

# **XAOSIS**

# Essence of religion, culture and indigenous language in a unified sexuality education system

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Sexuality education is fundamental in higher and tertiary education institutions (HTEIs). Evidence suggests that its effective education is through translations into the first language of learners. However, in global and multilingual cultural communities such as HTEIs, the foundations for these translations are still a researchable area. Notably, in HTEIs adolescents, young adults and adults co-exist and therefore, any translations must be toned to balance across these groups. The aim of this study was to establish strategies that could enable sexuality educators to effectively transfer information that is steeped in indigenous language, religious and cultural meaning without precipitating stigma and taboo issues. The study setting was the National University of Science and Technology where a cross section of indigenous cultures, languages and religions co-existed with other global cultures. A University Community-based Participatory Research (CBPR) methodology was administered by the researchers using a Delphi research approach to students and staff. Multilingual, multilayered, multireligious, and multicultural nature of the setting presented serious challenges that compromised the prevention of stigma and taboo issues when dealing with sexuality education. We recommend that the strategy to present sexuality education in indigenous languages to the generality of HTEIs population should, in the first instance, involve systematic identification of appropriate interventions that are religious, cultural, and language-specific.

**Contribution:** This research reveals paramount ethical and religious violations that have a potential to precipitate opportunistic sexual relationships that may lead to impediments in capacity building for learners. This research can be utilised by academics on the field of Practical Theology, specifically youth ministry and pastoral care.

**Keywords:** adolescence; young adulthood; sexual health; sexuality education; taboo words; youth ministry.

# Introduction

Sexuality education is not a new subject (Huber & Firmin 2014; Musolf 2003). Notably, Huber and Firmin (2014) reviewed an American sexuality education historical perspective and revealed that it progressed from the 'progressive era (1880-1920), intermediate era (1920-1960), the sexual revolution era (1960s and 1970s), and the modern sex education era (1980s to the present)'. Despite the ambivalence towards sexuality education reported by Carter (2001) and echoed by Ellenwood (2006) as cacophony of reports, current evidence suggests that over the years, fundamentals of sexuality education have been improving in line with the dynamics of educational, religious, and public health priorities (Huber & Firmin 2014; Apter, 2011). Sexuality education as we know it today embraces a host of issues that include gender norms, reflections on gender inequality, prevention of unintended pregnancies, prevention of Human Immunodeficiency Virus (HIV), awareness about sexual abuse, prevention of sexism, homophobia, and online bullying (World Health Organization [WHO] 2010). Thus, sexuality education pertains to the teaching of subjects that are mostly but not limited to cognitive, social, interactive (religious), emotional, and physical aspects of sexuality (Huber & Firmin 2014; WHO 2010, 2016). Ideally, this education should thus propel them into safe and fulfilling relationships that enable them to take responsibility for their own and other people's sexual health and well-being (WHO 2010, 2016). Drawing from this notion, an appropriate framework for sexuality education should not encourage people to have

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sex but instead it should equip, capacitate and empower individuals towards a safe and fulfilling passage to adulthood (Wheeler 2000; WHO 2010). This means that sexuality education aims to develop and enhance individuals' ability to make mindful, fulfilling, healthy and respectful choices regarding relationships, sexuality, religious, emotional and physical health. With this wide scope, sexuality education just like other health communications, has a direct effect on building the capacity of learners as well as on the general performance of a country's economy and must therefore be communicated effectively (Carstens, Maes & Gangla-Birir 2006; Rimal & Lapinski 2009; Verma, Mohan & Pandey 2010; Weaver, Smith & Kippax 2005).

Many researchers have reported on effective communication. Rimal and Lapinski (2009) explain that effective communication is achieved when information is given in a format and language that identifies with norms and values of the individuals' cultures and religions in their social communities. Sequels to this notion, many researchers have explored the impact of translating health communication into indigenous languages. Evidence suggests that translating information into the first language of the target indigenous audiences may have a greater positive impact than using imported languages (Anderton, Evans & Chivers 2016; Bilton 2018; Boyte et al. 2014; Cabassa, Molina & Baron 2012; Ndlovu 2013). Today in Africa, for example, there is evidence about the use of euphemism in South Africa (for IsiZulu), in Botswana (for Setswana), in Lesotho (for general Bantu Languages of Southern Africa) and in Kenya (for Swahili), and there remains room for research in the bulk of indigenous languages (Ingrid 2009; 2012; Carstens, et al. 2006; Maseko 2017; Ndlovu 2013; Orang'I 2022). We note from these studies that euphemism and jargon are defined differently such that slang is normally restricted to a particular generation or group; although sometimes it crosses boundaries while restricting itself to a cohort. However, jargon is generally confined to people in a specific profession.

In South Africa, for example, health education to indigenous societies is reportedly using inter alia written health texts; although in this multilingual setup, translations into indigenous languages are reportedly being compromised by the level of literacy in rural remote areas (Ndlovu 2013). Thus, the researcher recommends the exploration of 'simple' language in translations from English to isiZulu. However, it is reported that even then translators faced challenges in identifying strategies for non-lexicalised, problematic, religious and cultural content. Furthermore, evidence on the application side can be drawn from Bilton (2018), Entezari and Javdan (2016) as well as Eagleton (2015). These researchers present educational interventional frameworks for teaching physiology and anatomy using indigenous languages in a HTEI. However, while echoing the findings of Anderton et al. (2016) and to some degree being consistent with the Southern African perspective, the authors accept that significant variances in literacy and cultural constraints present threats to the uniformity of learning. The researchers argue that the gravity of the problem was such that many of these students reportedly either dropped out or repeated the subjects (Entezari & Javdan 2016). To mitigate this problem, Bilton (2018) and Haldre, Part and Ketting (2012) detail mitigation measures which include story sharing, nonverbal, non-linear, youth-friendly services as well as symbols and images (teaching and learning approaches) as ways of enhancing learning.

It is noted, however, that Bilton (2018) is silent on the performance of their proposed mitigation approaches when it comes to sexuality education. Furthermore, Herman & Margaret (2008) consider sex-related matters as comprising private parts, sexual activities, sexual secretions, sexual diseases, and related phenomena. Botswana, South Africa, Lesotho, Zimbabwe, and generally all Southern African countries are multilingual embracing Setswana, IsiZulu, IsiXhosa, Siswati, Sesotho, Sepedi, and iSindebele. These Southern African countries all have domains that demand discourse forms involving high levels of politeness and decency. As an example, in ensuring appropriateness in its discourse, Setswana employs euphemisms to deal with certain taboo words and expressions that are unpleasant, indecent, offensive, and embarrassing (Herman & Margaret, 2008; Batipo & Kopi 2008). The same authors affirm that these euphemisms are well established and commonly used forms that are specific to a community, religion, group or culture.

In the same vein of thought, naturalist systematic studies have long reported that adolescents experience an identity crisis while young adults struggle to establish and build upon intimate relationships. At this stage, these young adults are highly sensitive to isolation. However, adults on the other hand tend to establish lasting relationships. However, the population at HTEIs comprises adolescents, young adults and adults all living together in this real-world environment. It is, therefore, logical to hypothesise that without interventions, adolescent would often be overwhelmed by complex expectations and responsibilities culminating in further deepening into an identity crisis. In this complex global environment, different cultures proliferate together potentially steering new opportunities for different cultures to generate mutually beneficial new expectations as well as taboos. Hypothetically, this leaves today's HTEIs adults continuously challenged by the dynamics of ethics and the everyday. If this logic is acceptable, then this complex landscape would provide fertile ground for opportunistic sexual relationships thereby further challenging efforts to capacitate learners.

It has been suggested that modern research should now focus more on translation challenges associated with the transmission process of health information (Ndlovu 2013; Ndhlovu & Botha 2017; Orang'I 2022). These studies reveal that appropriateness of translations has a great impact on acceptability and appreciation of communicated information in any culture. It is in this same vein that Ndhlovu and Botha (2017) recommend strategies for adoption by Southern African Linguistics and Applied Language Studies as one important intervention approach that can be used to

overcome these challenges. In our study, we draw special lessons from Ndhlovu and Botha (2017) who investigated taboo words in HIV / AIDS texts while attempting to translate from English into Zimbabwean isiNdebele language, and Mabule (2009) who conducted a study on taboos associated with the translation from English into Northern Sotho. We note that in these articles the conclusion was that in one way or other translators often resort to indirectness and euphemisms while translating words and expressions that are unpleasant, indecent, offensive or embarrassing.

Putting it all together, it is logical from the perspective that grounding the teaching in indigenous pedagogy may aid in the capacitation of indigenous students with sexuality education. It would appear that this can only be effective if this shift is preceded by a foundation of holistically transferable and generalisable strategies for use by translators. This effort may present opportunities for enhanced palatability of otherwise unpleasant content in the target populations. Putting Bilton's (2018) proposals into perspective, we argue that while all these approaches appear great; it is worth noting that when it comes to sexuality education, cultural, religious and language constraints play a bigger part. For example, in most cultural setups in Africa or religions, drawing or presenting visuals of a sex organ may be more embarrassing than naming it. Therefore, merging indigenous pedagogy in sexuality education across African indigenous languages is not simple and perhaps that is why it has remained a researchable topic in a long time. Thus, for now the teaching of health subjects especially those involving sexuality, using indigenous pedagogy requires a more careful approach. Sexuality education content is unique and thus requires a significant amount of cognitive effort to integrate between Western world and the indigenous African world. The significance of this logic is that an appropriate strategy would present opportunities to initiate creativity in education and thus boost retention rates for the at-risk students (Bilton 2018).

Therefore, with the aforementioned gap in literature, the aim of this study was to explore a selected culturally globalised Zimbabwean setup in order to establish specific strategies that could enable sexuality educators to effectively transfer information that is steeped in indigenous language, religious and cultural meaning without precipitating stigma and taboo issues. The main objective was to establish foundational strategies for a mutually beneficial sexuality education terminology across this globalised Zimbabwean research setting.

# Research methods and design

The study was conducted through a University Community-based Participatory Research (CBPR) methodology using a Delphi technique (Hsu 2007). Because of coronavirus disease 2019 (COVID-19) protocols, this systematic and interactive forecasting approach to obtain the opinion of the selected community panellist did not bring all participants together for a face-to-face interaction but only participant researchers. The researchers would meet to discuss emerging themes and

then adjourn for routing education in which they would gradually pilot the developing ideas. Challenges would then be reviewed in the meetings. Three cycles of meetings were conducted. The researchers administered this collective inquiry to participant students and staff at the HTEI. In this way, the participants together with the researchers as participants, were able to analyse, inform and establish strategies for effective delivery of sexuality education in HTEIs. The National University of Science and Technology (NUST) in Bulawayo, Zimbabwe, was selected for the study. The setting was chosen because it represented a typical multilingual, multi-religious, multi-cultural, multi-groups, and multiple professionals all thriving together in the same campus. This was considered a close approximation to a global culture. The campus was located proximal to a big gold mine where a high prevalence of HIV/AIDS was hypothesised. This setting was considered appropriate because sexuality education would have a greater positive impact than in any other campus that is spared from these adverse variables. Bulawayo, on the other hand, represented a typical cosmopolitan area with a strong ethnic mixture. The population comprised the entire NUST persons to which the researchers were conveniently connected to during their routing activities at the research site. There were no interventions applied. Initial form fields for the data collection instrument were drawn from literature and refined to match the study setting. Subsequent fields were developed from themes that emerged from cyclic meetings. This final item analysis was conducted to ensure that in drawing up the final list outcomes, the set rules for inclusion and exclusion were consistently applied.

# **Data analysis**

The first line analysis was thematic. Upon reviewing the literature, text submitted by individual researchers in the form fields was all individually thematically reviewed blinded by all four authors of this article using a check-list drawn from literature. All four researchers expertly resolved disagreements on classification. This agreement paved the way for a theory-driven thematic analysis which drew up the final list of mutually beneficial sexuality education content. This list formed the baseline for the questionnaire form fields. This questionnaire paved the way for the Delphi approach that drew up the final list of mutually beneficial euphemisms for the research setting. Texts that fell under individual cultural areas of autonomy were identified and expertly distributed according to the themes. This study was conducted under strict international ethical standards of consenting, anonymity, confidentiality, and beneficence. The researchers securely kept a pass worded master link list for potential data verification. Data collection was only done after ethics approval (approval number NUST/ IRB/2022/91) by the NUST Institutional Research Ethics Review Board (IRRB).

## **Ethical considerations**

The researchers observed ethical conditions given in the approval by the Institutional Research Ethics Board and also

observed International research ethics standards pertaining to, but not limited to, confidentiality, anonymity, beneficence and maleficence.

# Results

The results presented below are in four headings, namely the selection process for the literature, conceptualisation of the multicultural setup model, thematic analysis, and the descriptive statistics.

#### Selection of literature

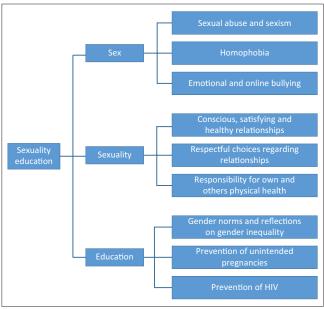
The search identified 50 records, which reduced to 30 peerreviewed articles upon filtration and removal of duplicates. None of the articles were focused specifically on the current research topic particularly in multicultural setup and individual elements were found in isolation.

# Conceptual model for a multicultural setup

There were three main themes identified as forming the basis of sexuality education (Figure 1). These were SEX, SEXUALITY and EDUCATION; and in pursuant of these themes a total of nine subthemes were generated and rationalised (see Tables 1, Table 2 and Box 1 (Carter 2001; Ellenwood 2006; Huber & Firmin 2014; Musolf 2003; Wheeler 2000; WHO 2010, 2016). These sub-themes were all documented in an exponential non-discriminative sampling manner into a sexuality education conceptual model with nine sub-themes (Figure 1).

### Thematic analysis

Of the 30 articles reviewed, 29 (97%) pertain to education, 9 (30%) pertain to health education, 13 (43%) pertain to



Source: Huber & Firmin (2014), WHO (2010, 2016), Ellenwood (2006), Musolf (2003), Carter (2001), Wheeler (2000)

HIV, Human immunodeficiency virus.

FIGURE 1: Sexuality education conceptual model.

sexuality education, and 7 (23%) pertain to language (cultural) modes for communication (e.g., use of euphemisms). All articles discussed optimisation of communication though some without specifically referring to sexuality education in indigenous pedagogy. Pertinent sexuality education pedagogy identified in the reviewed literature and thus followed through using the Delphi approach as applied in different cultures at the research site are presented in an aggregated manner representing fundamental themes for sexuality education (Table 1).

# Delphi output

Languages (cultures) identified at the research site included IsiNdebele, IsiShona, Sesotho, Setswana, IsiTonga, IsiXhosa, as well as a number of international languages. Upon going through three rounds of discussing assessment areas with research participants, the following fundamental needs for sexuality education in indigenous pedagogy emerged. It was observed that individual components of the university community were varyingly sensitive to sexuality education pedagogy that were otherwise conflicted in situations which called for polite and respectful speech. Sexuality education was particularly problematic at varying degrees across languages and varying preference to the use of euphemisms was noted. The physical aspect of sexuality education was particularly problematic in indigenous languages although relatively acceptable in English language.

The use of indigenous languages for the purposes of this study was conveniently delimited to IsiNdebele and IsiShona. Verbatim printed sample sexuality education content used in this study included:

The aids virus proliferates mostly in the blood, semen and vaginal fluids.

Organs associated with the transmission of the AIDS virus are the vagina, the penis and the rectum.

Natural pregnancy involves sexual intercourse, ejaculation inside the vagina and fertilization.

Elements (themes) of sexuality education	Sub-themes	Assessment areas
Sex	Engaging in sex	Sexual abuse
	(Physical aspects of sexuality)	• Sexism
	,,	Homophobia
		Online bullying
		Emotional intelligence
Sexuality	Co-existence in a multicultural setup (Ethics and the everyday: social & interactive)	<ul> <li>Conscious relationship</li> </ul>
		<ul> <li>Healthy relationships</li> </ul>
		<ul> <li>Satisfying relationship</li> </ul>
		<ul> <li>Healthy relationship</li> </ul>
Education	Sexuality education	Gender norms
	(introspection: cognitive)	Reflections on gender inequality
	<i>,</i>	<ul> <li>Prevention of unintended pregnancies</li> </ul>
		Prevention of HIV

HIV. human immunodeficiency virus.

TABLE 2: Summary results for the Delphi technique- expression 1.

Threshold knowledge about the transmission of	Question themes	Strongly agree		Agree		Disagree		Strongly disagree		Result
HIV		n	%	n	%	n	%	n	%	
English: The AIDS virus proliferates mostly in the blood, semen and vaginal fluids.	This English version is acceptable across all learners.	24	71.4	10	29.4	0	-	0	-	C1
English: The AIDS virus proliferates mostly in the blood, semen and vaginal fluids.  IsiNdebele: Igciwane le 'AIDS' liphasalala egazini, ebudodeni lasemhluzini wembumbu.	This translation is verbatim correct across the three languages.	0	-	1	2.9	3	8.8	30	88.2	C2
	This content can be delivered as is in the three indigenous languages.	0	-	0	-	2	6.1	32	94.1	-
	There is some taboo content in at	34	100.0	0	-	0	-	0	-	C2
IsiShona: Hutachiwana we 'AIDS' unopararira mu ropa, huronyo wababa nemuhuronyo wamai	least one indigenous language.									
English: The AIDS virus proliferates mostly in the blood, semen and vaginal fluids.	These expressions in indigenous languages are acceptable across all learner levels.	0	-	0	-	0	-	34	100.0	C3
IsiNdebele: Igciwane le 'AIDS' liphasalala egazini, emhluzini wesitho sikababa, lasemhluzini wesithosikamama.	These expressions are verbatim across the three languages.	0	-	0	-	2	6.1	32	94.1	C3
<b>IsiShona:</b> Hutachiwana we 'AIDS' unopararira mu ropa, mu hurume wababa, nemunvura dzesikarudzi yamai										

AIDS, acquired immune deficiency syndrome.

BOX 1: Coding of Delphi approach results.

Consensus – 1st Round (C1)	
Consensus – 2nd Round (C2)	
Consensus (CO) greater that 85%	
High agreement (HA) 77% – 84.99%	
No Consensus (NC)	

Source: Hsu, Chia-Chien, Sandford. & Brian A., 2007, 'The Delphi Technique: Making Sense of Consensus', Practical Assessment, Research, and Evaluation, viewed June 2023, from https://scholarworks.umass.edu/cgi/viewcontent.cgi?article=1177&context=pare

Expressions by learners associated with the presentation of this sexuality education content informed the researchers on the acceptability of the content. These reactions exposed the centrality of taboos in sexuality education. Box 1 illustrates the coding process for the results. These are coded for ease of identification.

A summary of results is outlined in Table 2 and Table 3 in which two survey questions are represented alongside responses, percentages obtained, and whether the question achieved consensus and at what level.

Generally, there was no consistency among the three languages on verbatim translations of the education content into indigenous languages. However, it was clear that when teaching in indigenous languages, taboos tend to limit what can be taught, how it can be taught, and to whom it can be taught.

Problems were mostly but not limited to communication that deeply touched on sexual reproductive organs, sexual penetration, masturbation, ejaculation, sexual play, semen, and homophobia. These terms, although being core to the area of assessment, were not openly addressable using indigenous languages despite them being central in human sexuality. In selected cases, euphemisms that provided an indirect communication pathway to terms deeply associated with this sexual phenomenon were identified. It also emerged that not all of these euphemisms were recognised across the studied multicultural social community. Attempts to cross pollinate cultural components into general euphemisms

were not generally successful as some of the identified euphemisms were generation, religion and culturally specific. However, it was noted that mutual interactions improved trust and openness on sexual matters and sometimes the use of specific English words. It was also observed that most of the sexuality education vocabulary identified in this study was drawn from the younger generations than in older generations.

# Discussion

With respect to the intrinsic bilateral relationship between language and culture, key findings of this study were consistent with previous studies in that it exposed the marriage between language and culture particularly in the appropriateness of translations. However, the proposal that biculturalism (Orang'I 2022) is evidence of the ability to translate conversantly with the cultures of the language pair did not seem to hold firmly in our study at HTEIs setup. In HTEIs, the setup is multi-cultural and therefore the translator must have the ability to translate conversantly with all cultures of the target languages that are in the same grouping or class. This is a very difficult task to achieve (Kett 2002). Noting that in our research setting English was the official communication language and logically selecting one language at a time to pair with English and then finding common ground for mutually acceptable translations was a plus. However, our findings are in synchrony with one set of key competencies of a translator that are listed by Orang'i (2022) in which the translator must appreciate the target society's "history, folklore, traditions, customs, values, prohibitions, the natural environment and its importance, neighbouring people, important people in the society, etc." The responses by participants that are displayed on Table 4 are testimony to the assertion by Orang'i. This is fundamental because, otherwise a translator would be in conflict with fundamental tenets of the receiving culture thereby precipitating unintended behaviors or stereotyping the group (Table 4). The end result being that the translated

TABLE 3: Summary results for the Delphi technique: Expression 2.

Threshold knowledge about the transmission of HIV	Question theme	Strongly Agree		Agree		Disagree		Strongly disagree		Result
	_	n	%	n	%	n	%	n	%	_
English: Organs associated with the transmission of the AIDS virus are the vagina, the penis and the rectum.	This English version is acceptable across all learners.	24	71.4	10	29.4	0	-	0	-	C1
English: Organs associated with the transmission of the AIDS virus are the vagina, the penis and the rectum.  IsiNdebele: Izitho eziphathelane lokuphasalala kwegciwane le 'AIDS' yimbumbu, ubolo lomntshaza  IsiShona: Nengo dzinechekuita nekupararira kwehutachiwana we 'AIDS' dzinosanganisira beche, mboro ne mhata.	This translation is verbatim correct across the three languages.	0	-	0	-	4	11.8	30	88.2	C2
	This content can be delivered as is in the three indigenous languages.	0	-	0	-	4	11.8	30	88.2	C2
	There is some taboo content in at least one indigenous language.	34	100.0	0	-	0	-	0	-	C2
	These expressions in indigenous languages are acceptable across all learner levels.	0	-	0	-	0	-	34	100.0	C2
English: Organs associated with the transmission of the AIDS virus are the vagina, the penis and the rectum IsiNdebele: Izitho eziphathelane lokuphasalala kwegciwane le 'AIDS' yisitho sikamama, isitho sikababa lesithosokuya ngaphandle	These expressions are acceptable in all three languages across all learner levels.	26	76.5	6	17.6	2	6.0	0	-	C3
	These expressions are verbatim across the three languages.	0	-	0	-	8	23.5	26	76.5	C3
IsiShona: Nengo dzinechekuita nekupararira kwehutachiwana we 'AIDS' dzinosanganisira sikarudzi yamai, sikarudzi yababa ne nengo inobudisa tsvina										

AIDS, acquired immune deficiency syndrome.

Some percentages not summing to 100% due to rounding to one decimal place

TABLE 4: Sample responses from learners

Quotation	Level of education	Sex of the learner	Home language
'I find it disrespectful and unreligious for me to name sexual organs by their real Isindebele names, especially when talking to an adult – my lecturer. It is improper'.	Part 4	Female	Isindebele
'If the lecturer initiates such direct words to me, I find myself trying to read her mind especially when she picks me to answer the question hahaha'	Part 2	Male	IsiShona
'I cannot stand such content when delivered in indigenous languages. It is unreligious and embarrassing. Let us use respectful indigenous text in all our lectures. Otherwise let us stick to English language'	Part 1	Female	IsiTonga & IsiNdebele

sexuality education content would further precipitate the problem than solve it.

With a paucity of prerequisite information on the appropriate framework for the integration of indigenous languages in sexuality education, we argue that in research settings that are similar to ours, ad hoc sexuality education interventions have a great potential to precipitate the integral problem. This is logical because generally it is accepted that culture shapes translations in such a way that hurdles associated with constraints emanating from target culture norms and expectations can be avoided. Accordingly, this article exposes mutually beneficial and mutually acceptable communication of taboo words in a Zimbabwean multicultural setup that mimics a globalised village. We noticed that the translation task gets more and more challenging as text goes dipper and dipper into health care and more specifically sexuality education. Therefore, this article comes at an opportune time when the WHO has declared 2022 as the year of indigenous languages. In this regard, one cannot ignore the fact that many countries outside Africa, for example, are now offering

drivers' licences in indigenous languages. That being said, adding into the body of knowledge evidence on sexuality education in indigenous languages justified this study as filling a knowledge gap in the existing body of knowledge (Mazrui 2016).

# Conclusion

Like all other societies all over the world, the multiculturalmultilingual-speaking community at the research site had certain individual language modes in their use of the individual languages. We conclude that a holistic and comprehensive research on euphemisms in multilingual setups still needs further clarity. In this study, it is clear that most of the vocabulary was drawn from the younger generations and is enough evidence to hypothesise that this group of participants was relatively more sexually active and therefore, more vulnerable in this society. Sexuality education is of greater value in this group. We also conclude that language (culture), age group, religion, and even geography of origin disintegrated the observed communication modes. In this regard, we struggled to merge indigenous pedagogy with sexuality education that was previously only available in English in HIETs. After exhausting a significant amount of cognitive effort in an attempt to converge these two worlds, we emerged consistent with Bilton (2018), that these content areas are very different and they require an extended schedule. However, our effort enhanced our deep-rooted appreciation of previously established evidence that the value of students' cultural and religious morals in education has a great impact in cognitive and effective engagement with sexuality education content. We emerged with more appreciation that words have the power to heal, harm, encourage, discourage or even seed hate (Jones 2011; Ingham

2005). In this regard, we recommend that further research should focus on cultural co-existence as a vehicle for borrowing of terms, meaning extension, compounding and derivation of new terms that befit sexuality education using indigenous pedagogy.

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# **Competing interests**

The authors declare that they have no financial or personal relationships that may have inappropriately influenced them in writing this article.

### **Authors' contributions**

The four authors worked solidly together during this research. L.S. brought the research topic to the table, lead the ethical conduct of the research and lead the writing of research paper while also coordinating the entire research process. T.V.C. and F.C. contributed in data collection, drafting of the methodology and the introduction sections respectively. All four authors worked together in proof reading the paper, data capturing and data analysis. T.L.S. was the pillar of strength in respect of modern computer packages and provision of the student flavor to the research.

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### Data availability

Data for this study are available for any future verification or extension of the study from the corresponding author (L.S.) and are currently secured by the researchers.

#### Disclaimer

The views presented in this publication are those of the authors, and do not necessarily portray the views of UNESCO as well as the O<sup>3 PLUS</sup> Project.

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