



Beyond the abstinence Mantra: Attitudes of parents towards comprehensive sexuality education in Zimbabwe

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Abstract—The sexuality education debate has predominantly increased to revolve around the strict abstinence mantra, reflecting deeply ingrained cultural, religious, and societal attitudes towards sex and reproductive health, and Zimbabwe is not an exception among African countries. Nevertheless, there is a growing recognition of the limitations of this approach and the need for more comprehensive sexuality education to address the complex needs of young people in the country. This study explored the attitudes of parents and guardians toward comprehensive sexuality education in Zimbabwe, shedding light on their beliefs, perceptions, and concerns regarding the provision of sexual health information to their children. A qualitative approach was used with the descriptive survey research design. Twenty-four parents and guardians (eleven males and thirteen females) were purposively selected from the Chikomba district of Mashonaland East province, Zimbabwe. In-depth interviews and document analysis served as data collection tools. It emerged from the study that most parents and guardians have negative attitudes toward comprehensive sexuality education, which stemmed from their cultural, moral, and religious beliefs toward CSE. The results indicated that parents and guardians felt the fully fledged introduction of CSE would likely lead to moral degradation, among other things. Despite these challenges, few participants expressed positive attitudes towards the equipping of young people with the CSE knowledge and skills so that they make informed decisions about their sexual and reproductive health. The current study recommended a collaborative approach to deal with the dynamics of CSE with input from policymakers, educators, parents, health personnel, social scientists, and learners, as opined by some participants.

Keywords: Abstinence, Comprehensive sexuality education, Moral degradation, Observational learning

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I. INTRODUCTION

IN Zimbabwe, traditional approaches to sexuality education have long revolved around advocating abstinence as the principal method to deter unwanted pregnancies and sexually transmitted infections (STIs) among adolescents (Mukau & Nichols, 2024). However, the efficacy and appropriateness of this abstinence-only paradigm have been increasingly questioned, necessitating a shift towards a more comprehensive approach to sexual health education. Amidst the rich tapestry of cultural, social, and political contexts in Zimbabwe, the current study navigated the intricate dynamics entrenched within the traditional emphasis on abstinence and its profound influence on parental perspectives regarding sexuality education for their offspring. In this context, efforts were made to explore the complexities surrounding parental attitudes toward CSE. Drawing from a myriad of scholarly sources, including studies by Mugweni, Pearson, and Omar (2017); Mukau and Nichols (2024), and Marufu and Machingura (2020), the current researchers critically examined the cultural, social, and religious factors that underpinned parental viewpoints on this pivotal matter emphasising the need to move beyond conventional approaches and embrace a more inclusive and holistic framework for sexual health education. Thus, this study explored the attitudes of Zimbabwean parents and guardians towards CSE, transcending the prevailing abstinence-only mantra.

Sexuality education is a critical component of comprehensive health education programmes. It equips individuals with the knowledge, skills, and attitudes necessary to make informed decisions about their sexual health and well-being (UNESCO, 2018). In Zimbabwe, as in many other African countries, the approach to sexuality education has historically been characterised by an emphasis on abstinence as the primary means of preventing unwanted pregnancies and sexually transmitted infections (STIs) (UNFPA, 2015).

The prevalence of the abstinence-only approach in Zimbabwean society reflects deeply entrenched cultural, social, and religious values that prioritise chastity and sexual purity, particularly among young people (Mugweni et al., 2017). These values are often reinforced by traditional beliefs and societal expectations surrounding gender roles, family dynamics, and moral conduct (Kajawu, Makaudze & Machingura, 2019; Mukau, 2023). Additionally, Zimbabwe's conservative legal and policy framework has historically limited the scope of sexuality education in schools and communities, further perpetuating the dominance of abstinence-focused approaches (NPRC, 2016).

Notwithstanding the widespread promotion of abstinence as a preventive measure, Zimbabwe continues to face significant challenges related to adolescent sexual and reproductive health (Mukau, 2023; Mukau & Nichols, 2024). The country has one of the highest rates of teenage pregnancy in sub-Saharan Africa, with approximately one in four (25%) girls aged 15-19 having already begun childbearing,

according to Mukora-Mutseekwa, Gunguwo and Mandigo (2019) and ZIMSTAT and ICF International (2016). Moreover, STI rates remain high among young people, thereby necessitating the introduction of comprehensive strategies to address sexual health challenges and promote positive sexual behaviours (UNAIDS, 2020; Mukau, 2023).

While conducting a study on the perceptions of adolescents on the role of teachers and parents in their upbringing, Kufakunesu, Ganga, Chinyoka, Hlupo, and Denhere (2013) noted that the once self-contained extended family fabric, which used to act as a fountain of information for developing children has been ransacked and fragmented by several variables. In the past, children used to be cultured to abstain from premature sexual activity, and upon attaining late adolescence, adults such as grandmothers, grandfathers, aunts, and uncles used to educate them on any sexuality issues (Kufakunesu, Madusise & Malasha, 2019). The terrain is no longer smooth with the increasing complexity of information dissemination, especially due to technological advancement, globalisation, and modernisation. Therefore, society remains in a quandary regarding whether to introduce CSE in schools (Mukau & Nichols, 2024) or continue relying on the almost hackneyed abstinence mantra. This scenario acted as an impetus for the current study.

In recent years, there has been a growing recognition of the limitations of abstinence-only approaches to sexuality education and increasing calls for the adoption of CSE programmes. CSE emphasises a holistic approach to sexual health education, encircling not only information about abstinence but also topics such as human development, relationships, consent, contraception, and STI prevention (UNESCO, 2018).

The paradigm shift towards CSE represents a classic change in the way sexual health education is conceptualised and delivered, putting much emphasis on the rights of young people to accurate, age-appropriate, and culturally relevant information about their bodies, relationships, and sexual health (UNFPA, 2015; Mukau, 2023). However, the transition from abstinence-only to comprehensive approaches is not without its challenges, principally in contexts where traditional values and religious beliefs about sexuality are deeply embedded (Mugweni et al., 2017).

Regardless of the challenges, there has been noteworthy progress in advancing CSE in Zimbabwe, and some green shoots are sprouting within the education and health systems (Mukau, 2023). Efforts by governmental and non-governmental organisations to advocate for evidence-based, rights-based approaches to sexual health education have gained momentum in recent years (Mukau & Nichols, 2024). The Zimbabwean government's commitment to the Sustainable Development Goals (SDGs) provides a crucial framework for promoting CSE and addressing sexual and reproductive health challenges. Specifically, SDGs 3 (healthy lives and well-being) and 4 (inclusive and equitable quality education) align with these efforts (Government of Zimbabwe, 2016).

Additionally, civil society organisations, youth groups, and community-based initiatives have played a crucial role in creating and raising awareness about sexual and reproductive health issues, challenging stigma and discrimination, and advocating for the inclusion of CSE in school curricula and youth programmes (Mukau, 2023). These grassroots efforts have helped to foster a more open and inclusive dialogue about sexuality and sexual health, empowering young people to make informed choices and assert their rights (Mukau and Nichols, 2024).

Against this backdrop, the current study was an endeavour to explore the attitudes of parents and guardians in Zimbabwe towards CSE as a way of moving beyond the prevalent abstinence-only paradigm. By examining parental perspectives on CSE within the context of Zimbabwe's cultural, social, and political landscape, the current study attempted to contribute to a deeper understanding of the complexities surrounding sexuality education in Zimbabwean communities and inform efforts to uphold more inclusive and effective

approaches to sexual health education for young people.

II. THEORETICAL FRAMEWORK

The study was theoretically situated in the psychology of education, specifically focusing on Bronfenbrenner's ecological systems theory, Bandura's cognitive and social learning theory, and a bit of Piaget's theory of cognitive development. In his ecological systems model, Bronfenbrenner maintains that a person's development can only be meaningfully understood if time is taken to examine the various systems surrounding the individual (Bronfenbrenner, 1994). The five nested systems in the order postulated by Bronfenbrenner are the microsystem, mesosystem, exosystem, macrosystem, and chronosystem (Nevid, 2012; Neal & Neal, 2013).

While the microsystem focuses on the influence of the entities in direct contact with the developing person, the mesosystem deals with the interaction of the elements of the microsystem Bronfenbrenner (1994). The home comprising parents, guardians, and siblings is a good example of a microsystemic element, while the interaction of the home, the school, and religious organisations exemplify the mesosystem (Crawford, 2020). The interaction between the home, religious organisations, and educational institutions can affect people's attitudes toward CSE (Taylor & Gebre, 2016; Chinyoka, 2016). Factors that are not in direct contact with the individual but still have a bearing on the individual's development constitute the exosystem (Tudge, Merçon-Vargas, Liang & Payir, 2017). The large array of grand factors, such as political ideology, policies, and cultural practices, which in some way determine the holistic development of an individual, make up the macrosystem (Bronfenbrenner, 1994; Crawford, 2020). Adults' attitudes towards CSE may be influenced by a particular country's cultural and ideological context (Kitchen, 2019; Muridzo, 2017). The four articulated systems influence an individual's total development in response to the overarching system of time, which Bronfenbrenner technically calls the chronosystem (Neal & Neal, 2013; Kufakunesu, 2015).

Bandura's social learning theory has several principles, primarily the principle of observational learning, that is, learning through imitation (Kufakunesu, 2017; Lahey, 2009). Applied to the current study, it can be argued that the attitudes of parents and guardians towards CSE can be attributed to what they observed from both physical and virtual significant others while they were growing up. Significant others include teachers, healthcare providers, religious leaders, and community elders (Bandura, 1977; Kufakunesu & Chinyoka, 2017). It is also worth mentioning that influential figures' favourable attitudes towards sexuality education can positively impact the attitudes of parents and guardians CSE.

Jean Piaget is a prominent psychologist who propounded a theory of cognitive development that articulates human intellectual functioning in four stages (Feldman, 2009). Piaget's mental development stages are sequentially ordered: the sensory-motor, preoperational, concrete operational, and formal operational stages (Kufakunesu & Madusise, 2020). Of interest in the current study is Piaget's fourth, that is, the formal operational stage. According to Piaget, during the formal operational stage of cognitive functioning, people can handle hypothetical concepts like love, justice, politics, and religion during adolescence (Kufakunesu & Madusise, 2020; Lahey, 2009). Mwamwenda (2010) regrettably remarks that not all people can reach the formal operational stage despite being of the right chronological age; some individuals remain stuck at the concrete operational stage and will always need to handle tangible objects to understand certain phenomena fully. One wonders if challenges are not likely to ensue if children who are not yet at the formal operational stage are exposed to CSE.

Kufakunesu and Chinyoka (2017) undertook a study to explore the extent to which adolescents benefitted from the traditionally established extended family, which was the primary source of ideas and solutions in the 1980s going backward. The literature reviewed by Kufakunesu and Chinyoka (2017) indicated that in traditional African society, it was

the responsibility of literally every adult to support the holistic development of virtually all children. Moreover, dedicated adults such as grandparents, uncles, and aunts spearheaded the impartation of information, including sexuality information, on developing children at appropriate times (Kufakunesu, 2017). The study by Kufakunesu and Chinyoka (2017) established that the once dependable extended family setup was no longer intact because of a multiplicity of variables such as technological advancement, civilisation, and globalisation. Kufakunesu (2017) also notes that alternative ways of teaching children were needed to replace the extended family network because it has virtually gone obsolete when it comes to meeting the developmental needs of children. It was against this background of wanting to devise effective ways of handling the developmental challenges encountered by children that the attitudes of parents and guardians towards CSE in Zimbabwe were explored.

III. OBJECTIVES OF THE STUDY

This study explores the nature and underlying reasons for parents' and guardians' attitudes towards CSE in Zimbabwe. It identifies effective strategies for undertaking CSE in Zimbabwe, as recommended by parents and guardians.

IV. METHODS

Research approach

The study embraced the interpretive research paradigm paired with the qualitative research approach. Smith (2008) indicates that the interpretive research paradigm is a research philosophy that maintains that reality is subjective and can only be grasped by engaging the people who have experienced or are experiencing it. Braun and Clarke (2013) further highlight that the qualitative research approach deals with the narrative or descriptive data analysis, which does not entail inferential statistical procedures such as hypothesis testing or correlational studies. Given the focus on parental perspectives, a qualitative methodology proves indispensable, allowing for a thorough exploration of diverse attitudes and perceptions toward CSE implementation in the school environment.

Research design

According to Kufakunesu (2011), a descriptive survey research design is a research strategy in which the researcher aims to describe and interpret existing phenomena, such as effects, attitudes, processes, and beliefs. Chinyoka and Kufakunesu (2017) reiterate that a descriptive survey is a qualitative research design in which a researcher tries to describe and interpret the situations obtained through processes, effects, attitudes, and beliefs. This design was relevant in this study since it helps to create favourable settings for parents and guardians to express their attitudes towards comprehensive sexuality education openly.

Data collection instruments

In-depth semi-structured interviews

An in-depth semi-structured interview refers to a conversation between a researcher and a research participant where the researcher will gather research information (Kufakunesu et al., 2019; Nickerson, 2022). These instruments are advantageous as interviewers can do them, and interviewees' non-verbal cues, such as frowning, nodding, and smiling, can further assist the researcher in understanding the sentiments of the interviewees (Clarke, 2022; Kufakunesu, 2011). These techniques were beneficial as they were flexible in covering and generating relevant data, and the research participants could present issues that the researcher may not have considered or anticipated (Bonache & Festing, 2020). Moreover, interview sessions could be audio-recorded as a backup during data analysis.

Document analysis

Document analysis refers to document review. It is a data-gathering technique in which information is gleaned from already available artifacts through collection, analysis, and interpretation (Bowen, 2009; Braun & Clarke, 2013). The review and evaluation of the documents

were done in conjunction with the guiding research questions (Corbin & Strauss, 2008). This study scrutinised and reviewed newspaper cuttings, manuals, advertisements, and syllabi.

Participants

Twenty-four participants, comprising parents and guardians with primary school-going children, were purposively selected from rural, urban, and farming areas in the Chikomba district of Zimbabwe. Purposive sampling is a non-random sampling technique in which the researcher's discretion is used to decide on the appropriate members of the population who could be selected to participate in each research study (Kapolo & Kufakunesu, 2022; Rahi, 2017). Of the selected participants, eight were from rural areas, seven from farming settings, and nine from urban areas. They were composed of eleven males and thirteen females chosen considering their diversity relative to age, gender, religious orientation, affluence, educational background, and geographical positioning.

Research site

This research was conducted in Chikomba District, Mashonaland East Province, in Zimbabwe, and the province is characterised by a mixture of rural, urban, and farming settlements. The district's diverse socio-economic setup made it ideal for exploring parental attitudes toward comprehensive sexuality education (CSE) at the primary school level. Rural areas hold traditional, conservative views on sexuality, while urban areas are more progressive because of being influenced by modern education. Farming communities represent a middle ground, where traditional values mix with urban influences. This variety allows for a comparative analysis of parental perceptions across different socio-economic contexts. The setting is beneficial for understanding how these diverse backgrounds impact views on CSE.

Data analysis

The study employed the thematic analysis style to identify and analyse emerging themes within the collected data (Maguire & Delahunt, 2017). The thematic approach allowed the researchers to understand shared meanings and experiences in the data. This rigorous approach facilitated the systematic identification of recurring themes and patterns across the data, enabling a rigorous exploration of the attitudes and perceptions of the participants towards CSE in Zimbabwean primary schools. The researchers ensured the themes were interconnected logically and meaningfully, creating a coherent and convincing narrative that precisely represented the data, as Braun and Clarke's (2022) guidelines espoused. This rigorous process allowed them to present a complete and insightful analysis of the perceptions and attitudes of parents towards CSE in Zimbabwean primary schools.

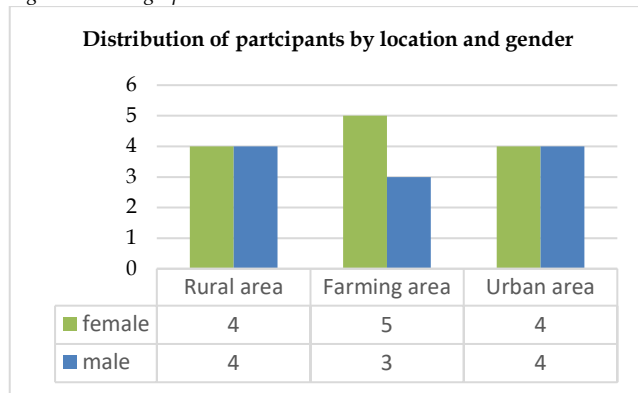
Ethical considerations

Adherence to ethical principles is paramount throughout the research process and entails ensuring participants' dignity, rights, and safety (Polit & Beck, 2020). We upheld transparency regarding the study's objectives and purpose, fully informing participants before data collection. We also took measures to protect the anonymity and confidentiality of participants by anonymising data during analysis (Chinyoka & Kufakunesu, 2017). Additionally, we provided participants with consent forms outlining voluntary involvement and their right to withdraw, as DeCuir-Gunby et al. (2011) recommended. Ethical clearance was obtained from the General/Human Research Ethics Committee (GHREC) with the UFS-HSD 2023/0408/3 clearance.

V. RESULTS AND DISCUSSION

Demographic results

Figure 1: Demographic results



Negative attitudes toward the introduction of compressive sexuality education

Most parents and guardians who took part in the study expressed negative attitudes towards the outright introduction of compulsory sexuality education in primary and secondary schools. They opined that they were not keen to move beyond the abstinence mantra since they rated abstinence literally as a foolproof method of insulating children from any dangers associated with sexual activity before adulthood. To justify their attitudes, they referred to the traditional African cultural way of raising children. Participants argued that in the past, there was no drama and furor about wanting to teach immature children comprehensive sexuality education. They expressed negative attitudes toward exposing young learners to compressive sexuality education. Eight of them viewed comprehensive sexuality education, especially at lower educational levels, as morally and spiritually unsound. They lamented that imitating wrong ideas on social media eroded society's spiritual and moral fabric.

The abstracts from three of the participants are as follows:

"Teach school children to desist from premature sexual indulgence. Abstinence anchored on religious principles has been seen to be effective in curbing challenges stemming from premature sexual activity over the years. Now is not the time to experiment with our children's lives by implementing borrowed ideas" (Participant 2).

"...we never had lessons on CSE when we were still at school, and so there no need to bother children teaching it to them..." (Participant 17).

"...it is much better and safer to go for our usual traditional way of dealing with these sex and sexuality-related issues. The abstinence-only ideology has taken us to be where we are now, and so should it be with our children and the elderly are there to teach them..." (Participant 13).

The view regarding the input of mature relatives in moulding children concurred with the findings of Kufakunesu et al. (2013), Kufakunesu et al. (2019), and Mukau and Nichols (2024). Children were ultimately taught about sexuality issues by various adults such as aunts, uncles, and grandparents when they were old enough to process the implications of the available information.

Exposure and overwhelming children with experiences in sexuality education

This study found that teaching sexuality education could expose children to detailed sexuality teachings at a needlessly early developmental stage and can be an overwhelming experience that leaves such children with many exciting ideas that they do not know how to implement safely.

The excerpts from participants' remarks entailed the following:

"The power of suggestion will be at play. The moment children, especially those at primary school level, are introduced to such erotic ideas, they are likely to be overwhelmed and in a way that will translate to the whetting of their zeal to dangerously experiment with the ideas" (Participant 11).

"... and I strongly feel that teaching these young children about sexuality is kind of introducing them into the sexuality world, and they may end up experimenting with some of the information they would have learned..." (Participant 24).

"... at this tender age, children usually want to explore new things, so if they learn about sexuality, I am afraid that most of them will end up trying to discover more about it through experimenting..." (Participant 16).

The above sentiments are tallied with the recommendations made by many developmental stage psychological theorists. For instance, Piaget's argument that only people at the formal operational stage can process and handle hypothetical concepts such as religion, love, and justice implies that premature exposure to emotionally exciting information in children can have unfortunate outcomes (Mwamwenda, 2010). The inherent implication of such sentiments is that comprehensive sexuality education should be introduced when children are old enough to cognitively and emotionally process the concepts in safe and realistic ways.

Favourable attitudes towards compressive sexuality education

The study findings also showed that there were a few parents who exhibited favourable attitudes toward compulsory sexuality education in educational institutions at all tiers in Zimbabwe. They indicated that as much as we have our own culture as Africans, it must be understood that culture is dynamic. They reported the need to monitor the new trends in social dynamics emanating from globalisation, technological advancement, civilisation, and modernity. It was pointed out that in the current advent of hyperactivity on available social media platforms, the culture of silence is not likely to be effective since there are numerous information bureaus for children.

In support of this, one female guardian fervently opined:

We must be conscious of the various settings influencing children in modern times. The whole world has turned into a small village due to technological advancement. We cannot afford to ignore the various cross-cultural factors influencing our children in our country and beyond. The culture of silence cannot take us where we want" (Participant 1).

Two female participants from urban settings averred the following:

"Yes, we have our own culture and its dictates, but as parents and guardians, we must remember that we now live in a global village. Culture is no longer static; it is changing, and we must accept it and embrace the coming consequences..." (Participant 6).

"Whether we like it or not, these children of ours will always learn about sexuality issues from various social media platforms. I am therefore of the opinion that we accept sexuality education in our schools. Remaining silent about it will bring more harm than good..." (Participant 15)

The participants suggested that radical and innovative approaches are necessary to address the risks associated with parents' reluctance to discuss sexuality with their children. This perspective aligns with UNESCO (2018), which highlights the limitations of abstinence-only approaches to ineffective sexuality education.

Curiosity to know more about sexuality issues

Some of the participants were positive about the teaching of CSE to these primary school-going children. These parents held the view that children were curious to know about sex and sexuality issues, which they might end up learning from uncensored sources. Thus, they found it better to have CSE taught in schools. These participants had the following to say:

In the same vein, one male participant opined that:

"If children are not properly taught, their curiosity to know more about sexuality issues will make them vulnerable to consuming distorted and unrealistic information, especially on social media platforms" (Participant 19).

Another male participant had the following to say:

"... it would be better to unpack the mysteries of sexuality to children in a more methodical manner than leaving everything to chance" (Participant 10).

Additionally, one female research informant reiterated that:

"Children, just like any other person, are bound to imitate various physical and virtual role models which they see in their immediate settings and on the various social media platforms ... imparting the right information to children is likely to make them wiser when it comes to navigating their way around"

sexuality issues" (Participant 7).

The above views connote that, in a way, the research informants were alluding to the influence of the various settings surrounding a developing child, as articulated by Bronfenbrenner in his ecological systems theory (Chinyoka, 2016; Kufakunesu, 2015). Moreover, it could also be deciphered that children remain capable of imitating significant others, as suggested by Bandura's social learning theory (Lahey, 2009). Moreover, the arguments presented by the 10 participants who backed the teaching of comprehensive sexuality education agreed with approximately 45% of the views expressed in the information gleaned through document analysis.

Absolute declination to proffer suggestions on how to implement comprehensive sexuality education

This study revealed that about 33% of the parents declined to proffer any suggestions regarding how comprehensive sexuality education could be undertaken in educational institutions. Their reluctance to make any additional contributions was geared to emphasise the intensity of their negative attitudes towards comprehensive sexuality education. Collectively, almost two-thirds of the participants, including some who had initially expressed ambivalent attitudes towards the introduction of comprehensive sexuality education in schools, eventually made contributions towards the generation of a suitable model for undertaking comprehensive sexuality education in educational institutions.

Some of the participants had this to say:

"This thing must only be accepted to be taught in schools on condition that a proper syllabus is put in place first. The content to be taught must match the age level of the young learners" (Participant 23).

"We recommend that the content to be taught be negotiated with various stakeholders like us, the parents and guardians. We must sit down first, put our heads together, and develop an agreed CSE model" (Participant 8).

"While I am yet to be convinced about the aptness of the programme, I think it is not a bad idea to have it being taught to our kids. One strong recommendation I must make is that it should align with our culture" (Participant 3).

"I have always not seen anything bad about CSE. I suggest we collaborate as stakeholders and develop a proper age-appropriate model of the programme. We also want this programme to be delivered by qualified teachers" (Participant 4).

"Those who plan the curriculum should ensure that proper teaching and learning methods are implemented and responsible teachers are well trained beforehand. Remember, this is a very sensitive area with some delicate topics ..." (Participant 20).

Although the first three respondents had initially registered hostile attitudes towards the teaching of comprehensive sexuality education, especially at lower educational levels, they still felt that devising ways of effectively teaching comprehensive sexuality education was not a bad idea at the end of the day. The researchers noted that most respondents believed it possible to develop a transformative, culturally sensitive array of ways to conduct comprehensive sexuality education. Such sentiments were consistent with part of the information collected using document analysis. These findings are consistent with those by Mukau (2023) and Mukau and Nichols (2024), where the study participants (school heads, teachers, and parents) advocated for an all-stakeholder approach to the establishment of a genuine, culturally sensitive, and age-appropriate CSE model.

Furthermore, participants suggested a need for feasible and tentatively effective ways of implementing comprehensive sexual education in the Zimbabwean context. They proposed that delicate and sensitive topics such as adolescent human development, relationships, consent issues, contraception, and the prevention of sexually transmitted infections need to be taught to children, even at the primary school level. This agreed with the findings of a study by UNESCO (2018). However, the parents and guardians emphasised that delicate topics must be taught with caution and clinical acumen, especially when knowing where to emphasise such lessons. Moreover, they underscored

that such sensitive issues must be taught piecemeal so the children would not get overwhelmed.

As they continued with the quest to generate effective ways of conducting comprehensive sexuality education, they suggested that a multidisciplinary approach be taken. As already indicated, the subject matter that is taught in the name of comprehensive sexuality education makes the children emotionally awakened and, hence, the need to manage the resultant affective arousal. Against this background, almost all the 16 respondents in this category suggested that qualified professionals such as ministers of religion, that is, pastors, social scientists as counsellors, psychologists, social workers, and medical personnel such as doctors and nurses should take turns to teach children the various aspects which constitute comprehensive sexuality education. Apart from the already indicated professionals, seven % of the 16 participants in this category, 45,75%, suggested that traditional leaders such as village heads, chiefs, and the like be at least involved in engaging children in the name of comprehensive sexuality education. The respondents argued that classroom practitioners are not likely to be effective if they are left to champion this cause singlehandedly. Regarding the modus operandi, the research participants suggested that various activities involving the multisensory approach were required. Presentations, field trips, debate competitions, public speaking, choir competitions, and writing competitions were mentioned as possible miscellaneous modes of content delivery that could be employed as the various facilitators interact with children with the sole intention of undertaking comprehensive sexuality education.

VI. CONCLUSION

In exploring parents' attitudes toward comprehensive sexuality education in Zimbabwe, this study transcends the traditional focus on abstinence by uncovering nuanced perspectives and challenges. Through a multifaceted analysis, it becomes evident that parents somewhat acknowledge the importance of comprehensive approaches that are culturally relevant and age-appropriate, though exhibiting some allegiance to the abstinence-only mantra. The findings reveal a complex interplay of cultural, religious, and societal factors shaping parental attitudes, highlighting both the benefits and barriers associated with embracing comprehensive sexuality education. Recommendations emphasise the need for culturally sensitive programs, enhanced training for educators and healthcare providers, and increased parental involvement. By moving beyond the abstinence mantra, stakeholders can foster open dialogue, address stigma, and empower Zimbabwean youth with the knowledge and skills necessary for informed decision-making and healthy relationships. This study features the imperative of evolving attitudes and approaches towards sexuality education to meet the diverse needs of Zimbabwean families and communities in the 21st century.

VII. RECOMMENDATIONS

Guided by the findings and insights of the current study, a few recommendations were proposed to enhance sexuality education and communication within families in Zimbabwe:

Comprehensive Sexuality Education Programmes: Implement comprehensive sexuality education programmes that are culturally sensitive, inclusive, and age-appropriate. These programmes should provide accurate information about sexual health, relationships, and consent while respecting diverse cultural norms and values.

Training for Educators and Healthcare Providers: Offer training and professional development opportunities for educators and healthcare providers to equip them with the knowledge and skills necessary to deliver effective sexuality education and support services. This training should foster open communication, address cultural sensitivities, and provide non-judgmental support to individuals seeking information and guidance.

Engagement of Parents and Guardians: Foster greater parental

involvement in sexuality education initiatives by providing resources, workshops, and support networks tailored to their needs. Encourage parents to initiate conversations about sexuality with their children, emphasising the importance of open dialogue, trust, and respect for diverse perspectives.

Addressing Communication Barriers: Develop strategies to overcome common barriers to communication within families, such as discomfort, fear of judgment, and cultural taboos. Guide on using age-appropriate language, creating safe discussion spaces, and seeking support from trusted sources, including healthcare providers and community organisations.

Community Engagement and Collaboration: Foster partnerships between schools, religious institutions, healthcare providers, and community organisations to create a supportive environment for sexuality education. Engage community leaders and stakeholders in raising awareness, challenging stigma, and advocating for the importance of comprehensive sexuality education for young people.

Accessible Information and Resources: Ensure accurate and culturally relevant information about sexuality education is accessible to all individuals, including those in rural and marginalised

communities. To disseminate information and support, utilise multiple platforms, including online resources, peer support networks, and community outreach programmes.

By implementing these recommendations, stakeholders can work collaboratively to promote positive attitudes towards sexuality education, empower families to engage in meaningful conversations, and support the sexual health and well-being of young people in Zimbabwe.

Case Study: Findings from studies by Ncube et al. (2018) and Mukau and Nichols (2024) provided recommendations for stakeholder engagement in promoting positive attitudes towards comprehensive sexuality education in Zimbabwe. Both studies emphasised the importance of collaboration, communication, and cultural sensitivity in designing and implementing effective programmes and interventions that address young people's and their families' diverse needs. By discussing these findings with relevant case studies and citing sources, we can gain a deeper understanding of the complex dynamics surrounding parental attitudes towards comprehensive sexuality education in Zimbabwe and identify opportunities for addressing challenges and promoting positive sexual health outcomes for young people.

VIII. CONFLICTS OF INTEREST

There are no conflicts of interest in this study.

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