



PRIMARY SCHOOL TEACHERS' EXPERIENCES AND PERSPECTIVES OF TEACHING SEXUALITY EDUCATION TO LEARNERS WITH HEARING IMPAIRMENT IN KENYA

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Abstract:

Teachers play a crucial role in implementing Comprehensive Sexuality Education (CSE), and their experiences and perspectives reveal both opportunities and challenges in classroom delivery. This study explored teachers' experiences of teaching sexuality education to learners with hearing impairment (LWHI) in primary schools in Kenya's North Rift region. A qualitative approach within a critical paradigm was used, employing a phenomenological design guided by Transformative Learning Theory. Data were collected from 12 purposively selected teachers in two schools for LWHI through photo elicitation and group discussions, and were thematically analysed. Findings showed that LWHI are vulnerable due to hearing disability, limited communication, community-related sexuality issues, and a lack of accurate information. Barriers to CSE included teachers' limited understanding, indecision, insufficient curriculum content, and failure to fulfil expected roles, while enablers included existing school programs and teachers' acceptance of responsibility. Teachers' perspectives were inconsistent: although willing to teach, they often used inappropriate language and were influenced by cultural attitudes, particularly within the Pokot community. The study recommends that the Ministry of Education and the Kenya Institute of Curriculum Development address these challenges by training parents and communities in Kenya Sign Language, providing in-service teacher training, and strengthening the CSE curriculum in both depth and breadth.

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1. Introduction

Children and young people face challenges in handling sexuality-related issues such as relationships, gender, and reproduction as they mature. They are vulnerable to gender-based violence, HIV and AIDS, sexually transmitted infections, teenage pregnancies, early marriages, and sexual or online bullying, which pose serious risks to their lives (Taylor & Abernathy, 2022; Monaco *et al.*, 2018). They are also exposed to inappropriate sexual information through media and digital platforms (Keogh *et al.*, 2020), which may lead to risky sexual activity, coercion, abuse, or exploitation (Aderemi, 2014; Keogh *et al.*, 2020).

Children with disabilities are more vulnerable than those without disabilities (Taylor & Abernathy, 2022). They are exploited due to their disabilities and their limited ability to express or defend themselves from harmful people and situations (UNESCO, 2018; Keogh, 2021). To safeguard the lives of children with disabilities, they need to be equipped with sufficient, accurate scientific knowledge that enables them to develop skills and attitudes to manage their sexuality challenges in their local settings (Michielsen & Brockschmidt, 2021; Sidze *et al.*, 2017). Studies show that adequate sexuality knowledge delays sexual initiation and reduces teenage pregnancies (UNESCO, 2018). Comprehensive Sexuality Education is the tool to safeguard young people. UNESCO (2018) advocates that Comprehensive Sexuality Education (CSE) is the tool which provides accurate, scientific, and age-appropriate sexuality knowledge to children. CSE is curriculum-based and addresses the cognitive, emotional, physical, and social aspects of sexuality, either as a stand-alone subject or integrated into other subjects (Sidze *et al.*, 2017). It equips learners with the knowledge, skills, and attitudes needed for informed decision-making on how to cope with their sexuality.

In order for children and young people to have adequate knowledge and develop requisite skills, Comprehensive Sexuality Education needs to be taught by specifically trained teachers on how to teach CSE as a subject. Trained teachers have sufficient knowledge and employ effective strategies that suit learners' needs (WHO, 2017). In Kenya, CSE is infused in examinable subjects and taught by untrained teachers (Yego, 2019; Sidze *et al.*, 2017). Studies show that untrained teachers struggle to deliver the content to the learner (UNESCO, 2021). They feel ill-prepared, and either avoid the subject or rely on didactic methods (Keogh *et al.*, 2021; Zulu *et al.*, 2019). Teachers' attitudes, beliefs, and misconceptions further limit effective teaching (Muriungi & Birgen, 2018; Keogh *et al.*, 2021). Exploring their practice is therefore essential in identifying setbacks in delivery, which informed this study.

CSE remains complex and sensitive, shaped by varied experiences and perceptions. Teachers' accounts reveal both opportunities and challenges. Pino *et al.* (2021) found emphasis on preventive rather than holistic sexuality education, lack of

training, and avoidance due to parental scrutiny. Walker *et al.* (2021) noted barriers and facilitators, while Fox *et al.* (2025) and Lafontan *et al.* (2024) observed teachers' discomfort with the subject. Aderemi (2014) reported that children with intellectual disabilities are often perceived as hypersexual and incapable of relationships. Against this background, this study explored teachers' experiences and perspectives on teaching sexuality education to learners with hearing impairment in primary schools.

2. Research Objective

- To explore teachers' experiences and perspectives about the teaching of sexuality education to Learners with Hearing Impairment in primary schools in the North Rift region of Kenya.

2.1 Literature Review

Attaining the sustainable Education Goal 3 of seeking to ensure healthy lives and well-being for all at all ages by the year 2030, and the effects of sexuality on the lives and well-being of children and young people, stresses the need for effective delivery of Comprehensive Sexuality Education (SE). CSE enables Children and young people to acquire sufficient knowledge and skills to make independent, informed decisions regarding their sexuality. SE empowers them with accurate scientific and age-appropriate information they use to protect their lives from harmful people and situations (UNESCO, 2018). Children with Disabilities are vulnerable to sexual abuse, molestation and exploitation due to disability. The provision of CSE is the mechanism advocated to protect them from people who take advantage of their disability. Learners with Hearing Impairment (LWHI) is a category of Children with Disabilities and fall victims of sexual abuse because they lack the knowledge and skills to express themselves to defend themselves. Hence, CSE should be delivered in ways that suit the needs of learners (UNESCO, 2021).

Comprehensive Sexuality Education has aspects of implementation that include policy guidelines, curriculum to be taught, the role of the school in CSE, the role of the teacher and parental and community involvement. Implementation of CSE varied from one country to another. Developed countries have made notable strides, whereas serious challenges exist in the third-world countries, especially those south of sub-Saharan Africa. In Kenya, CSE is not a stand-alone subject of the curriculum, but its content is infused in examinable subjects such as science, CRE, Life skills and biology (Sidze *et al.*, 2017). Teachers are not specifically trained on how to teach this subject (Yego, 2017). CSE is a complex and sensitive subject that educators need to be trained for effective delivery of CSE.

Untrained teachers experience difficulties in their teaching. They are unprepared, do not teach or teach reluctantly, have limited sexuality knowledge or transfer their responsibility to others. Teachers have cultural and religious beliefs and attitudes that stem from the communities in which they were raised (Aderemi, 2014). These believes

shape how they construct their perspectives of sexuality and influence how they approach CSE (Nabuso, 2014). Teachers' negative beliefs and perspectives are a hindrance to their teaching of CSE. Chirawu *et al.* (2014) asserted that teachers' beliefs and attitudes produced weak teaching in the classroom. The negative beliefs influence their willingness, readiness and ability to deliver sexuality content (WHO, 2017). Teachers avoid explaining issues of sexuality as much as possible to their learners, because it would compromise the teachers' beliefs (Kloh, 2013). Hence, teachers discussed topics that are culturally acceptable, such as friendships, relationships and love, but were comfortable with topics that address the protection of children from sexuality issues while disregarding those that are sensitive and contentious (UNESCO, 2018). Teachers carry these beliefs and perspectives into the classroom difficulties. Teachers avoid teaching about sexuality or do it reluctantly because of fear that learners may engage in sexual activities as a result of learning sexuality, opposition from parents and being sexually labelled by parents and community (Yego, 2017).

Sexuality is a sensitive and complex topic that is shrouded with mixed experiences and perspectives in every context and is a challenge to teachers. Teachers' experiences revealed that the teaching of sexuality is shaped by cultural and religious beliefs within the context (Ngeleka, 2014). This believes stem from the local communities in which schools are situated, and teachers come from (Aderemi, 2014). These beliefs influence how teachers construct sexuality. Cultural and religious beliefs inform how teachers construct sexuality, and this determines the perceptions and attitudes towards teaching of sexuality (WHO, 2017).

Teachers' experiences also revealed curriculum gaps that need to be addressed, ranging from insufficient content, lack of teaching and learning resources and teachers' use of ineffective strategies in the classroom (Chamida *et al.*, 2024; Maia & Vilaca, 2020). Since teachers are implementers of CSE in the classroom. Exploring their experiences sheds light on the status of CSE, the challenges encountered and the opportunities that could be harnessed for the improvement of CSE. Many studies have focused on CSE among regular students in secondary schools (Yego, 2017), Children with Intellectual Disabilities (Aderemi, 2014), and a few seem to focus on Learners with Hearing Impairment in Primary schools.

4. Materials and Methods

This study explored teachers' experiences and perspectives of teaching sexuality education to learners with hearing impairment (LWHI) in primary schools. A qualitative approach within an interpretive paradigm was adopted, using a phenomenological design. Phenomenology was appropriate as it sought to understand shared human experiences and the meaning of lived realities within context (Padilla-Diaz, 2015; Pathak, 2017). This design enabled examination of teachers' experiences, perspectives, and classroom practices in sexuality education. Data was generated through photo elicitation and focus group discussions with 12 purposively selected teachers from two primary

schools for LWHI. Permission was obtained from head teachers to access participants. The study purpose was explained, and teachers were given two days to decide. Twelve consented and agreed on the venue and timing. A six-hour focus group discussion was conducted, moderated by the researcher and video-recorded by a research assistant. Ground rules were jointly established, rapport built, and bonding forms signed. Photo elicitation was used as both a stimulus and an icebreaker. Pictures representing sexuality issues were displayed, and prompts guided reflections on teachers' experiences and perspectives. Teachers responded individually and in groups, selecting and interpreting photographs to express their views.

Data was analyzed thematically, which involved organizing, transcribing, coding, categorizing, and generating themes within the data set (Braun & Clarke, 2006; Ary *et al.*, 2018). Thematic analysis began with organizing and preparing data for analysis by familiarizing and arranging data in storage files for easy retrieval (Ary *et al.*, 2018). This was followed by transcription of the FGD interviews, which involved scanning the data, typing field notes, cataloguing, visualizing, and sorting (Creswell & Creswell, 2018). Through this process, the data were screened and winnowed (Ary *et al.*, 2018; MacQueen & Namey, 2012), and irrelevant data were disregarded. During familiarization, the audio clips were listened to, and word-by-word transcription was done in the exact words of participants (Creswell & Creswell, 2018) to avoid bias in interpretation (Ary *et al.*, 2018). Transcripts were then re-read and audio replayed to confirm accuracy. Page and line numbers were put for verbatim reference.

The transcribed data were read to make sense of it, and meaning was attempted through margin notes. Yin (2015) refers to this as a disassembling procedure where labels or codes are assigned to fragmented pieces. Data were coded by writing summary sentences in the margin, ensuring codes emerged from the data (Ary *et al.*, 2018). Codes addressing the same concept were merged to form categories. Categories formed themes, and 2–4 themes answered a research question (Creswell & Creswell, 2018). Themes were arranged to form a narrative addressing the main research question (Ary *et al.*, 2018). Data were finally presented in diagrams to provide a visual representation of findings for easy conceptualization. This depicted in-depth analysis of rich, varied, and dense data (Charmaz, 2014). The last step was a discussion of findings in light of the literature reviewed (Creswell, 2014), allowing comparison with the reviewed literature.

To establish trustworthiness, this study ensured that the criteria: credibility, transferability, dependability, and confirmability were adhered to (Lincoln & Guba, 1985). These constructs were achieved through crystallization, the use of multiple data-generation methods, maintaining rigour throughout the research process, providing an audit trail of the findings, and conducting member checks, where data are verified by individuals other than those initially involved in the study.

5. Results and Discussion

This study sought to explore teachers' experiences and perspectives in teaching sexuality education to learners with hearing impairment in primary schools. The findings are discussed in this section.

Theme 1: Vulnerability of Learners with Hearing Impairment

Vulnerability refers to how LWHI are exposed to the possibility of being sexually coerced, molested, abused or exploited. This theme is discussed under the categories shown in the table below:

Theme 1	
Vulnerability of Learners with Hearing Impairment	Vulnerability of Learners with Hearing Impairment
	Limited Communication
	Vulnerability of LWHI
	Limited access to Accurate Sexuality Information

a. Vulnerability of Learners with Hearing Impairment

Learners with Hearing impairment (LWHI) were found to be vulnerable to sexual abuse. Teachers reported that LWHI are sexually abused by People in the community who take advantage of LWHI being disabled. They pretend to show love to LWHI yet with hidden motives to harm them as shown in the excerpts.

"They are raped by the normal people [without disability] in the community who take advantage of their disability." (Focus group discussion with teacher, Lomada, p. 4, line 129-130 {2023-1-20}).

"They are people with a bad motive who pretend to show them love; deaf learners are likely to be victims of abuse." (Focus group discussion with teacher, Kadolu, p. 6, line 185-187 {2023-1-20}).

Teachers revealed that LWHI lack basic needs, which exposes them to the possibility of being sexually abused. Sexual predators in the community pretend to love them by providing their needs, yet with hidden intentions to lure them into a sexual trap. LWHI seems to misinterpret the gesture and believes these advances and ends up falling victims of sexual abuse.

"These children [LWHI] are being cheated by being given tokens or small incentives such as food and money, and are lured to sexual activities and fall victim to rape." (Focus group discussion with teacher, Peris, p. 4, line 125-126 {2023-1-20}).

"When they [LWHI] are approached sexually, they think they are loved, and so they express the love back, not knowing they are putting their lives at risk. So, these sexuality issues

affect them (Focus group discussion with teacher, Peris, p. 4-5, line 174-178 {2023-1-20}).

These findings reveal that LWHI are vulnerable to sexuality related challenges due to hearing disability. Teachers reported that LWHI having a hearing disability heightens the probability of being targeted by sexual predators in the community. These findings concur with Taylor and Abernathy (2022), who found that Children with Special Needs are 3-4 times more vulnerable than those without disabilities as a result of having disabilities. These findings stress the need to protect LWHI by providing knowledge on sexuality to enable them to protect themselves from harmful people and situations.

b. Limited Communication

Vulnerability of Learners with Hearing impairment is contributed to by limited communication between LWHI and parents and people in the community. Teachers reported that parents are not proficient in Kenya Sign Language (KSL), which is used to communicate with LWHI. Parents use natural sign which are not effective, while LWHI use KSL, which parents do not understand. Thus, LWHI miss guidance from parents on how to handle their sexuality challenges.

"When they are home, communication is limited; parents do not know Kenya Sign Language and use only natural signs, which are limited and ineffective. Thus, children may not understand what their parents are saying." (Focus group discussion with teacher, Kemei, p. 2, line 58-60 {2023-1-20})

"...members of the community may be willing to help them, but they lack skills in Kenya Sign Language." (Focus group discussion with teacher, Kemei, line 58 {2023-1-20})

Teachers view that limited communication with parents and the community exposes LWHI to sexual abuse because they cannot express themselves to defend themselves when in a compromising situation.

"In most cases, they are raped because of a lack of communication when they are found in a compromising situation." (Focus group discussion with teacher, Lomada, p. 4, line 128 {2023-1-20}).

c. Vulnerability of LWHI

Learners with Hearing Impairment (LWHI) were found to be highly vulnerable to sexuality-related challenges due to communication barriers, lack of accurate information, and limited guidance from parents and the community. Teachers reported that this left learners exposed to misinformation, coercion, and exploitation. One teacher explained,

"These children cannot ask freely about sexuality issues, so they end up getting wrong information from peers."

Community taboos on sexuality further restricted discussion. Marteson & Ouis's (2019) attributed vulnerability to a lack of knowledge on sexuality. The findings show that there is limited communication between parents, people in the community and LWHI. LWHI engage in sexual activities with limited guidance from parents. LWHI lack information to make critical decisions on their sexuality. LWHI are sexually abused because they cannot express themselves. Similar findings have been reported by UNESCO (2018) and Aderemi (2014), who noted that children with disabilities face heightened risks due to their limited ability to express themselves or resist abuse. This clearly shows the need to train parents in Kenya Sign Language to enhance their involvement in sexuality education for LWHI.

d. Limited Access to Accurate Sexuality Information

Accurate sexuality information refers to correct, undistorted information about sexuality. Teachers attributed the vulnerability of LWHI to limited access to accurate information about sexuality. Consequently, LWHI are left to make decisions on how they ought to behave without accurate information, as Sanga says in the following excerpt.

"The cause of sexuality challenges among pupils [LWHI] is because they lack accurate sexuality information.] They are usually left alone to make decisions on how they are to behave." (Focus group discussion with teacher, Sanga, p. 5, line 167 {2023-1-20})

Teachers noted that the provision of accurate sexual information is essential to protect LWHI from harmful people.

"They should be taught how to protect themselves and not to allow anyone to touch them because they can harm them." (Focus group discussion with teacher, Sanga, p. 5, line 169 {2023-1-20})

"These children are at risk of sexual exploitation, and they need information so that they take care of their lives and not fall victim." (Focus group discussion with teacher, Kemei, p. 5, line 150-151 {2023-1-20})

It should be noted that LWHI need sexuality information to understand themselves as well as the negative effects of sexual activities. Through this, LWHI can develop good moral values that will guide them in making informed decisions and good choices as a result of having a better understanding of what they should do.

"...so, we need to emphasize sex education so that these children can be aware of the negative effects of sex to their lives." (Focus group discussion with teacher, Kemei, p. 2, line 38 {2023-1-20})

"When learners are well informed, they can make good choices because they have a better understanding and background knowledge of what they should and should not do." (Focus group discussion with teacher, Peris, p. 9, line 280-281{2023-1-20})

To enable LWHI to benefit from the sexual information, teachers observed that sexuality information should be provided while LWHI are at the primary school level. This is because LWHI matures early while still in primary school. So teachers noted that sexuality education should be initiated early, before LWHI are sexually active, rather than doing it late. Kadolu said that:

"We should tell them the reality, however, some critical topics that would be helpful to the learner come too late in the syllabus, and some of our children mature early, while in grades 4 and 5 by the time they are taught in grades 6, 7, and 8, it is too late." (Focus group discussion with teacher, Peris, p. 8, line 263-265 {2023-1-20}).

"We should give enough information to these children so that by the time the children are exposed, they already know what to do and can handle them efficiently." (Focus group discussion with teacher, Kadolu, p. 9, line 319 {2023-1-20}).

The findings indicated that LWHI are vulnerable as a result of a lack of accurate sexuality information to make informed choices to protect themselves. LWHI risk engaging in sexual activities with the wrong and distorted information. These findings concur with Taylor and Abernathy (2022) and Michielsen and Brockshmidt (2021), who found that Children with Special Needs lacked access to accurate sexual information, limited by disability. This clearly indicates that sexuality education is crucial and plays a critical role in empowering LWHI with the requisite knowledge to manage their sexuality challenges.

Theme 2: Barriers to Sexuality Education

This refers to impediments to the teaching of sexuality education to LWHI in primary schools. According to UNESCO (2018), sexuality education is a curriculum process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. Sexuality in the curriculum can be taught as a stand-alone subject or infused in other examinable subjects. In Kenya, sexuality education is integrated into other subjects in primary school. This theme is discussed under categories indicated in the table below:

Theme 2:	
Barriers to Sexuality Education	Teachers' Limited Understanding of Sexuality Education
	Teachers Indecisiveness
	Teachers Not Teaching Sexuality Education as Expected
	Curriculum Insufficiency
	Teachers Fixated in Abstinence Approach

a. Teachers' Limited Understanding of Sexuality Education

This refers to how teachers define or describe sexuality content. In the practice of sexuality education, it is expected that teachers should be trained on how to effectively teach sexuality education by being equipped with sufficient knowledge, skills and attitudes (WHO, 2017). Reflecting on their experiences, teachers portrayed that they have limited comprehension of what sexuality education entails. Teachers gave scant descriptions of sexuality as opposed to the UNESCO (2018) guidelines on the content of sexuality. This limited understanding consequently affects their delivery of sexuality. Limited understanding affects their confidence in teaching sexuality education, as depicted by the following excerpts:

“Sexuality is a premature kind of behavior that children engage in that is not good for them and can lead to teenage pregnancies, which is a problem in Kenya today.” (Focus group discussion with teacher, Kemei, p. 1, line 11-12 {2023-1-20})

“Sexuality is a topic that we teach learners about themselves; that is, boys have different body physiques, and girls have different physiques and emotions. We guide our learners on how they should handle these issues so that they avoid early pregnancies.” (Focus group discussion with teacher, Alice, p. 1, line 14-16 {2023-1-20})

“To me, the word sexuality is a broad term that comprises gender, contraceptives, and functions of general parts of the body and physique. Sexuality teaches our learners about the parts of the bodies of both boys and girls. It may also mean what good and bad behavior is.” (Focus group discussion with teacher, Peris, p. 1, line 17-19 {2023-1-20})

“To me, sexuality is a characteristic that is seen in both boys and girls as they grow up differently.” (Focus group discussion with teacher, Lomada, p. 1, line 20 {2023-1-20})

“I think sexuality deals with body parts, but mainly pertains to sex. It is a wide term that includes someone’s physical, emotional, and social characteristics.” (Focus group discussion with teacher, Kilimo, p. 1, line 22-23 {2023-1-20})

These findings revealed that teachers have a limited understanding of what sexuality education entails. UNESCO (2018) defines sexuality education as a curriculum-based process of teaching and learning about the cognitive, emotional, physical, and

social aspects of sexuality. In comparison, teachers' definitions deviate and fall short of the conventional meaning of sexuality education. This depicts a limited knowledge of sexuality. The findings relate to Shuib *et al.* (2020), who reported that teachers had an unsatisfactory understanding of sexuality education practice. Teachers' understandings of sexuality informed their knowledge base of sexuality education practice (Chirawu, 2014; Aderemi, 2014). This limited knowledge of sexuality seems to be affecting teachers' capacity to deliver sexuality content. This could be a result of a lack of training on how to teach sexuality education (Yego, 2017). Teachers have not received specific training in sexuality education, yet they are expected to implement sexuality education. Thus, teachers' competencies need to be improved through in-service training if they are to deliver sexuality education to LWHI.

b. Teachers Indecisiveness

Indecisiveness is a state of hesitation about whether to do something or not. Teachers are undecided on whether to teach sexuality or not. The indecisiveness is caused by fear of the consequences of teaching sexuality to LWHI. Rachel indicated that teachers fear learners may engage in destructive sexuality activities as a result of learning sexuality education in class, and at the same time fear LWHI suffering for not learning sexuality education.

"The challenge is that we are in a dilemma because both have consequences. If we don't tell them, they will engage in negative sexual activities and later suffer; we could have prevented it." (Focus group discussion with teacher, Rachel, p. 9, line 306-307 {2023-1-20})

Further, teachers are undecided about whether to tell the truth or not. They prefer playing it safe to teaching for fear of retribution.

"Teachers want to escape from reality. We want to tell children what we are comfortable with and leave information that we are uncomfortable with teachers. We want to be safe, we know what they are doing, but we don't want to speak about it." (Focus group discussion with teacher, Kadolu, p. 10, line 335-337 {2023-1-20})

Teachers understand that the better option is to give sexuality information to LWHI so that they can use it in compromising situations rather than leaving them to suffer.

"It is better to tell them so that if they are in a compromising situation, they may know what we do." (Focus group discussion with teacher, Leah, p. 10, line 333 {2023-1-20})

"It is better to arm these children with knowledge than to let them suffer without." (Focus group discussion with teacher, Rotich, p. 10, line 327 {2023-1-20})

Teachers reported that LWHI's struggle on their own if teachers fail to provide sufficient sexuality information to the learner is a disservice.

"When we keep quiet and do not speak against these things, we are doing a disservice to these children, and we let them struggle on their own." (Focus group discussion with teacher, Magut, p. 7, line 225-226 {2023-1-20})

These findings show that teachers are in a dilemma about whether to teach sexuality or not. This indecision makes teachers partially or not fulfil their responsibility. Teachers' indecision is a result of the fear of the consequences of teaching sexuality. These findings relates with Yego (2017), who observed that teachers' indecisiveness is because of fear of being sexualized and being victimized by the community. Teachers lack commitment to teach sexuality education to LWHI. Teachers' indecisiveness needs to be addressed through in-service training for teachers on how to specifically teach sexuality education. This would improve their teaching of the subject.

c. Teachers Not Teaching Sexuality Education as Expected

Teachers mention that they had not been teaching sexuality education as expected. They neglect teaching sexuality education due to syllabus coverage of examinable subjects, understaffing, or spending more time preparing professional documents. This made teachers neglect the teaching of sexuality education.

"We have not been teaching as we should because we have not been teaching, we are chasing [busy covering] syllabus coverage, and it's hard because our system is exam-oriented and does not give room to teachers to teach sexuality." (Focus group discussion with teacher Peris, p. 8, line 274 {2023-1-20})

"...honestly, we don't teach because we are understaffed, and so we don't have time." (Focus group discussion with teacher Leah, p. 3, line 101 {2023-1-20})

"We teachers evade teaching this subject, or we neglect and leave learners to know these things on their own and say it is natural." (Focus group discussion with teacher, Peris, p. 8, line 266 {2023-1-20})

This study revealed that teachers avoid teaching sexuality education because of the workload of teaching examinable subjects. Syllabus coverage seems to be of priority to them. This affirms what Michielsen and Brockshmidt (2021) found: that teachers had competing priorities make them disregard the teaching of sexuality education. Neglect of teaching sexuality education is a barrier to sexuality denying LWHI an opportunity to

acquire knowledge to make informed choices on their sexuality. Keogh *et al.* (2020) advise that teachers need adequate knowledge, skills, positive attitudes, and values, as well as preparedness to teach sexuality education. For sexuality education to be taught effectively. UNESCO (2021) advises that it should be made a mandatory and examinable subject in the curriculum. This informs the Government of Kenya and the Ministry of Education to make sexuality education an examinable subject of the curriculum and implementation guidelines.

d. Curriculum Insufficiency

Curriculum insufficiency refers to the primary school curriculum's lack of depth and breadth of sexuality content. In their experiences of teaching sexuality education to LWHI, teachers argued that the Kenya Primary School curriculum is inadequate in sexuality content coverage. This is a barrier to effective sexuality education. Teachers reported that sensitive sexuality information has been left out, and what is available is little and scanty.

"The curriculum is a hindrance to comprehensive sexuality because I have left out sensitive information." (Focus group discussion with teacher, Sanga, p. 9, line 298 {2023-1-20})

"When it comes to hearing-impaired learners, we teach them although it is shallowly learnt... we teach shallowly, not in depth." (Focus group discussion with teacher, Peris p.1, line 28-31 {2023-1-20})

"...so as teachers, what we have been given in the syllabus is very little." (Focus group discussion with teacher, Peris, p. 8, line 26 {2023-1-20}).

Teachers opined that the number of lessons is not enough to provide sufficient knowledge on sexuality. Hence, teachers perceive that they are doing a disservice to LWHI because they give partial information.

"The lessons are not enough to provide sufficient knowledge on sexuality because it is just a unit." (Focus group discussion with teacher, Kilimo, p. 9, line 303 {2023-1-20})

These findings reveal that teachers were concerned about the depth and breadth of sexuality content in the primary school curriculum in Kenya. This affirms UNESCO (2021) findings that showed that most curricula in developing countries lack the breadth of the topic, adequate time in the timetable, and are not a stand-alone subject. Sidze *et al.* (2017) pointed out that this insufficiency is a result of a lack of comprehensive topic coverage in the curriculum. Scanty provision of sexuality content in the curriculum may not allow LWHI to fully develop the requisite knowledge, skills, attitudes and values to enable them to make informed decisions. WHO (2017) highlighted that denying learners

some sexuality education content has more negative consequences. It is necessary for the Kenyan government to consider beefing up the primary school sexuality education curriculum to provide comprehensive knowledge to LWHI.

e. Teachers' Fixation on the Abstinence Approach

The abstinence approach teaches learners to desist from engaging in sexual activities and wait patiently to attain the right age when they are ready to engage in these activities. Teachers seem to only focus on abstinence as the only way to address sexuality challenges. This is shown by Leah in the following excerpts.

"We teach them to learn to abstain until the right time." (Focus group discussion, Leah, p. 1, line 27 {2023-1-20})

Kadolu opines that it is not right to have a blanket thinking that all learners abstain.

"It is not good to have blanket thinking that all children are abstaining." (Focus group discussion with teacher, Kadolu, p. 10, line 333 {2023-1-20})

Peris reveals that teaching abstinence alone may not work because it does not guarantee safety to the learners, as they could still engage in harmful sexual activities.

"Abstaining alone does not work." (Focus group discussion with teacher, Peris, p. 4, line 313 {2023-1-20})

"We advise that they abstain, but you know that is difficult, or they use contraceptives for safe sex, but it is risky. As we can prevent pregnancies, but what about HIV and AIDS and other STIs." (Focus group discussion with teacher, Kadolu, p. 4, line 132-133 {2023-1-20})

Rotich feels that insisting on abstinence alone is not sufficient, but moving beyond to include other methods of self-protection.

"... tell them to abstain, but at the back of our minds, we know what we should do when she comes with pregnancy, we continue to tell them to abstain. They should be told that if they are tempted beyond control, they should use protection." (Focus group discussion with teacher, Rotich, p. 10, line 338-340 {2023-1-20})

Teachers advised that approaches used to teach sexuality should be considered, bearing in mind that LWHI will need and use sexuality knowledge throughout their entire life, long after leaving school.

"It is not enough because this learner must learn so well that even after leaving school, the learner still has and utilizes the knowledge and practices the right thing." (Focus group discussion with teacher, Alice, p. 3, line 78-79 {2023-1-20}).

The findings revealed that teachers are fixed on using an abstinence approach to sexuality education for LWHI. Bonjour and Vlugit (2018) cautioned that the use of the abstinence approach is not effective for students who are already sexually active or have experienced sexual abuse. Sidze *et al.* (2017) revealed that abstinence is highly conservative as it emphasizes that sex is dangerous and immoral as opposed to being safe. Hence, teachers' continuous use of this approach is detrimental to LWHI. This is because the focus is on prevention, leaving out protection and enjoyment of sexual pleasure. WHO (2017), in its guidelines, emphasizes a holistic approach to sexuality education. There is a need for teacher training to open up teachers' conception of sexuality education and empower them to adopt a holistic approach to sexuality and not be fixated on the abstinence approach only.

Theme 3: Enablers of Sexuality Education

Enablers are things that make something possible. In this study, teachers' perceptions showed some of the enablers of sexuality education. These include activities and programs that support and enhance the teaching of sexuality education to LWHI. This theme is discussed under the categories shown in the table below:

Theme 3:	
Enablers of Sexuality Education	School Sexuality Education Support Programs
	Teachers' Acceptance of Their Responsibility

a. School Sexuality Education Support Programs

School sexuality support programs and activities within the school but outside the curriculum, which provide opportunities for teachers to share sexuality information with LWHI. Teachers use these activities as opportunities to teach sexuality education. Teachers view these activities as supplementing the inadequacy or reinforcing what is taught during sexuality education lessons. These activities include guiding and counselling sessions, and during assembly.

"We give guidance during guidance and counselling sessions." (Focus group discussion with teacher, Kilimo, p. 2, line 40 {2023-1-20})

"I also emphasize sexuality during assembly or when we have an indiscipline case. Although, we should not wait for a problem to occur, as it should be a continuous process." (Focus group discussion with the teacher, Leah, p. 4, 107-108 {2023-1-20})

Teachers felt that these programs were helpful:

"...we need other ways to supplement what is taught during regular class time." (Focus group discussion with teacher, Kilimo, p. 3, line 76-77 {2023-1-20})

The findings show that there are school programs that support sexuality. These programs offer further opportunities for teachers to share sexuality information. However, the programs are informal, hence may not be taken, but if these programs are well structured, they can be harnessed to support sexuality education. This agrees with Michielsen and Brockshmidt (2021), who suggested the necessity of developing contextual school education programs to support sexuality education. Phasha and Runo (2017) emphasized that schools remain sources of accurate sexuality information. A school sexuality support program is to be established to support sexuality education. This is because schools and teachers remain trusted sources of accurate sexuality information.

b. Teachers' Acceptance of Their Responsibility

A responsibility is a mandate or duty that a person has to perform. Teachers are obliged to teach sexuality education to LWHI. Findings show that teachers know and fully accept that the responsibility is in their hands, as ascertained by the excerpts below.

"...the responsibility is absolutely on us, special teachers." (Focus group discussion with teacher, Kemei, p. 2, line 58-60 {2023-1-20})

"We teachers are the only hope for these children. We need to take sexuality education seriously and teach and advise our learners accordingly." (Focus group discussion with the teacher, Kadolu, p. 7, line 214-215 {2023-1-20})

This is because teachers are proficient in Kenya Sign Language, and they have a suitable means to communicate and explain sexuality concepts clearly to LWHI.

"I think we teachers are the only people to save these children and explain things clearly to them." (Focus group discussion with teacher, Kilimo p. 3, line 76 {2023-1-20})

"We, teachers, are the only hope for these children because we communicate with them in Kenya Sign Language. Their parents do not know the Kenya Sign Language; we are the people to guide these learners accordingly and effectively." (Focus group discussion with teacher, Kemei, p. 2, line 56-60 {2023-1-20})

"As teachers, we have the greatest responsibility because we know sign language." (Focus group discussion with teacher, Sanga, p. 8, line 270 {2023-1-20})

These findings show that teachers have accepted and are willing to take up their responsibilities because they are proficient in Kenya Sign Language. This relates to Marteson and Ouis's (2019) finding that teachers accepted the responsibility to teach

sexuality education, and Chirawu *et al.* (2014), who found that teachers had a willingness to teach. Thus, they can deliver sexuality content effectively to the LWHI. According to Goldman (2014), teachers are significant contributors to the well-being of children and young people as they are better placed to deliver sexuality content. Teachers' acceptance to teach sexuality education should be leveraged and supported for effective delivery of sexuality education.

Theme 4: Teachers' Inconsistent Perspectives

A perspective is an attitude towards, a way of regarding something or a stance on something. Teachers' perspective of sexuality refers to how teachers perceive the teaching of sexuality education to LWHI. The inconsistency in teachers' perspectives portrays how their views are contradictory. At one point, teachers' actions seem to positively support sexuality education, whereas at times they seem to demean. At times, teachers seem positive and willing to teach sexuality, while they have negative feelings in the language they use in the teaching of sexuality. This theme is discussed in the following categories, as shown in the table below:

Theme 4:	
Teachers' Inconsistent Perspectives	Teachers' Willingness to Teach
	Teachers' Improper Sexuality Language

a. Teachers' Willingness to Teach

Willingness to teach refers to teachers' readiness to teach sexuality education to LWHI. Teachers' preparedness is portrayed by the following quotations:

"We, teachers, are the only hope for these children (LWHI)" (Focus group discussion with teacher, Kemei, p. 2, line 56 {2023-1-20})

"I think we teachers are the only people to save these children [LWHI] and explain things clearly to them." (Focus group discussion with teacher), Kilimo, p. 2, line 65 {2023-1-20})

These findings reveal that teachers have a positive perspective towards the teaching of sexuality to LWHI and understand that they have a bigger role in ensuring that learners get sexual knowledge. These findings are consistent with Chirawu *et al.* (2014), who found that teachers have a positive attitude towards sexuality education. The findings also agree with Phasha and Runo (2017), who asserted that teachers are better placed in the provision of sex education because they are reliable and trusted. Hence, teachers' positive perspectives should be leveraged and harnessed for the effective teaching of sexuality education.

b. Teachers' Improper Sexuality Language

Sexuality language refers to the vocabulary that teachers use when teaching sexuality. Teachers' perspective is also depicted by the sexuality language they use during teaching. Teachers are using hidden meaning sexuality language to refer to sexuality vocabulary to teach. Teachers used indirect language, which does not tell the truth.

"We use indirect language. We don't tell them [LWHI] reality." (Focus group discussion with teacher, Peris, p. 6, line 196 {2023-1-20})

Teachers are entrenched in the belief that sexuality education is dirty.

"Again, we use language with hidden meanings, we say it dirty Language." (Focus group discussion with the teacher, Peris, p. 8, line 257-259 {2023-1-20})

Teachers use indirect language and avoid telling the truth to the learners. For example, as cited by Peris, they refer to male genitals as a stick or a pen. In the end, LWHI will know nothing.

"The sex organs are not mentioned by their real names but by other names that have hidden meanings. Eventually, what will happen to Learners with Hearing impairment? They may know nothing as a result." (Focus group discussion with teacher, Kadolu, p. 2, line 61-65 {2023-1-20})

"...let it be penis, not stick or pen. (Focus group discussion with teacher, Peris, p. 6, line 196 {2023-1-20})

The use of incorrect words is shaped by the Pokot community's beliefs and taboos. Among the Pokot community, real sexuality names are not supposed to be mentioned by name or supposed to be talked about sexuality issues.

"It has been very hard for me to explain because of cultural norms; it is always a taboo to name private parts like penis, vagina, testis by their names." (Focus group discussion with teacher, Peris, p. 8, line 397-399 {2023-1-20})

"Another problem is the community's culture. Among the Pokot community, we are not supposed to speak about sexual issues to children, or even if we do, we use indirect language." (Focus group discussion with teacher, Peris, p. 9, line 207-21 {2023-1-20}).

"The community doesn't talk about it. It is a taboo." (Focus group discussion with teacher, Lomada, p. 4, line 128 {2023-1-20})

"In our Pokot community, matters of sexuality are not discussed publicly. Sex is only supposed to be done and not talked about. It is taboo." (Focus group discussion with teacher, Lomada, p. 4, line 128 {2023-1-20}).

However, teachers are cognizant that LWHI requires the use of open and real sexuality vocabulary. The use of indirect language hides meaning and reality. To this end, LWHI may not understand what the teacher is saying. This opens a door for LWHI to receive distorted information from other avenues, such as technology.

"...the deaf children require open language." (Focus group discussion with teacher, Peris, p. 8, line 257-259 {2023-1-20})

"...We need to be open and tell them the reality that will help them learn about sexuality." (Focus group discussion with teacher, Kilimo, p. 2, line 49-50 {2023-1-20})

"We do not tell them the reality, and for the deaf, if you use examples, they may not understand, so they speak the truth so that they can understand sexuality issues." (Focus group discussion with teacher, Peris, p. 5, line 236-238 {2023-1-20})

"We should tell them what it is and not hide the truth from them because if we do not do so, technology is everywhere, and within no time, they will get information, so they should get it from the teacher first." (Focus group discussion with teacher, Kilimo, p. 9, line 44-46 {2023-1-20})

Teachers' positive perception is evident in their realization that they need to use real sexual vocabulary so that learners can understand.

"We need to use the correct words and not try to use a language with hidden meanings. If it is one, let it be a penis, not a stick or pen." (Focus group discussion with teacher, Sanga, p. 6, line 195-196 {2023-1-20})

"...and so we need to speak the truth so that they can understand sexuality issues." (Focus group discussion with teacher, Peris, p. 6, line 191-192 {2023-1-20})

Teachers' view is that guiding learners helps to counter misconceptions about sexuality:

"When we guide these learners, we counter negative beliefs about sexuality, for example, that talking about sex is bad. ...we need to be open and tell them the reality that will help them learn about sexuality." (Focus group discussion with teacher, Kilimo, p. 2, line 47-50 {2023-1-20})

This study found that teachers often used improper or neutral sexual language, avoiding correct terms and thereby distorting meanings for learners with hearing impairment (LWHI). As a result, learners risked misunderstanding sexuality content. This contrasts with Rhuno and Pasha (2017), who stressed the need for explicit and simple concepts, and WHO (2017), which recommended age-appropriate language. Aderemi (2014) attributed such challenges to teachers' limited communication skills with learners with special needs.

Teachers' avoidance of correct language also reflected cultural influences. The Pokot community regards sexuality as dirty and taboo, discouraging open discussion with children. Similar taboos have been observed elsewhere (Nelson & Odberg, 2019; UNESCO, 2018), where community beliefs shape teachers' attitudes and restrict classroom content (Chirawu *et al.*, 2014). Addressing these barriers requires demystifying sexuality, as Marterson and Ouis (2019) argued, and equipping teachers with proper training. Well-prepared teachers can approach sexuality education openly and responsibly (Rhuno & Pasha, 2017). Normalizing the subject is therefore essential for fostering teacher confidence and consistent delivery.

6. Conclusion and Recommendations

This study explored teachers' experiences and perspectives of teaching sexuality education to LWHI in primary schools. Teachers' experiences revealed that Learners with Hearing impairment are vulnerable to sexuality challenges due to hearing disability, limited communication with parents and people in the community, sexuality issues in the community and LWHI lack of accurate sexuality information. In addition, teachers' experiences illuminated barriers and enablers of providing sexuality education to LWHI. Barriers include teachers having a limited understanding of sexuality, teachers' indecision, teachers not teaching as expected, sexuality education curriculum insufficiency and teachers being fixated on the abstinence approach. The enablers are the availability of the school sexuality support program and teachers' acceptance of their responsibility. The findings of the study showed that teachers had inconsistent perspectives about sexuality. Teachers are willing to teach, but they use improper sexual language when teaching sexuality, which is influenced by their community cultures. This study brings to the fore the challenges of teaching sexuality to Learners with Hearing impairment in primary schools, so that sexuality education curriculum developers and implementers may take into consideration to address them as they seek to improve sexuality education in Kenya.

In this study, teachers' experiences and perspectives on teaching sexuality education to Learners with Hearing Impairment (LWHI) in primary schools were explored. It was found that LWHI are vulnerable to sexuality-related challenges due to hearing disability, limited communication, community attitudes, and lack of accurate information. Barriers to the provision of sexuality education were identified as teachers' limited understanding of sexuality, indecision, failure to teach as expected, inadequacies

in the curriculum, and reliance on the abstinence-only approach. Enablers included school-based sexuality support programs and teachers' acceptance of their roles.

The findings further showed that inconsistent perspectives on sexuality were held by teachers. Although willingness to teach was expressed, improper sexual language was often used, and delivery was influenced by community cultural norms. These findings highlight the challenges of teaching sexuality to LWHI in primary schools and indicate the need for curriculum developers and implementers to address them when strengthening sexuality education in Kenya.

- It is recommended that the training of parents and the community in Kenya Sign Language be intensified to enhance communication with LWHI. This would promote effective guidance in sexuality education. Schools for Learners with Hearing Impairment may be used as training centres, with workshops held during holidays and facilitated by teachers proficient in Kenya Sign Language.
- It is recommended that the Kenyan Ministry of Education review the sexuality education curriculum and make sexuality a mandatory subject. Clear policy guidelines should accompany this to ensure delivery and provide institutional support for teachers. Such measures would help overcome contextual challenges and sustain effective sexuality education.
- It is recommended that in-service training of teachers through seminars and workshops be prioritized. This would equip teachers with knowledge, skills, attitudes, and values, and enable them to apply effective approaches to sexuality education

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Conflict of Interest Statement

The authors declare that they have no financial or personal interests that could influence the results of this paper.

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