years. They all described themselves as Roman Catholic. Half of students interviewed live with their mothers and some other members of their family (grandparents, aunt, uncle). A second group of students live with both parents (mother and father) and a third group live only with their grandparents.
Average classes size were around 30-35 with girls outnumbering boys. Usually boys and girls participated equally in the classes.

All students claimed enjoying being at school and having good relation with their teachers. Students especially enjoy classes of social sciences, natural sciences and psychology because teachers were more open to discuss. Most students think it is easier to participate within the classroom because they have more confidence with their classmates than when they are grouped with other classes (like in the theatre).

“I enjoy the lessons that include sexuality education like those with the teacher of social sciences (leader of the project). In the classroom we ask questions openly, especially because in our class we trust each other and we are not shy about discussing those topics (male student, 15 years old, 10 grade)”

Interviewed participants agreed that nowadays it is more common to speak about sexuality within and outside the school even when more efforts need to be done in this regard, especially with children from rural areas that are more shy.

“Comparing with previous years, it is easier to talk about it. Now students are more open to those topics and they really enjoy talking about them (female teacher, 51 years old, pedagogy and psychology)”

A teacher of pedagogy and psychology believes that nowadays teachers are more willing to discuss about sexuality to their students because it helps to identify those students that have been sexually abused by family members or others.

“We have had cases of girls who have been raped and are afraid to ask for help. We need to pay attention to them when we are discussing topics about sexuality in class, especially with the youngest. Children who lower their gaze, turn red, weep, or get nervous may have some difficulties. We have to look for the right time and ask them (female teacher of pedagogy and psychology, 55 years old)”.
Topics that interest students the most within the programme are contraceptive methods and STIs. Even when topics about LGBT and abortion are hardly ever discussed, a considerable number of students claim being very interested and curious about those topics.

“I am very curious about abortion, but most teachers say they don’t agree with this technique. For instance, the teacher of psychology avoids those topics, but I think it is our right to know about it (female student, 18 years old, 11 grade)”.

5.4.3. Activities outside school
Messages of the programme and discussions on sexuality education are not only restricted to the school environment. In fact, it happens that students look for other sources of information outside the school rather than with teachers or members of the school. From interviews, the biggest group of students claimed approaching their friends for sexual advice or discussing on sexuality. A second group of students stated approaching their parents or find information in Internet and the small group of students argued discussing those topics with a family member (cousins or uncles), skilled person (hospital-Friendly Unit) or staff of the school.

Some of the students that hardly ever approach their parents claim that discussions about sexuality with their parents rarely happen because their parents have no right to talk about sexuality after being parents at early age.

“My parents try to avoid those topics, not because it isn’t important, but because they don’t know how to address them, in particular because they made mistakes in the past and have no right to talk about sexuality considering that my mother got pregnant when she was 18 years old (female student, 18 years old, 11 grade)”.

5.4.3.1. Parents
Interviewed parents are all adhere to Catholicism, the majority were married and work as independent (having a small store). Parents in the study agreed on including sexuality education at school. Two out of five parents went to college, had sexuality education
growing up and were willing to help their children with sexual advice. Other parents claimed that they will prefer not to be asked.

“If they ask me for sexual advice I wouldn’t know what to say. I would prefer they didn’t ask me about those topics. Maybe I could guide them, but mainly I would say to abstain (mother, 35 years old)”

Interviewed parents knew that sexuality education was provided at school mainly because of the activities the programme offers for parents rather than from talks with their children. From interviews, discussions on sexuality education happen at home, but parents acknowledge that it is not very common. Usually parents address topics about prevention (contraceptive use and avoiding sexual intercourse) and relationships. Parents interviewed believe that sexuality education must be taught to children older than 12 years and must be based on prevention.

All parents agreed that it is not acceptable for adolescents to have sexual intercourse. The majority of parents consider that sexual intercourse among adolescents cannot be accepted because young girls would risk their reputation and boys have preference over virgin girls. These results show that for some parents males have more power on heterosexual relations than women (Gupta, 2000).

“I don’t think they should. It is often seen that after having sexual relationships boys talk with other boys and give girls bad reputation (mother, 48 year old)”

“It cannot be acceptable... There are men that will always prefer virgin girls, so girls that have had sexual intercourse may encounter problems later on (mother, 45 year old)”

**5.4.3.2. SRHR services**

Soatá counts with one SRHR service “Friendly Unit”, which is located at the hospital of the town. All participants said to know about its purpose and how to approach it. However, only few students admitted visiting the place at least once. The vast majority of
students argued not going there because they are afraid of being seen and being judged. While a small group of students claimed not feeling confident to discuss topics about sexuality with a strange person.

Only few teachers and the representative of the Secretary of Health believe students will visit SRHR services, according to them, especially girls will visit it because they are more mature and are more curious about contraceptive methods. By contrast, the majority of teachers claim students will not visit the assistance service because they are shy and do not want to be seen by people they know.

5.5. Concluding remarks
In general, there were no gender differences in the participation of students within the activities and neither there were differences from female and male teachers when delivering sexuality education. However, gender differences were seen among some teacher’s attitude (male and female) about girl’s sexuality. Similarly, results showed that most mothers prevails boy’s pleasure over girl’s pleasure.

Based on observations and interviews the “Me conozco, me respeto y aprendo a vivir bien” project is implemented by teachers with the support of a health-worker. Both managed to discuss on sexuality in a highly Catholic place where sexuality is considered a taboo. Most of the students claimed feeling more comfortable in activities such as the “carnival of sexuality”, which allow them to ask and participate freely. Similarly, they prefer teachers that allow them to discuss openly and encourage them to participate actively.

All participants largely accept sexuality education at school from early age. However, only one teacher, the health-worker and representatives of the government recognise that sexuality is a natural part of adolescents and sexuality education must be based on student’s rights. Due to the high levels of religiosity at school, sexuality education is mainly based on abstinence, with a mixture of the morality and health-based approach. As a result, abstinence-only messages and norms might influence student's conceptions of what is and what is not socially acceptable.

Regarding the PESCC programme. The “Me conozco, me respeto y aprendo a vivir bien” programme indeed uses some of the main recommendations given by the
guides 1, 2 and 3 of the PESCC programme. However, the project fails to include some important matters:

First, guide 1 describes the components and functions of sexuality. However, the school “Escuela Normal Superior la Presentación” fails to include all the topics. According to the information taken from the documents and interviews, some topics such as sexual orientation, abortion and eroticism are rarely discussed. Second, when implementing the “conductive threads”, the school only use one out of 41 recommended by guide 2. The director, the counsellor and some teachers argued that even though they only use one conductive thread, they include most of the topics suggested by guide 1. Third, not all the detailed actions of the project (activities, homework, person in charge of the activities, dates and materials) are specified in the pedagogical matrix and the curriculum of the school. Fourth, the majority of activities at school are teacher-centred rather than student-centred as suggested by the PESCC. Finally, teachers are not longer having permanent training since the Work-Tables disappeared.

Indeed, the school have made big efforts to include sexuality education and discuss topics about sexuality not only with students but also with their parent. Advances on this regard are notorious and have even made the school recognised nationally as one of the schools with the highest level of implementation of the PESCC programme (MEN, UNFPA & UNIVERSIDAD DE LOS ANDES, 2014). Nevertheless, the programme needs to have a more comprehensive focus so it can influence positively student’s mental, physical and sexual health.
6. Challenges of implementation from different actor perspectives

This chapter addresses sub-question 5, which refers to the challenges of implementation encountered by teachers and students. From interviews, teacher’s barriers of implementation are: lack of time, difficulties to include sensitive topics, lack of parental support, the religious background of the school, lack of training, shame, myths around sexuality, low participation of students within the activities, lack of materials and limited teachers-meetings. As for students, the challenges of implementation are: shame, fear of asking, teacher’s shame to address some topics and teacher’s traditional beliefs. Key informants consider that the challenges of implementation for teachers at school are mainly the lack of resources, teacher’s lack of knowledge and parent's unwillingness to discuss about sexuality. These will be elaborated further below.

6.1. Students

The majority of students claimed feeling comfortable to express their opinion within sexuality education activities. Yet, students alleged encountering barriers within the activities of the programme. The most cited difficulties were: shame and fear of asking, especially sexual issues (because of the bullying and immaturity of their classmates, usually their male classmates or/and because of the religious philosophy of the school).

Other challenges encounter by students is that most teachers are ashamed of addressing some topics, which result in shallow topics. According to some students, several teachers have very traditional beliefs, which restrict them to discuss on sexuality education. Again, results show that cultural norms and high levels of religiosity among teachers impede discussing openly on sex (Hughes et al., 1998)

“I think homosexual students don’t receive enough support, the school only considers one idea of family, father and mother. It's due to the religious background of the school. I don’t know any homosexual in the school, but I've seen students behaving as homosexuals and they have been bullied (female student, 18 years old, 11 grade)”.
“…LGBT, abortion and STI are hardly mentioned in the school. I actually feel that it is because teachers are old and homophobic. In fact, my mother is homophobic (male student, 16 years old, 11 grade)”.

Students approaching their parents to talk about sexuality indicated that it is in general terms and mainly with their mother (hardly ever with their father). Mainly male students claimed being unwilling to talk to their fathers about sexual issues. This result differs from previous studies where adolescents look for same-sex parent to discuss topics about sexuality (Wight, 1994).

6.2. Teachers
While teachers recognise that at the very beginning was difficult to talk about sexuality because of parent’s complains and misconceptions, nowadays they think it is easier. Apart from one female teacher, all teachers feel comfortable when discussing topics about sexuality. Although all teachers support the programme, some of them acknowledge that not all of them are fully involved. Teachers argue that the lack of time make it hard for them to have better advances on the programme.

From interviews, it seems that teachers are all free to include topics about sexuality at any time. However, some teachers expressed that they do not include sensitive topics because they might get in trouble.

“Topics covered at school are mainly based on values and respect because other topics can not be instructed. I think sensitive topics are handled by the hospital. ... We can get in trouble if students reply what we said to their parents, so they can come and complain (female teacher of pedagogy and psychology, 29 years old)”

The vast majority of teachers consider that lack of parental support and the religious background of the school are the biggest difficulties when addressing topics of sexuality. Challenges with parents refer to: their low assistance in the teacher-parents meetings, their low involvement with their children activities, complains when talking
about sexuality to their children and the few or absent talks between parents and their children about sexuality.

“The situation with parents is problematic, not too long ago a teacher, who is not longer in the school, was sued because he was talking about sexuality... we must be very careful even when things are different now and children get information from other sources (male teacher of philosophy, 59 years old)”

“We ask parents to come over for meetings, but a significant number of parents never show up (female teacher of chemistry, 52 years old)”

Barriers with the religious background of the school refer to the complications when teaching topics about sexuality. Even when contraceptive methods are widely discussed within the general activities of the programme by the hospital and the Rotary Club, some teachers are still afraid of addressing this topic in the classroom because they claim that the philosophy of the school do not allow them to discuss certain topics openly.

“As we are a catholic school, sometimes I struggle to talk openly about certain topics, such as the contraceptive methods. It may seem that I encourage students to have sexual intercourse (female teacher of chemistry, 52 years old)”

Other challenges were also mentioned by the teachers of the school such as: teacher’s lack of training on sexuality education, teacher’s shame to talk about sexuality, myths around sexuality, teacher’s lack of involvement, low participation of students within the activities (because of shame and immaturity), lack of materials to deliver sexuality education and limited teachers-meetings to discuss about the programme and improvements.

“Fear, I think that as teachers we are afraid of talking about sexuality because we were not raised in that way where you can speak about sexuality. Also, because
we don’t know what is best, to speak straight or to hide things about sexuality
(female teacher of computers, 56 years old)”

From interviews and observations other barriers were identified such as teacher’s naive view of adolescents as non-sexual subjects. Results from the context analysis within the school showed that some students are sexually active. However, teachers still encourage students to avoid sexual intercourse.

6.3. Other key informants
Representative of the Secretary of Education, representative of the Secretary of Health and the health-worker consider that the main difficulties when teaching sexuality education are: lack of resources (for training and materials) and challenges from teachers to approach some specific topic such as sexual orientations and abortion (because of the religious philosophy of the school or because of teacher’s lack of knowledge about the topic).

“Some of the difficulties are the scarce knowledge about certain topics of sexuality. For instance, if you ask me about transsexuals or transgender, I could not explain it properly. I know for sure that it also happens to many other teachers. The secretary of education has made alliances with the LGBT community, but still it remains as a challenging topic to be addressed (Representative of the Secretary of Education)”

“The judgement C-355 of 2006 states that abortion can be legal under certain circumstances. However, activities of the hospital within the school cannot discuss abortion in any activity. Sexuality education within the school focuses mainly on prevention, values, life project and self-esteem (Representative of the hospital) ”.
Key actors also agree with teachers that parents represent a barrier when addressing topics about sexuality since they are unwilling to discuss about it and provide inaccurate information about sexuality to youth.

6.4. Concluding remarks

Barriers of implementation were discussed. For students, shame and fear are the most cited challenges followed by teacher’s shame to address some topics because of the religious philosophy of the school and teacher’s traditional beliefs. Students that discuss sexual issues with parents rarely do it with their fathers, especially male students. Patriarchal setting may influence in this regard. Male students might be afraid of being seen as weak by their fathers, which led them to approach only their mothers for sexual advice.

Students felt that female students have more difficulties discussing topics about sexuality compared to male students. While teachers have no agreement in this regard with the majority of them considering that it is the same for both. For teachers, the most cited challenges were the lack of parental support as well as the influence of the religious philosophy of school. Other barriers cited were teacher’s lack of time, lack of training on sexuality education, teacher’s shame to discuss on sexuality, low participation of students, lack of materials and limited teacher-meetings to discuss about the advances of the programme.

For the government officers and the health-worker, the main barriers are lack of resources and the high levels of religiosity at school. The vast majority of teachers, the counsellor of the school and the health-worker claimed feeling comfortable when discussing topics about sexuality.
7. Quality, Relevance and Outcomes of the programme

Retrospectively, previous chapters have discussed: the main discourses and the official approach to sexuality education in Colombia; the objectives of the school for implementing the "Me conozco, me respeto y aprendo a vivir bien" programme; the implementation/mediation of the programme at school; and the challenges of implementing sexuality education at school. In order to answer sub-question 5, this chapter presents the perspective of all actors about the relevance and quality of the programme along with the perceived outcomes of the programme.

7.1. Quality

In this study, quality and relevance are assumed as a subjective description. As Allen (2007) states, youth’s needs and interest may be opposite to teacher’s goals. Juveniles might evaluate the success of a programme based on the experience of receiving the programme, while teachers evaluate the success mainly based on behavioural change.

In general, all interviewed actors consider that the quality of the programme is good. Students concur that activities from the Friendly Unit, especially the carnival of sexuality are the most informative, dynamic and entertained. Additionally, some mothers stated that they have learnt about sexuality through their children.

“I think the quality of the programme is good, students learn a lot about topics that we cannot explain to them…. In fact, my daughter have explained to me some of the things she has learnt about sexuality (mother, 35 years old)”

Most of the teachers, the counsellor, the director and representatives of the government acknowledge that the programme have had an important improvement since the beginning. Actors within the school are highly motivated since the MEN and the University of Los Andes in a national evaluation acknowledge the project with the highest level of implementation of the PESCC⁵. Still, participants acknowledge that the

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⁵ Based on the theory of change, the implementation level of the PESCC programme within public schools was evaluated by analysing: 1) guidelines of the PESCC such as the Context analysis and the pedagogical matrix. 2) Teacher’s training on sexuality
quality of the programme needs to be improved, especially because not all teachers are trained on sexuality education, some topics are explained superficially and not all teachers are fully involved with the programme.

Naturally, some suggestions were expressed by the interviewed actors to improve the “Me conozco, me respeto y aprendo a vivir bien” programme. Suggestions were grouped in 4 categories: Methodology, parent’s involvement, instruments and inter-sectoral support.

**Methodology:** Students claim that activities of the project should be more dynamic where they can ask and participate in a more relaxing environment such as the carnival of sexuality. They argued that within the talks, the number of students should be lowered and preferably with their classmates so they could feel more confident to ask and participate. Besides, students consider that the project should include more topics and explain them in more detail.

Teachers, the counsellor and the director of the school suggested increasing the number of activities, connect activities in a more logical way and include activities where students can participate more actively. Teachers also suggested finding more skilled people that may help to explain sexuality issues in depth.

**Parent’s involvement:** Some of the main suggestions from teachers, the counsellor, the director and representative of the hospital were the creation of more activities that engage parents. Parents avoid talking about sexuality and have misconceptions about sexuality, which might make more difficult for children to develop their sexuality. Therefore, it is important to make them aware of the importance of discussing topics about sexuality with their children and have a more supporting role.

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education, which also includes teacher's knowledge, attitude and self-efficacy 2) Support for the programme. 3) The functionality of the “Mesas de Trabajo (Work-Table)”. 4) Inter-sectoral support. 5) Student's outcomes on sexuality education, which also refers to student's knowledge, attitudes and self-efficacy as well as relations within the class, perception of support network available, and indicators of SRR.
Instruments: Teachers, students and the counsellor of the school consider necessary that the MEN and the SE of Boyacá provide didactic material to teach sexuality education. Currently, each teacher has to find her/his own material and there is not consensus about the material used within the school. Furthermore, teachers and the counsellor of the school demand more training on sexuality education for teachers so they can approach those topics more openly and with more confidence.

Inter-Sectoral support: Teachers and the representative of the hospital consider that other sectors should help to improve youth’s SRH and well-being.

“In one neighbourhood there is a serious problem with drugs, it is not only our and the school responsibility to explain children that drugs are dangerous. It would be great that other sectors of the town, included the government, help to guarantee the well-being of our children (Representative of the hospital)”.

Finally, interviewed parents were not well informed about the project and the activities involved. As a result, their suggestions were focused on including activities that already exist within the school such as talks and videos about contraceptive methods and STI’s.

“It would be great if the school includes activities about sexuality education, but those activities should really teach sexuality. When asked what does she think sexuality refer to, she replied: It refers to contraceptive methods and prevention on teen pregnancy (mother, 42)”.

7.2. Relevance

Turning to the relevance of the project, all actors agreed that the project is indeed relevant mostly because it helps to prevent teen pregnancy. In general, students enjoy activities about sexuality education and teachers claimed that including sexuality education at school have helped to correct some misunderstandings on both, teachers and students on sexuality education.
All interviewed actors consider that activities are appropriated. However, they also acknowledge that more efforts should be done, especially because every year there are between 2 and 5 students pregnant. Besides, it is necessary to have more parental support on the learning process of sexuality education and it is important that both parents and children view the SRH services provide by the hospital (Friendly Unit) as a place for help and support on sexuality and reproduction.

7.3. Outcomes
In general, all participants agreed that nowadays students are more aware about sexuality, especially when referring to contraceptive methods. Still, children from the rural areas are considerably less aware about it. Interviewed actors believed that the main sources for which children have learnt about sexuality, especially contraceptive methods are: the school, the hospital (Friendly Unit), Internet, TV, friends and social network. For some participants children avoid using contraceptive methods because of cultural reasons rather than because they lack the knowledge about them.

“Students know what a condom is and they know how to use them, but when they are asked why don't use it, they argue that is because they don't like it.... According to the Durex survey, juveniles have the knowledge about contraceptive methods. 80% of the population know they should use contraceptive methods, but only 8.9 actually use them. I really think it is because of cultural reasons (Representative of the secretary of Health)”.

Based on the interviews, outcomes of the programme are mainly seen on students and are positive. Outcomes were grouped in seven categories:

Knowledge acquired by students: A high number of students and few teachers recognise that students have learned about sexuality education because of the activities of the programme. According to students, topics widely discussed in the programme are contraceptive methods and STIs.
Increase of student's awareness about sexuality and prevention: It is also widely recognised by most of the students and few teachers that students are more aware about sexuality and prevention because of the programme.

“I have learned that if I have sexual intercourse, I must use contraceptive methods because I’m not only having sexual intercourse with that person, but also with his sexual past. The programme taught me that I should take good care of myself, be sure before making any decision and also that pregnancy will not be good for me and my family (female student, 16 years old, 10 grade)”

Rise of student's confidence to discuss sexuality education: Mainly teachers and some mothers consider that activities of the programme have rise students confidence to talk about sexuality education. Particularly teachers agree that students are less shy, more mature, more motivated and confident to ask and discuss those topics in and outside their classroom.

SRRH outcomes on students: Some teachers, the counsellor of the school and the representative of the secretary of health agreed that there are fewer cases of teen pregnancy at the school than previous years.

Change on the conception of sexuality by students: Only one teacher stated that the outcome of the programme is the change of the way sexuality is assumed.

“The most important impact of the programme is that now students understand sexuality in a different way, they can recognise that sexuality is something natural, and they can discuss it freely (male teacher of social sciences (leader of the project), 31 years old)”

Inter-sectoral support: the director of the school and the representative of the hospital admitted that the most important outcome of the project is the agreement made between
the school and other institutions. Since the counsellor of the school arrived to the school (2011), the hospital has been more involved with activities in the school.

More activities and higher teacher’s involvement in the project: the director of the school, the representative of the hospital and a couple of teachers admit that one achievement of the project is the increase in the number of activities mainly because teachers are more motivated and involved with the programme. Still, they admit that more activities are needed.

On the other side, outcomes of the programme on family members are scarce mainly because parents do not attend parent-teacher meetings. The small impact from the programme is essentially seen on the information parents have gained about sexuality education and the change of attitude regarding to including sexuality education at school. Besides, parents are reported to complain less when including sensitive topics of sexuality within the school.

7.4. Concluding remarks
Overall, participants consider the programme to be relevant and most of them consider it has a good quality. Participants within the school are highly motivated by the programme and the impact it has had nationally. Still, there are suggestions from all participants on the methodology, parental involvement and support from other institutions.

Regarding the outcomes of the programme, participants agree that in recent years students have become more aware about sexuality. Still, few teachers claim that students from rural areas are less informed and therefore less aware of this matter. In general, participants affirm that outcomes of the programme are positive and have impacted on the knowledge students have gained on sexuality, increase of awareness about sexuality, rise of student’s confidence to discuss sexual issues, improve of SRHR outcomes on students, change of conception about sexuality, inter-sectoral support, more activities and higher teacher’s involvement in the project. Outcomes of the programme on family member is, however, very poor.
8. Conclusion

The present qualitative study aimed to explore how the “Me conozco, me respeto y aprendo a vivir bien” programme was implemented. It analysed views from different actors about the quality, relevance and outcomes of the programme as well as the challenges of implementation. This chapter presents the conclusions of this study. First, the main findings are presented based on the sub-questions that guided the study, then the findings are discussed in relation to similar other studies to see whether they confirm or contradict with previous results. Later, the implications for policy and practice are discussed. Finally, recommendations and suggestions for future research are offered.

8.1. Overview of the main findings

Main discourses and the official approach to sexuality education in Colombia

Colombia has made significant efforts to include comprehensive sexuality education at school among young learners. Since 1994, policies have motivated the inclusion of sexuality education at school. Resolution 3353 (MEN, 1994) and law 1620 (Congreso de la República, 2013) were especially influential because they made sexuality education mandatory in all Colombian schools with a rights-based approach. Although few programmes have been developed in the country to teach sexuality education at school, the PESCC programme provides a valuable material for schools to design their own sexuality education programme based on student’s rights.

From the three discourses on sexuality education offered by Braeken et al. (2008) the content and method that shape sexuality education among participants of the “Escuela Normal Superior la Presentación” is a mixture of morality and health-based approach with a main focus on abstinence, which contradict the national policy that asks for a right-based approach. Sexuality education is strongly connected to religious, moral values and norms with the exhibition of facts about unwanted pregnancy and STI. Students are assumed as passive subjects and encourage to follow what is socially acceptable. There is a clear influence of cultural and religious norms that teachers and parents find hard to
abandon when discussing topics of sexuality education. Its values have been reflected on previous studies (Berger et al., 2008).

Participants at “Escuela Normal la Presentación” acknowledge that some students are sexually active because that was found in the context analysis within the school. Nevertheless, abstinence is presented as the correct decision for avoiding STIs and teen pregnancy. Apart from one teacher with extensive training on sexuality education and the health-worker, all teachers within the programme insisted on abstinence. Results are not unique since a review from developing countries (Kirby et al., 2006) showed that abstinence was strongly encouraged within programmes of sexuality education, even within discussions of contraceptive methods.

Previous research, however, has shown that abstinence programmes have no positive effects on children’s SRH. Students within programmes based on abstinence-only are more likely to engage in higher risk behaviours after initiating sexual intercourse. Besides, teen pregnancy was not positively influenced by the abstinence-only programme while students within comprehensive sexuality education programmes did have a positive effect (Santelli et al., 2006; Kohler et al., 2008).

Objectives of the case study school for implementing the “Me conozco, me respeto y aprendo a vivir bien” programme
Mainly three factors encouraged the implementation of the “Me conozco, me respeto y aprendo a vivir bien” programme. First, there was an increase of teen pregnancy within the school. Second, the MEN and the SE pressured schools to include sexuality education programmes. Third, after a strict training on sexuality education from the MEN teachers of the school not only saw the need, but also developed the skills and knowledge to implement it. The programme has been implemented for around five years.

Sexuality education in the “Escuela Normal Superior la Presentación” has managed to include students from all ages. That is an important achievement considering that including sexuality education from early age has been considered to be essential to improving youth SRHR (WHO, 2010). The programme is based on the PESCC programme, which suggests including sexuality education by using conductive threads that specify the particular activities in a pedagogical matrix. The PESCC ask for sexuality
education programmes that advocate student’s rights, gender equality and respect for diversity.

The “Me conozco, me respeto y aprendo a vivir bien” programme includes key elements of the PESCC programme (context analysis, pedagogical matrix and its implemented as a cross-sectional project). However, the programme fails to include all the elements of sexuality education and therefore some topics are either explained superficially or not included at all. Besides, the detailed actions of the programme are not clearly specified in the pedagogical matrix, and abstinence is predominantly suggested among students. This contradicts the main message of comprehensive sexuality education suggested by the programme.

Overall, observations and interviews showed that the goals and the context where the “Me conozco, me respeto y aprendo a vivir bien” programme is implemented are not totally in agreement. Comprehensive sexuality is not included at school as stated in the objectives of the PESCC and the “Me conozco, me respeto y aprendo a vivir bien” programme. This confirms some other studies conducted in Africa where classroom practices commonly contradict programme goals (Mirembe et al., 2001; Smith et al., 2013).

**Implementation/mediation of the “Me conozco, me respeto y aprendo a vivir bien” programme at schools**

The “Me conozco, me respeto y aprendo a vivir bien” programme is implemented based on one conductive thread, “Valuing yourself”, which is taken from the 41 conductive thread suggested by the PESCC programme. Its implementation has been done through general and classroom activities delivered by teachers and health-workers. Results of implementation showed a large acceptance on sexuality education at early age. Activities at school, however, are mostly teacher-centred where abstinence is encouraged among all students, even when the school board have found that some students are sexually active.

Comprehensive knowledge was not always identified in the classroom practices. Observations showed that sexuality was frequently approached as a dangerous practice and the cause of many problems. In the same way, contraceptives methods where negatively presented and only encouraged to use in future occasions.
Harmful effects of contradictory classroom practices were identified in the implementation of the “Me conozco, me respeto y aprendo a vivir bien” programme. Those dangerous practices are presented based on the four types of control that might be observed within sexuality education programmes offered by Mirembe et al (2001).

First, compulsory heterosexuality was clearly perceived. Teacher’s naive view of students making no recognition of homosexuality and scarce discussions about sexual diversity clearly showed this trend. By contrast, sexual harassment control was not observed at any level. Teachers and students claimed to have a good relation. Conversations among students and teachers were in two ways, especially within activities of trained teachers. Still, students usually do not approach school members to discuss sexual issues.

Second, gendered discipline patterns and hegemonic masculinity were perceived in some classroom practices. Even when most teachers encouraged girls to participate and openly ask about sexuality, which is evident by the equal participation of male and female students observed and reported by participants; negative attitudes from several teachers among female student’s sexuality revealed some levels of gender inequality. Teachers portray unbalanced power in heterosexual relations where girl’s hyper-sexuality is not accepted. Outside school, mother’s prevalence of boy’s power showed the same trend.

Schools are not the only figure influencing student’s beliefs and attitudes toward SRHR. Along with previous studies, the present study found that family and the community setting are influential on youth’s sexual behaviour (Sweeting, West & Richards, 1998; Wight, Williamson, & Henderson, 2006). Observations and interviews showed that parents frequently impose gender inequalities. Girl’s sexuality was frequently seen as immoral and defined by boy’s sexual preferences. Besides, patriarchal setting within the community seems to prevail men’s pleasure. Additionally, at the household level, abstinence-only was strongly suggested among adolescents, even when parents reported knowing that some of their children are sexually active.

Challenges of implementation encountered by teachers and students
In line with international studies, results from this case study revealed that teaching practices were shaped by teacher’s beliefs and norms (Paulussen et al., 1994; Berger et al., 2008; Hughes et al., 1998). High levels of religiosity obstructed the discussion of sensitive topics such as abortion and homosexual rights. Teachers found it difficult to abandon their personal beliefs when delivering sexuality education.

Actors delivering sexuality education suggested feeling comfortable when approaching topics about sexuality. However, they recognize the challenges of implementation such as the high levels of religiosity at school, lack of parental support, lack of time, difficulties to include sensitive topics, lack of training on sexuality education, shame to talk about sexuality, myths around sexuality, lack of teacher’s involvement, low participation of students within the activities, lack of materials to deliver sexuality education and limited teachers-meetings

Moreover, the results showed that the majority of participants are unwilling to accept students as sexual subjects. Only those supporting comprehensive sexuality education state that adolescents are allowed to have sexual intercourse. As a result, parents and the school are primarily implementing the morality-based approach for sexuality education programme with a main focus on abstinence, even when the PESCC asks for a comprehensive emphasis (MEN & UNFPA, 2008). In other words, even if the policy is rather progressive, particularly for a Catholic society, the practice of sexuality remains conservative.

On the other side, although a higher number of female students expressed being comfortable discussing on sexuality, the majority of students felt that girls struggle more to discuss these topics. Students admitted that shame and fear are the most frequent reasons to avoid participating in some activities of the programmes as well as teacher’s shame to address some topics and teacher’s traditional beliefs. Key informants consider that lack of resources, teacher’s lack of knowledge and parents unwilling to discuss are the main barriers of implementation.

Outcomes of this case study confirm the findings of Braeken et al (2008). Teacher’s fear of encouraging youth to have sexual intercourse as well as the lack of support from parents and school’s fellows led teachers to use abstinence-only education. There is a normalized tendency to approach sexuality education with the main message of
abstinence. However, as mentioned earlier, approaching youth sexuality by focusing on abstinence is not beneficial because in those programmes information is reserved, which promotes questionable and inaccurate opinions among students on sexuality issues (Santelli et al., 2006).

**Quality, relevance and outcomes of the programme viewed from the perspectives of different actors**

Results on chapter 7, revealed a general support for the programme and for improving student’s SRHR among participants. Participants agreed that the programme is relevant and the quality is good. Still, suggestions from all participants showed that there is a need for improvement because sensitive topics are not discussed in depth and parents are not fully involved. Students are particularly interested in including more topics and having more dynamic activities. For teachers, suggestions are more related to the lack of training and few materials to deliver effectively sexuality education.

Overall, participants expressed positive outcomes of the programme. They agreed that nowadays it is more common to speak about sexuality, especially since the director of the school arrived to the town. Students and parents are now more aware of sexuality. Outcomes of the programme are predominantly manifested on students, specifically on the gained knowledge about sexuality, increase of self-confidence and changes in how sexuality is perceived. However, the effects of the programme on parents are limited.

**8.2. Implications for policy and practice**

Results from this study showed that national policies on sexuality education still lack of ways to include comprehensive sexuality education based on the rights of children and young people. The gap between national policies and local practices is considerable. Besides, classroom practices are largely influenced by teacher’s attitudes, religiosity and cultural norms, which are not beneficial for youth’s SRH.

**8.3. Recommendations**
• Education in the national context should analyse the gap that exist between the framework of sexuality education programmes and its actual implementation in local contexts. Contextualised policies should be developed to support comprehensive sexuality education and support practices.

• Teacher’s training on sexuality education must be a priority. Training must provide teachers with the knowledge, but also should transform teacher’s attitudes and beliefs. Teachers delivering sexuality educations must understand that their personal, religious and cultural norms cannot influence their classroom practices.

• National policies should include other stakeholders apart from teachers and students on the inclusion of sexuality education. Results in this study showed that other actors are influencing youth’s SRH. Parents, health-workers, coordinators, counsellor, directors of schools and others are lacking the knowledge to deliver sexuality education. Therefore, they should receive adequate knowledge about sexuality educations and if possible be trained to deliver it.

• Other institutions must support sexuality education. Sexuality educations should be considered a social priority rather than a school request. Hospitals, NGO’s, the private sector and the government should provide the knowledge and resources to improve the training on sexuality education and provide materials to deliver sexuality at school effectively.

• Based on interviews with government officers, private schools are not fully involved in this regard. The Colombian government have supported sexuality education only in the public sector. There is no information about how sexuality education is supported in the private sector. The national government must support and supervise both public and private institutions, mainly because private schools and hospitals have increased the presence in the country in the last years.

• Levels of religiosity within the country are quite high. However, religiosity cannot obstruct the advances on sexuality education. Religion and sexuality education should find a balance to provide sexuality education effectively and with good quality.

• The present study showed that the common approached in the classroom practices is teacher-driven. Therefore, more efforts must be done to include student-driven
practices empowering students and making them participants of the decision-making of their context.

• Finally, actors within sexuality education programmes must abandon gender stereotypes and gender roles to encourage gender equality. Activities and discourses on sexuality education must reinforce gender equality.

8.4. Future research

• A comparative study in a non-Catholic school will help out to see whether in those schools sexuality education is delivered in a more comprehensive way. Religiosity and cultural norms could be less involved in classroom practices.

• Parents in this case study were found to be relevant on student’s SRH. Information in this regard is necessary to create strategies that help children to be responsible of their SRH.

• Similarly, the hospital with the help of the Friendly Unit, were also essential on the programme implementation. Therefore, information about the impact of those health-workers on student’s SRH can be useful in devising new strategies in addressing SRHR concerns of the youth.
References


References


APPENDIX I: Interviews

Students Interview

The object of the interview is to gain depth understanding of how the “Me conozco, me respeto y aprendo a vivir bien” programme is implemented/mediated at schools, which are the challenges of implementation experienced by you as a student within the programme and what is your perception about the quality, relevance and outcomes of sexuality education.

The information provided in this interview will be totally anonymous and it will only be used for research purposes. If you agree the interview will be recorded, but in any case you consider convenient to switch the audio recorder you are free to do it (It is explained how to do it).

General question
• How old are you?
• How long have you been in this school?
• In which grade are you?
• Do you like school?
• What do you like about it?
• Where do you live?
• With whom do you live?
• What do your parents/stakeholders do?
• Do you have brothers and/or sisters?
• Do you profess any religion?

Topic related questions

Implementation of the programme
• Have you heard of “Me conozco, me respeto y aprendo a vivir bien” programme? What do you know about it?
• In which activities of the “Me conozco, me respeto y aprendo a vivir bien” programme have you participated?
• Do you enjoy the sexuality education lessons of the programme? If yes, why?
• How is the relation with the teachers?

Challenges
• What problems, or difficulties have you encountered within the activities of the programme?
• Is it easy for you to express your opinions within the activities of the programme and sex lessons? What makes it easy/difficult to participate?
• Are you comfortable when discussing issues of sexuality in the classroom?
• Do you feel it is more difficult for girls than for boys to discuss topics about sexuality?
• Do your parents/caregivers know you are attending sexuality education at school? What do they know about it?
• Do you discuss topics of the programme with any member of your family, friend or teacher?
• Who would you approach for sexual advice? Which topics are you more curious about?

Quality, relevance & Outcomes
• Do you find the programme and the topics (sexuality education, citizenship, healthy life and uses of free time) relevant?
• Do you find relevant to learn about sexuality education?
• Do you find the information provided within sex education lessons is enough? Which topics do you consider should be included within sex education lessons?
• What do you think about the quality of the programme?
• Do you have any suggestion to improve the lessons of sexuality education or the programme?
• What age do you consider must be the appropriate to attend sexuality education? What should be the main focus? What should be the main message?
• What do you think are the causes of early sexual relationship?
• What have you learned from the programme? Did the programme have a positive or negative effect on you?
• Would you want to share something else?

Thank you for participating in the interview. You could contact me through my email account or my phone number in case you want to share something else.
APPENDIX II: Code list

**Objetivos**
- Preocupaciones
- Motivación
- Duración
- Objetivo

**Implementacion**
- Actividades Generales
- Actividades Específicas
- Actividades Hospital
- Apoya el programa
- Capacitación
- Común hablar de sexualidad
- Disfrute
- Instituciones externas

**Calidad & relevancia**
- Calidad
- Sugerencias
- Edad/objeto educacion sexual
- Relevancia
- Apropiadas

**Desafíos**
- Desafíos
- Comodidad
- Consejos
- Discutir programa/temas
- Dificultad niños/niñas
- Dificultad como docente

** Padres**
- Conocimiento/de acuerdo
- Discusión sexualidad en casa
- Educación sexual en papas
- Ayuda/consejos

**Resultados**
- Jóvenes consciente sobre sexualidad
- Resultados
- Resultados en la familia
- Conocimiento jóvenes
Servicios de Salud sexual y reproductiva
  • Asistir a servicios
  • Servicios

Discusiones
  • Aceptable sexualidad en adolescentes
  • Causas sexo a temprana edad
  • Discusiones sobre sexo en casa
  • Enfoque oficial
  • Iglesia
APPENDIX III: Conductive threads proposed by the PESCC: Components of sexuality (Table A) and functions of sexuality (Table B).

**Table A. Components of sexuality**

<table>
<thead>
<tr>
<th>Gender Identity</th>
<th>Cultural gender behaviours</th>
<th>Sexual orientation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dignity recognition</td>
<td>Culture and gender behaviour</td>
<td>Sex-erotic and affective orientation</td>
</tr>
<tr>
<td>Identity pluralities</td>
<td>Critical analysis of cultural gender behaviour</td>
<td>Right to choose freely and respect for the difference</td>
</tr>
<tr>
<td>Valuing yourself</td>
<td>Flexibility on cultural gender behaviour</td>
<td>Valuing diversity</td>
</tr>
<tr>
<td>Development of moral Judgment</td>
<td>Gender equality</td>
<td>Construction of respectful environments</td>
</tr>
<tr>
<td>Life project</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Free personality development</td>
<td></td>
<td></td>
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<tr>
<td>Identity and sexuality</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Right to information</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Table B. Functions of sexuality**

<table>
<thead>
<tr>
<th>Erotic</th>
<th>Affective</th>
<th>Reproductive</th>
<th>Communicative-relational</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pleasure recognition</td>
<td>Establishment of ties</td>
<td>Biologic-sexual and reproductive functioning</td>
<td>Peaceful coexistence</td>
</tr>
<tr>
<td>Body as a well-being source</td>
<td>Construction and care of the relationships</td>
<td>Psychological and social aspects of reproduction</td>
<td>Participative relationships</td>
</tr>
<tr>
<td>Erotic expressions</td>
<td>Identification, expression and management of own and others' emotions</td>
<td>Sexual and reproductive health</td>
<td>Respect for identity and the difference</td>
</tr>
<tr>
<td>Erotic language</td>
<td>Expressing affection</td>
<td>SRHR services</td>
<td>Right to personal safety</td>
</tr>
<tr>
<td>Intimacy right</td>
<td>Right to choose the marital status</td>
<td>Right to the physical, psychic and social integrity</td>
<td>Education rights</td>
</tr>
<tr>
<td>Gender equality</td>
<td></td>
<td>Right to freedom</td>
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<tr>
<td></td>
<td></td>
<td>Right to life</td>
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</tbody>
</table>
**APPENDIX IV: Pedagogical Matrix “Me conozco, me respeto y aprendo a vivir bien”, Escuela Normal Superior la Presentación, Soatá**

<table>
<thead>
<tr>
<th>Conductive Thread</th>
<th>Goals</th>
<th>Citizenship and scientific competences</th>
<th>What and how to do</th>
<th>To whom (Grades)</th>
<th>When and where</th>
<th>Materials</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>VALUING YOURSELF</strong></td>
<td>I recognise myself as a valuable and unique human being who deserves to be respected and valued. I go to the right institutions and people that can help me when my rights are violated.</td>
<td>I can identify the differences and similarities between others and me regarding to gender, ethnic and social background, traditions, tastes, ideas and so on. I actively listen to my classmates, recognise different points of view and compare it with mine.</td>
<td><strong>Natural Sciences</strong>&lt;br&gt;Value, respect and care of the body.&lt;br&gt;Anatomy and physiology of the male and female reproductive systems.&lt;br&gt;Knowledge of contraceptive methods and sexually transmitted diseases.&lt;br&gt;Body care&lt;br&gt;Preventing pregnancy and abortion.</td>
<td>6, 7, 8, 9, 10 and 11</td>
<td>During the class, 15 minutes instruction</td>
<td>Books, videos, brochures and posters</td>
<td>Presentation of posters, participation in all activities and talks</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Social Sciences</strong>&lt;br&gt;Knowing the PESCC project: design of brochures&lt;br&gt;Sexuality in my life: conference and talk&lt;br&gt;Sexual and reproductive rights: video and reflection&lt;br&gt;Sexuality and human dignity: discussion and poster making</td>
<td>6, 7, 8, 9, 10 and 11</td>
<td>During the class, 15 minutes instruction (From July until November)</td>
<td>Books, videos, brochures and posters</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Mathematics</strong>&lt;br&gt;My personal history: recognise the changes over the years (Talks and autobiography).</td>
<td>6, 7</td>
<td>During the class</td>
<td>Texts and books</td>
<td>Analysis of the talks and the biography.</td>
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<tr>
<td></td>
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<td></td>
<td><strong>Spanish</strong>&lt;br&gt;Sexuality and recreational reading: use the reading activity to understand sexuality.</td>
<td>10 and 11</td>
<td>During the class</td>
<td>Texts, videos and books (Youth in Sexual ecstasy, the wire girls and others)</td>
<td>Written documents</td>
</tr>
<tr>
<td><strong>English</strong></td>
<td><strong>Technology</strong></td>
<td><strong>Ethics</strong></td>
<td><strong>Psychology and pedagogy</strong></td>
<td><strong>Physical education</strong></td>
<td><strong>Philosophy</strong></td>
<td><strong>Research</strong></td>
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<tr>
<td>Who is the man/woman and their body: Witting groups there are discussions and a presentation about the body and sexuality</td>
<td>ICT and Sexuality: Design of slides about the body and dignity.</td>
<td>Development, a process in constant change: Photos from different ages, positive and negative features of changing over life. I identify myself with integrity: Video and talk about sexuality Conditions to relate with other people: Friendship</td>
<td>Developmental psychology: Knowing myself, behaviours, self-esteem, self-respect, alcoholism and drug addiction.</td>
<td>6 until 11</td>
<td>10 and 11</td>
<td>10 and 11</td>
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<td>11</td>
<td>6, 7, 8, 9, 10 and 11</td>
<td>6</td>
<td>10 and 11</td>
<td>6 until 11</td>
<td>10 and 11</td>
<td>10 and 11</td>
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<tr>
<td>During the class, 15 minutes instruction</td>
<td>During the class</td>
<td>During the class</td>
<td>During the class</td>
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<tr>
<td>Books and videos</td>
<td>Laptop and videos</td>
<td>Pictures</td>
<td>Guides, videos and texts.</td>
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<td>Videos</td>
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<td>Posters, reflexions and draws.</td>
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<td>Accepting the difference</td>
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