ERD 2018

SEXUAL HEALTH TRAINING PROGRAM FOR SPECIAL EDUCATION PRE-SERVICE TEACHERS: ASSESSMENT TOOLS PREPARATION

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Abstract

The social changes that occurred in the last decades accelerated the need for teaching sexual health education (SHE) for Special Education pre-service teachers (PST). This pilot study aims to compose a validated and reliable package of questionnaires to assess the attitudes, knowledge and self-efficacy (as dependent variables) of Israeli pre-service teachers that will be trained to address topics connected to SHE issues as part of their teaching tasks. The newly constructed sexuality education curriculum and several demographic variables such as gender, religion, and age serve as independent variables that separately and together are expected to explain the variance in the three dependent variables. The questionnaires were presented in Hebrew as a preparation for the quantitative part of a broader research with participants from an education College in the center of Israel. Since no specific instruments were found in the literature regarding training of Special Education PST, several items were added to previous existing questionnaires in the field of sexual health education after consultation with an expert panel. A number of 38 Israeli Special Education PST participated in the pilot study. The internal consistency of all the questionnaires (Cronbach's α) was acceptable to excellent. The results present a valid assessment package for the Israeli pre-service teacher population including items specifically related to SHE for Special Education.

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Keywords: Sexual Health Education, special education, pre-service teachers, attitudes, self-efficacy.
1. Introduction

This paper presents the first stage of the research design of a broader doctoral research aiming to examine the impact of sexual health education (SHE) training programs in Special Education (SE) on the knowledge, attitudes and self-efficacy of PST in Israel. SE is considered a domain that combines research fields of different areas such as psychological, sociological and educational aspects (Nasserzadeh & Pejman, 2017). The main focus of the doctoral research is to answer the question whether the SE pre-service teachers (PST) are prepared to meet the sexual health education (SHE) needs of their students. The specific objectives of the research are: (1) to examine the attitudes toward sexuality and SHE of PST, (2) their willingness to teach SHE related subjects, (3) what, in their opinion, are the most important topics to teach in relation to SHE, (4) do they have adequate up-to-date knowledge on SHE and (5) how important it is for them to acquire up-to-date SHE knowledge. In accordance to the specific objectives, the research questions examine what is the contribution of the sexual health education (SHE) training program for SE PST on their knowledge, attitudes and self-efficacy.

1.1. Theoretical background

In the recent years, a growing number of researchers in the field of SHE have shown interest in studies concerning people with disabilities (Saxe & Flanagan, 2014; Wilkenfeld & Ballan, 2011; Bashara, 2011; Schaafsma, Kok, Stoffelen, & Curls, 2015). Regarding sexuality, several studies on attitudes indicate that people with special needs are often perceived as naïve, a-sexual or non-existent in terms of sexuality. In contrast, there are persons who view the sexuality of people with disabilities as uncontrolled, wild or inappropriate. The outcome of such beliefs can be the appearance of conscious restrictions regarding the sexuality of people with special needs, including their sexual health education (Saxe & Flanagan, 2014; Wilkenfeld & Ballan, 2011).

The analysis of the literature indicates that educators tend to express mixed feelings about SHE for people with disabilities. Most teachers recognize this basic need and support it, but on the other hand, some fear the potential negative consequences of teaching SHE and having sexual content accessible to people with disabilities (Wilkenfeld & Ballan, 2011; Rohlader, 2010; Minch, 2011). SHE can have significant value for SE students (even more than for the general population), both because the SHE offered by the SE PST to the special needs persons might be sometimes their main source of information on sexuality (Esmail, Darry, Walter, & Knupp, 2010) and because they are working with groups at high risk of sexual exploitation (Minch, 2011).

Several researchers investigated the attitudes of PST and other professionals related to the issue of sexuality of people with disabilities (Bazzo, Memo, Soresi, & Minnes, 2007; Evans, McGuire Healy, & Carley, 2009; Gilmore & Chambers, 2010; Giryn’ski, 2005; Grieve, McLaren, Lindsay, & Culling, 2008; McConkey, 2001; Prokopiak, 2005). Although most studies describe positive changes associated to SHE training programs, i.e. mainly a greater understanding and acceptance for sexuality of disabled people, yet there were different opinions and attitudes concerning sexual behaviours such as the use of contraception, masturbation and marriage. Also, the authors explain the diversity of the attitudes toward sexuality because of the environment and/or agenda of the institutions or organizations the participants work for, and the competence the professionals felt towards addressing sexuality issues.
In a study conducted by Brosch (2007), an attempt was made to investigate the attitudes, knowledge and willingness of PST to address the topics connected to sex and family life education as part of their teaching tasks. A questionnaire was developed for the study that included demographical information, recollection of personal SHE in school, sexuality education today (in the school they work at) and a short knowledge questionnaire with items from the topic of anatomy and physiology (Brosch, 2007). Besides Brosch’s questionnaire, two other valid questionnaires were chosen for this pilot test, as it follows: (1) Reuth Open Door – IFPA’s (Israel Family Planning Association) Attitudes questionnaire on Sexuality and Disabilities, Developed by Porat (2009), and (2) Attitudes toward Sexuality Scale (ATSS), by developed Fisher, Davis, Yarber, & Davis (2011).

2. Problem Statement

Since no specific questionnaire on the topic of SHE for SE PST was found in English or in Hebrew, after consultation with an expert panel, some items in the questionnaires related to the context of special education were added to Brosch’s questionnaire (2007) and to Fisher et al (2011) Attitudes Toward Sexuality Scale.

3. Research Questions

The following research questions were issued for this study: What factors and components are significant for a SHE training program suited to PST working with special needs pupils? What is the contribution of the SHE training program for SE PST on their SHE knowledge, attitudes and their willingness to teach this subject? Are there differences in attitudes and self-efficacy among SE PST based on their age, gender, level of religiousness, general knowledge about human sexuality, personal status (including parental status) and teaching experience?

4. Purpose of the Study

The purpose of this study is to design and decide on the questionnaires to be included in the quantitative part of the doctoral research. For this, a pilot study was conducted on Israeli SE pre-service teachers through the academic year 2016-2017.

5. Research Methods

5.1. Participants

Participants to this study were 38 Israeli SE PST, 2 men (5.3%) and 36 women (94.7%), who attended colleges and teaching seminars during 2016-2017. All the participants were native Israelis, with Jewish religion orientation. The ages of the PST ranged between 22 and 47 (M = 28.66, SD = 5.69). The data collection for this pilot study was performed through the academic year 2016-2017 in the Special Education departments of two teacher training Colleges of Education in the center of Israel.
5.2. Instruments

This pilot study used three questionnaires, as it follows:

5.2.1. Demographic and sexual education questionnaire (Brosch, 2007)

This pilot study used a tool with 43 closed questions, which were structured on four parts as it follows: (1) part 1 (11 questions) - personal and demographic details, such as: year and study course, age, gender, marital status, parental education and level of religiousness; (2) part 2 – with 4 questions referring to the pre-service teachers’ childhood/adolescence period i.e. the PST were asked about the sexual education they received during that period; (3) part 3 (11 questions) - referring to the stances of the PST today regarding SHE in school, such as: Is the topic important, what are the most or least important topics (according to the curriculum suggested by the Ministry of Education) and will you be willing to teach SHE in the future; (4) part 4(17 items) - contains a short knowledge questionnaire on the topic of anatomy and physiology of the male and female reproductive organs, birth control, termination of pregnancies and sexual orientations.

5.2.2. Attitudes questionnaire on Sexuality and Disability – (Porat, 2009)

This questionnaire assesses the attitudes regarding sexuality and disability and contains 12 items, e.g. “It is better not to talk about sexuality with young people with disabilities so as to not let extra ideas into their heads”. Higher global value of the questionnaire indicates that the respondents express higher negative attitudes towards sexuality of people with disabilities. The Cronbach’s Alpha reliability of the Attitudes questionnaire on Sexuality and Disability in the current study is high α = .85.

5.2.3. Attitudes toward Sexuality Scale (ATSS) – (Fisher, Davis, Yarber, & Davis, 2011)

Fisher et al. (1988) research was conducted on a sample of college students between the ages of 18 and 28. The ATSS correlated highly with the Heterosexual Relations (Liberalism) scale of the Sexual Knowledge and Attitudes Test (SKAT; Lief & Reed, 1972), \( r (42) = .83 \). The ATSS was also correlated with the Abortion scale, \( r(42) = .70 \). The Cronbach’s Alpha reliability of ATSS in the current study is medium-high α = .62.

5.3. Procedure

The package of questionnaires mentioned above were distributed in printed format to two colleges in central Israel to PST in SE during their training in the various education courses (mainly early childhood education and SE). Prior to the completion of the questionnaires (paper-pen version), the PST were asked to sign a consent form on the anonymity and the confidence of the collected data. When the participants finished the completion, the questionnaires were individually collected in a sealed envelope.

6. Findings

6.1. Demographic and sexual education questionnaire (Brosch, 2007):

First part of the questionnaire explored several demographic data. Majority of the PST were childless (92.1%) and the women were over-represented (94.7%). Over half of the respondents were at
their third year of studying (52.6%), single (57.9%), secular (63.2%), and attended the early childhood studies on SHE (73.7%). In addition, the PST were asked other demographical questions regarding their age, number of children and their parents’ years of education. The age of PST ranged between 22 and 47 years (average = 28.66, SD = 5.69). The range of parents’ education years was also wide. Hence, for most pre-service teachers (61%), both parents’ education level was high school (at least one of the parents).

The second part of the questionnaire contained questions that referred to the PST childhood / adolescence period in relation to sexuality. The topic of SHE was often discussed during the PST’ childhood but in a limited manner (63.2%). If the topic was discussed, it was by the consultants and homeroom teacher. In light of the limited engagement in the topic, approximately 76.3% of the PST stated that they lack information in one way or another regarding sexual education during childhood and adolescence. When asked from whom they received the information on the topic during childhood, they mostly indicated their parents (34.2%), friends (36.8%) or internet (31.6%) and not their partners (7.9%) or the school staff (2.6%).

Third part of the questionnaire included items referring to the stances of PST today on various topics in SHE. A clear majority of the PST (97.4%) considers that SHE is an important or very important topic to teach in school. Almost half of the PST (44.7%) considers that SHE should be learned from the preschool level. Also, the majority of the PST (97.4%) considers that the topic of SHE should be learned in both regular and SE settings.

On the Likert scale of answers ranging between 1 and 5, all the topics were scored as highly important (the average level of importance was 3.7). The highest rates in terms of importance were found on the two following topics: “Me and my body – getting to know my physical body at an early age” and “Sexual abuse in early childhood (my body is mine only)”. On the Likert scale of answers ranging between 1 and 5, all topics were ranked with the highest degrees of importance (above the value of 4 in terms of agreement). The five most important topics as indicated by the respondents were: “Appeal for help when in distress (addresses and phone numbers of assistance centers)”, “Developmental changes during puberty”, “Sexual abuse, sexual violence and rape”, “Privacy, personal space and social distances”, “Sexual intercourse during adolescence (including decision-making)”.

In terms of ranking the level of importance of SHE topics during adolescence, the five most mentioned topics were: “Sexual abuse, sexual violence and rape”, “Body image and eating disorders in adolescence”, “Appeal for help when in distress (addresses and phone numbers of assistance centers)”, “Developmental changes during puberty”, “Sexual intercourse during adolescence (including decision-making)”. Compared to the rating of importance of the various sexual topics, four of the five topics rated as highly important were mentioned more than others. The topic of “Body image and eating disorders in adolescence” was rated second on the level of importance. The three topics that were not referred even once as being important were: “Structure and functioning of the male reproductive system”, “Structure and functioning of the female reproductive system” and “masturbation”. In regard to the question: “Do you think that school teachers should address the mentioned topics”, all pre-service teachers stated that it is the school’s role to address these important topics.
The respondents perceived the homeroom teachers and school counsellors as the most responsible individuals for addressing the sexual topics in terms of educators. When asked about their willingness to address these topics as teachers, approximately half of the PST responded that they are willing to address the topic (47.4%), and half responded that they are willing to address the topic if appropriate information/training is provided to them (50%). Only one respondent said that he would not address the topic of sexuality in the process of teaching.

The four topics on which PST wished to receive additional information/training were: (1) “Social and romantic relationships among teenagers with disability”, (2) “Sexual identity, sexual orientation and homosexuality”, (3) “Sexuality and disability – attitudes, definitions, rights” and (4) “Personal identity, sexual identity among teenagers with disability”.

When comparing the findings describing the topics on which additional information was requested to the findings regarding the topics that were considered the most important to be addressed, no similarities in responses were identified. Meaning, the four topics referred as the most important to address were not the same with the four topics on which pre-service teachers wished to receive additional information/training. For instance, the topic “Social and romantic relationships among teenagers with disability”, which was indicated by more than half of the PST as a topic on which further information is required, was ranked the 15th out of the 22 topics in terms of the level of importance.

The fourth part of the questionnaire referred to the level of knowledge of pre-service teachers in topics related to SHE. There were only three questions to which a clear majority of PST gave the correct answers, as it follows: (1) Homosexuality is defined today by psychiatrists and psychologists as a mental illness? 89.5% of PST offered the correct answer (“no”); (2) Is it possible to terminate the pregnancy (have an abortion) with the help of pills? 71.1% of pre-service teachers answered correctly and (3) Can you contract a venereal disease (or a sexually transmitted disease) when you have oral sex? 71.1% of pre-service teachers answered “yes” correctly. As to the rest of the knowledge items, approximately 60% and less of the respondents indicated the correct answers. None of the participants offered the correct answers to all the 17 items on knowledge about sexuality.

These findings also indicate that in the case of three questions, the correct responses rates were extremely low, as it follows: (1) Is there a health hazard for a girl who has sex before the age of 17? Only 7.9% responded that there is no danger in sex before the age of 17 (the correct answer); (2) At present, there are more women than men who are infected with AIDS? Only 7.9% responded correctly (not true); (3) The function of the man’s prostate gland is to…? To this question, only 13.2% responded correctly that the role of the gland was to distribute the semen.

6.2. Attitudes questionnaire on sexuality and disability (AQSD, Porat, 2009)

The level of agreement with the items regarding sexual conservatism among people with disabilities was low (below the value of 2 in scale from 1 to 4). Sexual conservatism items were such as: “It is better not to talk about sexuality with young people with disabilities so as to not let extra ideas into their heads”. On the contrary, all items regarding sexual openness among people with disabilities, such as: “Everyone has the right to exercise his or her sexual potential regardless of their physical or mental condition” were ranked as higher agreement (higher than the value of 3.5 in terms of level of agreement).
6.3. Attitudes toward Sexuality Scale (ATSS, Fisher, Davis, Yarber, & Davis 2011)

The answers to the items of ATSS were given on a Likert 5-points scale, indicating both sexual openness and conservatism. On the one hand, items regarding sexual openness, such as: “Sexual intercourse for unmarried young people is acceptable without affection existing if both partners agree” and “Homosexual behaviour is an acceptable variation in sexual orientation” were offered higher levels of agreement (above the value of 3 in terms of agreement). On the other hand, items regarding sexual conservatism, such as: “Parents should be informed if their children under the age of eighteen have visited a clinic to obtain a contraceptive device” and “A person’s sexual behaviour is his/her own business, and nobody should make value judgments about it” were also given a high level of agreement (above the value of 3 in terms of agreement).

7. Conclusion

The components of the package of the questionnaires used in this pilot study were selected based on the research questions addressing knowledge, attitudes and self-efficacy of SE PST in relation to Sexual Health Education training: (1) What factors and components are significant for a SHE training program suited to pre-service special education teachers of pupils with special needs? (2) What is the contribution of the SHE training program for pre-service SE teachers on their knowledge, attitudes and self-efficacy? (3) Are there differences in attitudes and self-efficacy among SE PST based on their age, gender, level of religiousness, general knowledge about human sexuality, personal status (including parental status) and teaching experience?

Based on these preliminary data collected in this pilot study and on the performed statistical analyses, the final package of questionnaires included 43 items/survey statements and two scales (one of 12 items and the other one of 16 items). Following a consultative discussion with experts in the field of SHE and SE, several questions and items were adjusted for a better comprehension and in order to match the Special Education field. The statistical analysis indicates that a reliable, valid and comprehensive package of questionnaires was prepared according to the research questions. The package of the questionnaire will be further used to collect data from a larger sample size of Israeli SE PST’s, prior and after the completion of a SHE training program.

References


