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“If I Had I Would”: Discovering Barriers in Implementing Centre-based Sexuality Education among Malaysian Preschool Teachers

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Abstract
Teacher-related factors are among significant barriers in implementing centre-based sexuality education (SE). While there is an expanse of literature on SE implementation in schools, literature on its implementation in early childhood settings is scarce, especially in the Malaysian context. This study was conducted in stages and the findings that are discussed here are from the second stage that aims to discover barriers preschool teachers face when implementing SE. Thematic analysis of semi-structured telephone interviews of 20 experienced private preschool teachers reveal two major barriers; personal beliefs and competency. Low parental acceptance and lack of support from administrators are barriers of preschool teachers’ personal beliefs. Lack of exposure, confidence and knowledge, and inadequate SE training are barriers of preschool teachers’ competency. Findings imply that advocating for more meaningful implementation of SE requires targeted and practical SE training in order to overcome sociocultural perceptions and enhance teaching competence.

Keywords: Early Childhood, Thematic Analysis, Preschool Teachers, Sexuality Education

Introduction
Sexuality education (SE) traditionally refers to the teaching of human sexuality, including sexual anatomy, reproductive health, rights and responsibility, sexual reproduction, sexual activity, sexual abstinence, and birth control (United Nations Educational, Scientific and Cultural Organisation [UNESCO], 2018). Pedagogically, teaching about sexuality refers to helping learners explore the information and knowledge about sex and sexual identity, and form healthy attitudes, values, and beliefs regarding sexuality (Martin et al., 2020).

Centre- and school-based SE is not new in Malaysia. Reproductive and Social Health Education (PEERS) was first introduced to public primary and secondary schools in 1989 (Curriculum Development Centre, 2011, as cited in Shukor & Supaat, 2018). However, the effectiveness of the PEERS delivery and content in educating sexuality knowledge and skills to Malaysian children has been criticised (Shukor & Supaat). The imprisonment of British paedophile Richard Huckle, who was found guilty of sexually abusing around 200 South-East...
Asian children between 6 months and 12 years old (including 22 children in Malaysia) between 2006 to 2014 (Aziz, 2016), alarmed the Malaysian society and served as a catalyst to enhance the existing PEERS in schools (Shukor & Supaat) and to introduce PEERS at the preschool level. PEERS is now a component in the National Preschool Standards-based Curriculum (NPSC) under the Physical Development and Aesthetic learning strand (Ministry of Education, 2017), which in-service teachers are trained in a day to teach young children about body parts, good touch and bad touch, unsafe situations and ways to seek for help.

The implementation of a unified SE programme in a multicultural society like Malaysia without careful planning could evoke emotional public responses due to the longstanding sociocultural view of sexuality as a taboo (Sham et al., 2020; Iyer et al., 2014). In the discourse of realising quality SE, global studies have jointly reported teacher-related factors as one of the significant barriers (e.g., Martin et al., 2020; Scholes et al., 2012). Despite local scholars collectively highlighting teacher’s competency and interest as essential determinants of quality SE teaching, detailed investigation to discover local educators’ perceptions on SE implementation in educational institutions such as preschools have not been explicitly done.

Using thematic analysis to derive more comprehensive understandings of experienced preschool teachers in a Malaysian city, this study was conducted by a group of early childhood education (ECE) lecturers from a private Malaysian university with ECE and psychology backgrounds, and SE training. This group comprises five female and one male lecturer, four who have young children of their own (three mothers, one father). Data collection methods involved purposive sampling and telephone interviews. This article discusses the findings from interviews that unpacks the barriers perceived by Malaysian preschool teachers and implications for implementing centre-based SE. Specifically, the study asked how preschool teachers perceive implementing SE and teaching SE in an ECE classroom, and based on those opinions, what are the possible barriers faced when teaching SE to young children.

Literature Review

Multiple Perceptions of SE

A content analysis investigating barriers to school-based Sexuality and Human Immunodeficiency Virus (HIV) Education in Asian countries, including Malaysia cite cultural and contextual factors, policy factors, unavailability of resources, and school relevant factors as four significant obstacles that restricted the conveyance of quality HIV and sexuality programmes (Iyer et al., 2014). Among these factors, conservative sociocultural norm is the most mentioned barrier. An example of this is the social perception that SE teaches only sexual behaviours (Ulnüer, 2018) and young people who explore sexual information would initiate earlier sexual behaviours (Martin et al., 2020).

Despite evidence of well-planned SE programmes helping to delay sexual debut and effectively preventing sexually risky behaviour, Asians are generally not convinced of the effectiveness and importance of school-based SE programmes (Sham et al., 2020; Iyer et al., 2014). Few realise that SE aims to build sexually healthy persons through education of appropriate emotions, values, communication, decision-making, and other skills and knowledge related to sexuality (Goldfarb & Lieberman, 2020; UNESCO, 2018). As sociocultural norms vary contextually, it is necessary to understand in-depth the barriers preschool teachers face in implementing centre-based SE in the Malaysian context in order to realise quality SE in Malaysia.

One of the significant barriers to the implementation of SE is teacher-related factors (e.g., Martin et al., 2020; UNESCO, 2018). A UNESCO survey in the Asia-Pacific found that
many teachers reportedly feel uncomfortable about and incompetent in handling SE. Although many of these countries have a generally high interest in Comprehensive Sexuality Education (CSE) as part of national prevention strategies against HIV, acceptance of SE is deterred by multiple perceptions of SE, mostly which are unfavourable. Despite proven benefits of CSE for children (Goldfarb & Lieberman, 2020), these perceptions have caused continued resistance towards the SE programme in many nations, including SE: 1) may lead to early sexual initiation, 2) discourages children’s ‘innocence’, 3) misaligns with cultural and religious values and beliefs, 4) would receive parental opposition, and 5) may be age-appropriate for adolescents, but not for young children (Martin et al., 2020; Oktavianingsih & Ayriza, 2018).

In Malaysia, scholars acknowledge the difficult implementation of a national curriculum-based SE (Shukor & Supaat, 2018; Khalaf et al., 2014). Teachers’ attitudes and competency are seen as significant barriers, as their conservative attitudes may cause inaccurate delivery of SE information (Eshak & Zain, 2019). Teachers teach SE-related topics purely as content-based information instead of connecting the information to real-life contexts, limiting teaching to genital organ development, sexual intercourse, and the fertilisation process. Adolescent students have collectively reported teachers’ vague and casual approach to sexuality teaching, noting hesitation and embarrassment as metaphors and analogy are used when teaching the content (Talib et al., 2012).

Malaysian in-service teachers have reported that their understanding of SE was developed in secondary school through subjects like Biology, Moral or Islamic Education, and Physical Education (Mansor et al., 2020). For pre-service teachers, SE is generally covered as a subtopic related to physical and sexual abuse of young children, as stipulated by the Malaysian Qualifications Agency (2014). There is no compulsory and detailed standalone subject on SE in pre-service ECE programmes.

SE implementation in Malaysia has received mixed societal reactions (Shukor & Supaat, 2018; Khalaf et al., 2014). Mutalip and Mohamed (2012) examined the perceptions of SE among 152 students in a local higher education institution and reported 44.1% of the respondents agreed to, 40.1% disagreed to and 14.5% were unsure about the value of implementing SE in schools. They also found that 74.3% of respondents perceived that SE should start at the upper secondary school level as compared to 18.4% at the primary school level. Introducing SE at the lower secondary school level received a mixed response.

There is a reported preference for SE to be combined with moral or religious-based subjects to avoid the feelings of taboo (e.g., Talib et al, 2012; Mutalip & Mohamed, 2012) and to serve as a more practical approach of simultaneously instilling religious and positive values and beliefs, and sexuality knowledge to better inform individuals on healthy sexual behaviours (Makol-Abdul et al., 2009). Malaysians generally agree to the introduction of SE at a more mature age (upper secondary school age), instead of at the younger primary school age, and emphasise quality of content and teachers as the two most important determinants of successful SE. Nevertheless, previous studies indicate a lack of research and in-depth understanding of context-specific perceptions and barriers regarding SE, especially at the preschool level. Findings from this study may contribute to increased qualitative understanding of SE at the preschool level, and may assist in advocating for more meaningful implementation of SE.
Early Childhood SE Beliefs and Practices: An Ecological Perspective

To address the gap in SE literature, especially in the Malaysian preschool context, this study investigates Malaysian preschool teachers’ perceptions of barriers to implementing centre-based SE in early childhood settings. The preschool teachers’ perceptions are viewed from the lens of an “adapted model representing teacher cocreation of constructivism under various influences” [known from hereon as the adapted model] (Wei, 2019, p. 6). This is an adaptation of the Ecological Systems Theory (Bronfenbrenner, 1979; 1994), whereby Wei placed the teacher instead of the child at the centre of the ecosystem’s influences. This adapted model focuses on “how teachers cocreate meaning in relation to their morality” (Wei, p. 5), as their beliefs and practices form through direct and active interactions between several environmental components from an ecological point of view.

Based on this model, this study considers three parallel sources of influence in preschool teachers’ attitudes and beliefs concerning SE implementation; the microsystem, exosystem, and macrosystem. First, the microsystem are the events that are directly connected to teachers, including teachers’ upbringing, childhood, schooling, and peers. Second, the exosystem are factors that indirectly influence the teacher’s SE attitudes, including policies, work climate, parents, the media, and technology. Third, the macrosystem are social and cultural norms. These three sources are subject to chronological and interactive change within the chronosystem. In the mesosystem, teachers undergo constant reflection on their past and current life experiences, cocreating meanings according to their changing morality. In line with Wei’s view that teachers tend to educate children based on their sociocultural understandings, this study unravels Malaysian preschool teachers’ perceptions in implementing SE, including their beliefs and competence.

Method

Case Study

As this study focuses on developing knowledge and insight into the barriers faced by Malaysian preschool teachers’ in implementing centre-based SE, a case study design was chosen. A case study enables the in-depth and multi-faceted exploration of an issue, or ‘case’ (Crowe et al., 2011). A case can be individuals, a group, an organisation, an event, a role or relationships (Flick, 2018). In this study, the case investigated is the barriers faced by Malaysian preschool teachers’ in implementing centre-based SE. This study was an exemplifying case study that analyses the key social process (Clark et al., 2021) of the preschool teachers negotiating their past and present life experiences, personal and professional knowledge of SE, and roles as preschool teachers. This directly assisted the unpacking of the preschool teachers’ perceptions of barriers in implementing centre-based SE through the lens of the adapted model.

Participants and Recruitment

The purposive sampling of the participating 20 preschool teachers ensured that they satisfy the location and teaching experience requirements of recruitment, and expressed availability and willingness to participate (Etikan et al., 2016). Specifically, the participants were all Malaysian female private preschool teachers working in the suburban areas of a metropolitan city in central Malaysia, and have at least 3 years of teaching experience. As the state education department disapproved the participation of public preschool teachers due to the Covid-19 pandemic restrictions, only private preschool teachers were recruited. This form of homogenous sampling (Etikan et al.) helped to maximise available resources (Patton,
2002) during a time of new government-imposed standard operating procedures (SOPs) and movement restrictions due to the pandemic. Table 1 lists participants’ demographic information:

Table 1. Participants’ Demographic Information
*Includes both attained and still in the process of attaining Diploma.

<table>
<thead>
<tr>
<th>Participant</th>
<th>Age</th>
<th>Ethnicity</th>
<th>Marital Status</th>
<th>Education Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>TR1</td>
<td>50</td>
<td>Chinese</td>
<td>Married</td>
<td>Certificate*</td>
</tr>
<tr>
<td>TR2</td>
<td>36</td>
<td>Malay</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR3</td>
<td>34</td>
<td>Malay</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR4</td>
<td>27</td>
<td>Malay</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR5</td>
<td>50</td>
<td>Chinese</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR6</td>
<td>40</td>
<td>Chinese</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR7</td>
<td>31</td>
<td>Indian</td>
<td>Married</td>
<td>Degree</td>
</tr>
<tr>
<td>TR8</td>
<td>40</td>
<td>Chinese</td>
<td>Married</td>
<td>Degree</td>
</tr>
<tr>
<td>TR9</td>
<td>36</td>
<td>Indian</td>
<td>Single</td>
<td>Degree</td>
</tr>
<tr>
<td>TR10</td>
<td>58</td>
<td>Chinese</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR11</td>
<td>33</td>
<td>Chinese</td>
<td>Single</td>
<td>Degree</td>
</tr>
<tr>
<td>TR12</td>
<td>32</td>
<td>Malay</td>
<td>Single</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR13</td>
<td>58</td>
<td>Chinese</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR14</td>
<td>27</td>
<td>Malay</td>
<td>Single</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR15</td>
<td>50</td>
<td>Chinese</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR16</td>
<td>45</td>
<td>Chinese</td>
<td>Divorced</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR17</td>
<td>38</td>
<td>Chinese</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR18</td>
<td>36</td>
<td>Indian</td>
<td>Single</td>
<td>Degree</td>
</tr>
<tr>
<td>TR19</td>
<td>27</td>
<td>Malay</td>
<td>Married</td>
<td>Certificate</td>
</tr>
<tr>
<td>TR20</td>
<td>33</td>
<td>Chinese</td>
<td>Single</td>
<td>Degree</td>
</tr>
</tbody>
</table>

Data Collection and Analysis

Semi-structured interviews ranging from 30 to 50 minutes were conducted on two separate occasions between July and September 2020. The use of interviews maximises the sharing of comprehensive accounts that would allow insight into the beliefs and competency of the participants as they implement SE in their preschools. Semi-structured interviews were used because of their more flexible nature in comparison to structured interviews, and takes into account possible directions and topics of interests that participants may present as the interviews progressed. Additionally, semi-structured interviews allow participants to engage in more conversation like exchanges of information and experience with the researcher (Yin, 2011).

To comply with the new SOPs, telephone interviews were conducted instead of face-to-face interviews. Designed earlier to ensure the smoothness of the interview sessions, the same interview protocol was applied to all participants to enable the analysis of data within each case (within each preschool) and also across cases (across different preschools), which assists in identifying similarities and differences in data while preserving the uniqueness of each case (Yin, 2003). The interviews were conducted in English, a language primarily used in private preschools and seen as free of ethnic biases, and were recorded using the mobile
applications Zoom and Call Recorder – Callsbox. Specifically, the interviews were conducted in Malaysian-English, or Manglish, a colloquial variety of English with borrowings from the Malay, Chinese and Indian languages (Abdullah et al., 2013) for a sense of affiliation.

The first interview focussed more on the participants’ microsystem (upbringing, childhood, schooling, and peers) while the second interview focussed more on their exosystem, macrosystem and mesosystem (factors that indirectly influence the teacher’s SE attitudes and their reflections on the meaning of their experiences according to their changing morality). Conducting more than one interview with each participant allowed for the clarification of subtle nuances within the interviews (Yin, 2011). Interviews were transcribed verbatim, for coding and analysis. Participants were assured anonymity throughout and also after completion of the study. Written consent was obtained from the participants (before data collection), followed by verbal re-consent (at the beginning of interviews) and the option to discontinue participation at any time.

As data were collected over two interviews, some of the emerging data from the second interview resulted from interpretations of data from the first interview. NVivo 11 was used to manage the coding and analysis of data. Thematic analysis was applied to extract meaningful themes from the data. Coding of data involved labeling data, assigning a system and developing categories that justify and account for the interpretation of ideas (Yin, 2011), which was independently completed by each researcher. The categories were crosschecked to establish trustworthiness (Yin) and later merged to generate two broader themes that form the findings discussed in this article: 1) personal beliefs as barrier and, 2) competency as barrier in implementing centre-based SE.

**Result**

Data collection involved participants sharing about the barriers perceived when implementing centre-based SE. Analysis of the data demonstrated that a preschool teacher’s personal belief towards parental acceptance and administrative support served as the major barrier in providing centre-based SE. Further analysis also revealed a lack of their competency caused by perceived limited exposure and a lack of confidence and ease. Also, inadequate knowledge and training had exacerbated the wariness of the preschool teachers to deliver SE to young children.

By reference to Wei’s (2019) adapted model, when preschool teachers perceive their personal beliefs as a barrier in the implementation of SE in their centres, they are influenced by their microsystems and mesosystems. When they perceive their lack of competency as a barrier, they are influenced by their macrosystems and exosystems. However, there are times when there the systems overlap due to the influence of the chronosystem, as the participants make meaning while sharing their perceptions. Table 2 below illustrates how the theme-generating process
<table>
<thead>
<tr>
<th>Theme</th>
<th>Category</th>
<th>Code</th>
<th>Sample Excerpt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Beliefs as Barrier</td>
<td>Parental acceptance</td>
<td>Young parents accept</td>
<td>At generally, I think young generation parents will have higher chance to accept it. (TR8)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not all parents accept</td>
<td>I don’t think the parents will agree on it or implementing this programme, as not all of them can accept this topic... (TR20)</td>
</tr>
<tr>
<td>Administrative support</td>
<td></td>
<td>No teaching priority</td>
<td>... more focused about the safety of young children... they will slot in about the sexual education indirectly. (TR2)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not viable to business</td>
<td>Maybe from the marketing perspective, they do not want to lose the parents with traditional perspectives... it could be a risk for a preschool to include sexual education... (TR19)</td>
</tr>
<tr>
<td>SE resources</td>
<td></td>
<td>My preschool doesn’t provide such resources. Personally, I will bring this up or touch this topic at my own expense. There is no specific worksheet or information. (TR5)</td>
<td></td>
</tr>
<tr>
<td>Competency as Barrier</td>
<td>Limited exposure, low confidence, and uneasiness</td>
<td>Low confidence</td>
<td>My confidence level on teaching young children on this topic is less. This is because me myself do not have the gut to teach on this sexual education. (TR18)</td>
</tr>
</tbody>
</table>
High reluctance | I felt very reluctant if I were to teach the real names of private part. (T20)

Lack of knowledge | Limited knowledge | I think I have limited knowledge. Sometimes, I don’t know how to talk about it. Also, maybe there are other information that I myself not aware of it. So of course, I have no idea how to explain about it. (TR8)

No proper syllabus | In the curriculum even in... Bachelor time, they are doing the degrees... there is not any proper syllabus on this matter of curriculum. (TR7)

Inadequate training | No training | ... I did not attend to any training, I don’t know the proper way to teach to children. (TR3)

Proper training helps | Yes, if have the proper training I can do well and able to explain to parents the content in sexual education. (TR1)

Personal Beliefs as Barrier

Parental Acceptance

Of the many barriers that the participants perceived they would face when implementing SE, the most acknowledged barrier was parents’ acceptance. They perceived the wide range of acceptance from parents as a barrier, highlighting the sociocultural and demographic diversity of the families who attend their preschools. Younger parents are viewed as more open-minded and more modern in values, and therefore are more accepting of SE.

For those modern families, which parents are in younger age, maybe they will agree. Maybe 50 to 70 per cent. But if among those more reserved families, holding more traditional values, I think only 30 to 40 per cent will agree... At generally, I think young generation parents will have higher chance to accept it. (TR8)
The participants reasoned that traditional and religious parents would think that early exposure to SE might lead to inappropriate sexual activity due to curiosity, as their children are too young for SE

*I don’t think the parents will agree on it or implementing this programme, as not all of them can accept this topic... Yes, this topic is sensitive in our community. But probably the parents will say the children are too young to learn this. They won’t understand. Also, the parents might concern that if children know more on this, they might do something inappropriate due to their curiosity. These are both concern on teachers and parents too.* (TR20)

Participants expressed their wariness in teaching SE at their preschools because of potential misunderstanding from parents. Despite realising the importance of SE for young children, they choose to privately discuss SE matters only when the need arises to prevent children from sharing misleading information at home

*Sometimes children going home explain to parents, some only mention first parts, some only half parts, some only middle parts. When teacher teach maybe parents will misunderstand with the content.* (TR1).

To overcome this barrier, participants felt that parents are responsible in providing SE to their own children at home. They claimed that parents may likely experience shyness and uneasiness should they take on this responsibility, as sexuality remains a sociocultural taboo. Hence, they believed that parental support would be difficult to achieve

*My biggest concerns are just parents, that some of them is not being supportive in teaching their children the sexual education.* (TR18)

Nevertheless, there were participants who opined that there are parents who would favour the provision of SE when they understand the benefits. They cited that parents are constantly protective of their children and would be supportive when they understand the benefits of SE

*Parents are more protective because they would like to protect their children. In a positive way. They should have a supportive attitude. Because looking from a parent’s perspective, parents should be supportive.* (TR16)

**Administrative Support**

Participants had mixed responses regarding administrative support, as the responses also reflected the construction of meaning of others, in this case, their administrators. There was prevalence in participants’ perception that their preschool administrators are unsupportive of centre-based SE, stemmed from the responses of the administrators towards this issue. Preschool administrators were regarded as quite reserved and evasive of the topic, and place little importance on SE, apparent from the non-planning to equip the teachers with knowledge and skill in SE

*The main support is from the top management. As I said before, so far the management has no planning to send the teachers for any training related to this*
topic and I feel, if I haven’t go to any hands-on training, I might not have enough knowledge on that topic. (TR2)

While there were participants who acknowledged support from preschool administrators, they found the content of SE particularly focussed on a certain aspect, such as child safety

They only encourage but do not put much stress... In my preschool, when handling the sexual education... they are not too focussed on sexual education directly, they are more focussed about the safety of young children... they will slot in about the sexual education indirectly. (TR2)

In relation to this, none of the participants readily shared that they incorporate SE into their curriculum. Instead of overtly suggesting to their preschool administrators the formal inclusion of SE, they take on the matter by including SE informally

My preschool does not have subjects that focuses on sexual education, but I took the responsibility personally to educate my students and touch a little bit on sexual education. Such as teaching the private parts of our body, safety, whether strangers should touch you or not, and how to cover yourself after bath. (TR2)

A possibility for the unsupportiveness for formal inclusion of SE into the curriculum from preschool administration could be business related

Maybe from the marketing perspective, they do not want to lose the parents with traditional perspectives... it could be a risk for a preschool to include sexual education. Maybe there are some parents who disagree, and the preschool might lose them because they disagree to include sexual education in the preschool. (TR19)

As the participants share their perceptions, they attempt to view the situation from the perspectives of their administrators who may fear lower enrolment rates due to paucity of SE understanding and exposure among potential parents.

SE Resources
Participants shared the barrier of searching for their own resources when they informally implement SE, further adding to their existing challenging workload

My preschool doesn’t provide such resources. Personally, I will bring this up or touch this topic at my own expense. There is no specific worksheet or information. (TR5)

That is something that challenges me, because we don’t have much resources to deliver it to the kiddos. (TR9)
Competency as Barrier

Limited Exposure, Low Confidence, and Uneasiness

Another major barrier in providing centre-based SE as perceived by participants is their self-competency, attributed by limited exposure to SE and consequently low levels of confidence and courage in delivering formal SE.

> My confidence level on teaching young children on this topic is less. This is because me myself do not have the gut to teach on this sexual education. (TR18)

They were uncertain of information suitable for young children and expressed worry over negative consequences:

> I have no confidence. Because sometimes if children don’t know and if you let them know it can be a problem. They will think, “Erm, there’re such things.” (TR15)

Similar to how they perceived parents’ reactions, participants disclosed that feeling uneasy and embarrassed discourages further discussion on the matter, despite realising its importance. When asked how comfortable they are teaching names of private parts to young children, four participants confessed awkwardness:

> I will feel a bit awkward. I will feel pressured to talk about this. Need to improve myself to feel comfortable. Need to understand and be a bit more open. (TR16)

> I felt very reluctant if I were to teach the real names of private part. (T20)

Lack of Knowledge

Lack of SE knowledge is a major barrier in the implementation of centre-based SE, as participants admitted to their own dearth of knowledge, just as they had highlighted the paucity of SE knowledge and understanding in parents:

> I think I have limited knowledge. Sometimes, I don’t know how to talk about it. Also, maybe there are other information that I myself not aware of it. So of course, I have no idea how to explain about it. (TR8)

They also admitted that SE was not specifically taught during their in undergraduate studies:

> I don't know [whether teachers are equipped]. Because, uh... in the curriculum even in... Bachelor time, they are doing the degrees... there is not any proper syllabus on this matter of curriculum. (TR7)

Concern was raised on appropriate SE content for young children as they claimed that their current knowledge on SE were either from Science lessons during their school days or informally from their own parents and the Internet:

> At secondary and primary school but mostly learn about the organ, at secondary school learn about the human private parts. (TR10)
Fuelled by this understanding, participants opined that SE should be taught in secondary school

    So, for me I don’t really accept this. We should educate them in higher school. When they are teenager, let them know. Not in preschool, no. (TR11)

Such perception was derived from the minority of participants who believe that preschool children are too young to learn about SE, concurring the commonly reported perception of SE being too complicated for young children’s comprehension

    My opinion, it is not very suitable as they are too young. They would not understand what that is. It’s too young for preschool children. Their ability to understand is lower because they are more naïve. (TR16)

**Inadequate Training**

Participants voiced out the feeling of unpreparedness in implementing SE due to the absence of proper SE training. Instead, they are trained on academic skills:

    … I did not attend to any training, I don’t know the proper way to teach to children. (TR3)

    For this sexual education, there is no training at all. If there is a training, the training is just involved main subjects like teaching children how to read, count… (TR19)

When asked about the particular skills that they lacked, more than half of the participants emphasised the skills to address queries from children and parents, methods of delivery, and ideas to ensure age-appropriate and interesting learning experiences

    The real challenge is how to answer questions from children and… parents… how to explain to them. I think this is also a challenge for me to explain it in a proper way. (TR4)

Participants believed the training would alleviate their wariness and increase their confidence in teaching SE

    If I have been given training by the professionals, I would 100 per cent… handle the course of sexual education which also will increase my confidence scale from 4 to 8 to 10. (TR18)

    Yes, if have the proper training I can do well and able to explain to parents the content in sexual education. (TR1)

They regularly stressed their willingness to implement SE if proper training was provided, attaching significance to providing accurate and appropriate SE.
Discussion

Thematic analysis of preschool teachers’ accounts discovered two overarching barriers hindering the implementation of centre-based SE in preschools. The first barrier is personal beliefs on parental acceptance and lack of support from preschool administrators. The second barrier is competency, affected by lack of confidence and ease, and lack of awareness and knowledge due to the absence of proper training.

Preschool Teachers’ Personal Beliefs

The longstanding perception of SE as a sensitive matter in Malaysia has hampered the implementation of PEERS in preschools (Shukor & Supaat, 2018). Although the preschool teachers in this study displayed a generally positive view about SE, the fear of having adverse parental response influenced their willingness to implement SE. Past studies record conflicting parental opinions, including disallowing young children to receive SE due to the perception that earlier exposure to SE could potentially promote sexual experimentation in children (Martin, 2020; UNESCO, 2018)

The perception of preschool teachers in this study of a tug-of-war of acceptance between the older and younger generation of parents is consistent with the findings of (Anastacio et al., 2005; Mutalip and Mohamed, 2012). While both groups of parents are believed to hold distinct values of SE, the older parents were perceived to be conservative and to likely question the needs of SE (Anastacio et al.). Younger parents were perceived to be less opposing of SE and teachers feel that this reflects social and cultural change (Mutalip & Mohamed), suggesting a chronological and interactive change within the chronosystem. Similarly, a Malaysian study highlighted that younger parents of higher education levels tended to be more supportive as compared to their less educated counterparts (Makol-Abdul et al., 2009).

The possibility of parents misinterpreting SE was also perceived as a barrier. This perception increased the tension and anxiety felt among preschool teachers, consequently diminishing their willingness to deliver centre-based SE (Martin et al., 2020). This implies that open communication between teachers and parents is essential in order to achieve successful centre-based SE. To avoid further controversy, preschool teachers would like parents to take the responsibility of educating their own children. There are parents who agree that they should be the first educators of SE to their children (Sham et al., 2020) and there are parents who perceive teachers to be in the best positions to provide SE, as they have the most contact with children outside of their homes and are deemed better equipped as educators (Scholes et al., 2012). There are also preschool teachers who opine that they have to collaborate with parents in playing a key role in providing SE (Martin et al., 2020). The cocreated meaning from the accounts suggests that the exosystem and mesosystem of the adapted model (Wei, 2019) are deemed important layers in the implementation of SE, which then influences the other systems.

Consistent with previous findings, a barrier to implementing SE is the lack of support from administrators (Sham et al., 2020), as shared by the participants that their preschool administrators neglect SE and have no plans to provide sexuality-related training. Their administrators prioritise academic learning, echoing earlier findings that Malaysian preschools are densely focussed on academics as preparation for primary education (Qin & Nor, 2018). Therefore, PEERS is not emphasised and to some extent, not understood due to the brief time of promotion and many other unresolved issues (Eshak & Zain, 2019). However, as all the participants in this study taught in private preschools, their primary source of income
would be fees collected from the parents. This implies that preschool administrators deliberately prioritised academic learning and neglected the sociocultural taboo topic of sexuality to satisfy parental expectations. When viewed through the lens of the adapted model (Wei, 2019), this choice by administrators shows how the social and cultural norms in the macrosystem have a direct impact on the exosystem of the preschool teachers.

Access to sufficient teaching resources is an important factor in the implementation of SE globally, and more commonly identified in school settings (Martin et al., 2020; UNESCO, 2018). The few studies that explored the availability of SE resources in early childhood settings reported differing situations; a Malaysian study found learning materials sufficient and helpful (Eshak & Zain, 2019), whereas an Indonesian study found a scarcity in learning resources (Oktavieingsih & Ayriza, 2018). The participants in this study perceived accessing sufficient SE resources a barrier, as they were not offered any help nor provided any guidelines by their administrators. Instead, they sourced for resources on their own, leading to a fear of disseminating to young children developmentally inappropriate content.

**Preschool Teachers’ Competency**

It is common to feel embarrassed and awkward when discussing sexual-related matters in a multicultural society like Malaysia (Khalaf et al., 2014). The embarrassment and awkwardness stem from a serious misunderstanding of SE, perceiving it as instruction of sexual intercourse and matters related to it (Sham et al., 2020). Oktaviingsih and Ayriza (2018) contend that an indirect result of these feelings is lower levels of confidence when preschool teachers discuss sexuality-related matters with children and parents. Participants in this study expressed similar feelings of awkwardness when teaching children the proper names of private parts, preferring the use of social names instead. This supports previous findings by Talib et al (2012) who found that teachers frequently use metaphors when teaching, thus ineffectively delivering the subject matter to students.

The participants in this study also identified lack of proper training as a barrier to implementing SE at their preschools. This issue has been a recurring concern not only in prior-to-school settings but also school settings. The barrier caused by inadequate training in SE causes a ripple effect, as without proper training, teachers feel incompetent in answering children’s queries (Martin et al., 2020), imparting correct information, applying suitable teaching methods (Ünlüer, 2018), and integrating SE effectively into their existing syllabi (Oktaviingsih & Ayriza, 2018). Nevertheless, the preschool teachers in this study believe that these concerns could be alleviated with proper training, demonstrating their willingness to embrace and adapt to a different way of perceiving SE within the mesosystem, to cocreate meanings of SE according to their changing morality.

Findings of the present study reflect the adapted model (Wei, 2019). Preschool teachers’ SE perceptions are influenced by their microsystems (parents, administrators), exosystems (organisation policies and culture), and macrosystems (educational policies, sociocultural taboo). Also, the interactions between these systems could both affect teachers (e.g., teachers feel either motivated or discouraged), and be affected by teachers (e.g., parents’ change minds due to teachers’ advice). By reference to the adapted model, Malaysian preschool teachers mould their thoughts by absorbing SE information from different microsystem components. However, the current investigation did not discover much about how they contribute to the change of microsystems (e.g., pursuing and promoting SE to parents, attempting SE teaching in the classroom). Instead, their passive attitude in SE may be related to their perceived efficacy in implementin centre-based SE due to the absence
of SE training, and why they tend to passively receive and accept comments and criticism about SE, instead of proactively promote SE in ECE settings.

Conclusion

This study demonstrates that implementation of SE in preschools is more complex than merely integrating it into the NPSC. The experiences embedded in the data unravel unseen challenges faced by preschool teachers in implementing SE, their personal beliefs and competency. Their personal beliefs of acceptance from parents and administrators, and their competency due to lack of confidence and ease, and lack of awareness and knowledge due to the absence of proper training.

This study generates several important implications. First, the findings imply that integrating SE into the NPSC as PEERS is insufficient for effective centre-based implementation. From the ECE perspective, there is a highlighted need for a multi-faceted approach to effectively implement SE. From an ecological point of view, the personal barriers faced by preschool teachers are significant factors to be considered in their training (Wei, 2019).

Second, the design of the suggested practical training may emphasise role-play and open group discussion in helping these preschool teachers to freely share their viewpoints without feeling particularly uncomfortable. Provision of regular training enables the exchange of the most current information and experience to address children’s out-of-context questions. However, addressing personal barriers alone is insufficient. It is equally important to identify motivators for preschool teachers to implement SE in their classrooms. Future research exploring these motivators is crucial to develop a comprehensive and culturally sensitive training programme. This multi-faceted approach will increase the likelihood of successful implementation of centre-based SE in Malaysia.

Third, this study extends the use of Wei’s adapted EST model to explain the formation of barriers to teachers’ professional development in SE area. To highlight, in the social milieu that views early exposure to sexuality information as taboo, the present findings emphasise transforming Malaysian people’s beliefs towards the usefulness of SE on children’s development as crucial. To actualise this, the government’s involvement (influence from macrosystems) to introduce policies to facilitate such changes is necessary for assisting to alter the local policies, and parents’ readiness (change in exosystem and microsystem) in providing and accepting centre-based SE programmes. There are limitations in this study that must be noted. First, the preschool teachers who participated may not be representative of all preschool teachers, as they were from private preschools. Their training and work experiences may differ from preschool teachers in public or international preschools. Second, due to movement restriction, and funding availability, participants were only recruited from one metropolitan city in central Malaysia. This is not representative of other areas in the country. Nevertheless, the accounts shared by the participants in this study provide a rich and informative resource for future study, especially in the Malaysian preschool context.

References


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