

Evaluation of a Sexuality and Relationships Education Program Taught in a Year 8 South Australian Classroom

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Authorship of Teaching Dissertation Declaration

I certify that this work contains no material which has been accepted for the award of any other degree or diploma in my name, in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. In addition, I certify that no part of this work will, in the future, be used in a submission in my name, for any other degree or diploma in any university or other tertiary institution without prior approval of the University of Adelaide and where applicable, any partner institution responsible for the joint-award of this degree.

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Abstract

Sexuality and relationships education have changed dramatically over the past few decades. A renewed emphasis on curriculum developers to embed sexuality and relationships education with a holistic human rights-based approach is of increasing importance. This involves developing skills to empower students to make informed decisions and navigate safe and fulfilling relationships. While there are governing documents to guide curriculum developers to develop such a curriculum, often these guidance's are ambiguous in nature and lack robust instruction. Additionally, the problem so often in education is that there are no obligations for curriculum developers to evaluate or monitor the quality of their programs. Therefore, exactly how does SRE encompass a holistic human-rights based to sexuality and relationships education and empower young people to live healthier lives? The purpose of this research is to develop a response to such an inquiry.

An evaluation will be conducted on a Sexuality and Relationships Education Program which was provided by the program facilitator. This research employs the theoretical methodology of an intrinsic case study approach to conduct this evaluation. An essential process of this research was the development of a conceptual framework. This framework incorporates evaluating the input, context, process, and product factors of the program and the chosen guiding documents. The development of this evaluation provided strengths and limitations of the Sexuality and Relationships Education Program that cultivate the concepts addressed in the program.

Recommendations for the Sexuality and Relationships Education Program are provided to assist the program facilitator, and other curriculum developers, to implement effective programs that empower young people. Additionally, this research aids to instill the importance of conducting program evaluations as a critical aspect to any curriculum implementation. Conducting this research has led to program recommendations and suggestions and revealed alternative directions for research on strategies to address key concepts of sexuality and relationships in schools concerning key concepts, including pornography and consent, which many teachers are often too hesitant to address in the classroom.

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Abbreviations

AC	Australian Curriculum
ACARA	Australian Curriculum, Assessment and Reporting Authority
ACHPE	Australian Curriculum: Health and Physical Education
AIDS	Acquired immunodeficiency syndrome
CIPP	Context, input, process, and product
HIV	Human immunodeficiency virus
HPE: Focus areas	Health and Physical Education: Focus areas
KSCPC	Keeping Safe: Child Protection Curriculum
SRE	Sexuality and relationships education
STIs	Sexually transmitted infections
USA	United States of America
UNESCO	United Nations Educational, Scientific and Cultural Organization

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Chapter 1

Introduction

Background of the Research

Young people who do not have an education that provides them with the opportunity to develop healthy relationships are at increased risks of experiencing sexual abuse, sexually transmitted diseases (STIs), and unwanted pregnancies (Burns & Hendriks, 2018; Cook & Wynn, 2020; Gilbert, 2018; Joy, 2018; Kirby, 2008; Thomas & Aggleton, 2016). These risk factors not only impact on the health and well-being of the individual but may also compromise their safety and behaviour within sexual and romantic relationships. As Carver (2015) remarks, “too often, I watched myself or my peers engage in unhealthy and unsatisfying relationships. And engaging in these types of relationships can lead to way more than the typical onslaught of teenage emotions.” It is therefore essential that young people have access to a sexuality and relationships education (SRE) that provides them with knowledge and skillsets that allows them to identify and respond to unhealthy and emotionally damaging relationships. Moreover, young people require this SRE education to navigate the emotional and physical developmental changes they experience, particularly in secondary school and regarding their gender, cultural and sexual identities (ACHPE, 2016a). Providing students with access to SRE that is centered on providing knowledge and the development of skills is essential to empower young people to make informed decisions and navigate safe and fulfilling relationships.

Academic debate continues to span the Internet with need for SRE to address concepts to empower young people to engage in healthy and fulfilling relationships. This includes navigating stereotyped norms in the media by evaluating the portrayal of gender positioning. Governing documents and policies exist to provide program developers with direction to educated students with a comprehensive SRE, yet these guidance’s are ambiguous in nature. Additionally, there are no obligations for curriculum developers to assess and evaluate what specifically they are teaching. This is alarming concerning the important of SRE providing young people with the skills to make informed decisions for better health choices. To address this issue, this research will focus on evaluating a sexuality and relationships education program, which will hereafter be referred to as the *SRE Program*.

Purpose of the Research

The *SRE Program* was provided by the program facilitator to the researcher for the purpose of conducting a program evaluation. A program evaluation implies determining the worth or utility of a program for the purpose of improving a specified aspect of an educational system (Worthen, Sanders, & Fitzpatrick, 1997). This research is conducted with a formative purpose which effectively aims to determine the *SRE Program* for merit and to provide recommendations for improvements (Worthen

et al., 1997). To reach this goal, this research will focus on evaluating the *SRE Program* in terms of the program's aims, approach and learning concepts addressed. This will be achieved by comparing the *SRE Program* to international and national guidelines which will reveal similarities and differences in the aims, approaches and learning concepts addresses in each document. In doing so, this will highlight strengths and limitations of the *SRE Program*.

A secondary purpose of this research is to examine whether the *SRE Program* challenged cultural norms that are associated with sexual and gender inequalities in society. The term 'cultural norms' is used to describe the shared values and expectations that influence people's attitudes and behaviours within a particular group of people. To determine this, this research will present literature highlighting gender and sexual inequalities within the Australian context.

Research Questions

This research was led by the following research questions:

- 1) Does the *SRE Program* meet the standards of the international and national curriculum guidelines?
- 2) Does the *SRE Program* challenge cultural norms that are associated with sexual and gender inequalities?

Significance of the Research

By conducting this evaluation, this research aims to provide recommendations that will benefit the *SRE Program* facilitator. Additionally, this will benefit outside stakeholders by providing an evaluation tool that focuses on empowering students to manage relationships and make informed decisions for better health choices. This research contributes to the body of knowledge on program evaluations, enhancing awareness about the importance of SRE and the need for program evaluations.

Organisation of Dissertation

To develop a response to the research questions, the following chapter outlines the development of SRE and presents the most prominent discourses of SRE in contemporary society found in literature. A qualitative research methodology was used in this research to guide the evaluation of the *SRE Program* and due to the nature of this research, an intrinsic case study approach was adopted. Aligning to this theoretical framework, data was selected and then evaluated to the *SRE Program* and the key findings from this evaluation are elaborated in the discussions chapter. The final chapter provides recommendations for the *SRE Program* and on further research, and then concludes by providing the main statements from this research.

Chapter 2

Review of Literature

Introduction

Published research, including peer review articles, published books and government documents, have been summarised, synthesised, analysed and evaluated to develop an awareness of SRE. The chapter begins by exploring the history of SRE in the worldwide context and briefly outlines the benefits to comprehensive SRE. Controversial concepts of curriculum that repeatedly surface in literature of peer reviewed articles are presented; such concepts include issues and challenges associated with contemporary SRE on affirmative consent, pornography, traditional gender and sexual norms, and implementing a cultural shift. The last controversial concept explores teaching SRE beyond a heteronormative approach and specifically focuses on Australian policies. Prior to literature concerning SRE program evaluations, this chapter explores the implementation of SRE in the Australian Curriculum and in South Australia.

History of SRE in Schools

Traditional sex education “is often perceived as having a limited focus on the biology of the reproductive system and contraception, and also [concentrates] on the negative outcomes of sexual behaviour” (Sexual Health and Family Planning Australia, 2012, p. 1). It was generally presented from an abstinence approach which exclusively encouraged sexual abstinence by censoring students’ sexual discussions and activities (Ezer, Jones, Fisher, & Power, 2019). Researchers Goodson, Suther, Pruitt, and Wilson (2003) argue that an abstinence only approach to SRE assumes young people do not engage in sexual intercourse until marriage. In a study of young Australian adults, Cook and Wynn (2020) found those who reported receiving an abstinence-focused SRE most likely attended a private religious school. Thomas and Aggleton (2016) claim that “such programs teach and encourage young people to remain abstinent from sexual activity until after marriage as the only method to reduce their risks of [sexually transmitted diseases] (STIs), [human immunodeficiency virus] (HIV) and unintended pregnancy, and they provide little or no information about contraception or safer sex practices” (p. 16). Despite this approach encouraging sexual abstinence, a systematic study from a synthesis of studies found that abstinence approaches to SRE were “ineffective for preventing or decreasing sexual activity among most participants” (Underhill, Montgomery, & Operario, 2007, p. 8). This coincides with the findings of Pound et al. (2017) who report that most young people dislike an abstinence approach as they find it unrealistic and unrelatable.

In 2009, the United Nations Educational, Scientific and Cultural Organization (UNESCO) published an *International technical guidance on sexuality education* in response to the “clear and

insistent need for school-based puberty/sexuality education in many countries around the world” (Goldman, 2012, p. 200). Contrary to the abstinence approach, UNESCO (2009) reinforce SRE to be comprehensive, calling for an evidence informed and rights-based approach. Comprehensive SRE recognise that many young people become sexually active during their teenage years and therefore advocate for SRE to teach about STI and HIV prevention and contraception methods (Kirby, 2008). Additionally, UNESCO (2009) emphasise the need for SRE to discuss sexual and relationship experiences. UNESCO (2018) summarise a comprehensive approach to SRE concisely:

Comprehensive sexuality education is a curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives. (p. 16)

Comprehensive SRE is cemented in a human rights-based approach (UNESCO, 2018), however researchers Lee, Park, Je, and Ju (2018) are concerned that limiting SRE to sexual knowledge and attitudes, and consequently withholding puberty from SRE, is a flaw.

Over the past decade, the field of SRE has evolved rapidly (UNESCO, 2018). From an analysis of related literature it is evident that the primary focus of SRE in schools is to increase coherence about best sexual practices and sexual issues specifically aimed at limiting unprotected sex, unwanted pregnancy and sexual abuse (Burns & Hendriks, 2018; Cook & Wynn, 2020; Gilbert, 2018; Joy, 2018; Thomas & Aggleton, 2016); this aligns with a sex-positive approach to SRE which Pound et al. (2017) describe as being “open, frank and positive about sex” (p. 5). In response to embrace the newly bold and transformative development agenda of the global community, UNESCO (2018) published the revised edition of the *International technical guidance on sexuality education: an evidence-informed approach* (hereafter the *Guidance*). The *Guidance* is essentially a framework, intended to support curriculum educators to provide good quality SRE based on international best practices (UNESCO, 2018). To align to the transformative development of SRE, the *Guidance* provides a framework with an increase recognition of gender perspectives and social context in health promotion; advocacy to reducing vulnerability to poor sexual health outcomes; and an increase focus on the influence of Internet and social media (UNESCO, 2018).

Comprehensive SRE is linked to better sexual health outcomes (Thomas & Aggleton, 2016). Bourke, Boduszek, Kelleher, McBride, and Morgan (2014), in study involving a survey of 3,002 Irish people, both male and female, aged 18 to 45 years, found that those who received comprehensive SRE were more likely to have their first sexual encounter at an older age, and use contraception, compared to those who did not receive a similar education. According to UNESCO’s 2016 evidence review, based on results from 22 rigorous systematic reviews and 77 randomized controlled trials on the outcomes

of sexuality education, found that comprehensive curriculum based delivered SRE lead to better sexual health outcomes. These outcomes are outlined by UNESCO (2018) as cited below:

- Delayed initiation of sexual intercourse;
- Decreased frequency of sexual intercourse;
- Decreased number of sexual partners;
- Reduced risk taking;
- Increased use of condoms; [and]
- Increased use of contraception. (p. 28)

Issues and Challenges Associated with Contemporary SRE

Affirmative Consent

Across the world, sexual consent is at the centre of debates in SRE (Gilbert, 2018). The #MeToo movement, aimed at helping survivors of sexual harassment, has led to discourses on sexual assault and consent around the world (Bhattacharyya, 2018). This movement, that initially surfaced in 2006, only really sparked the forefront of public consciousness in 2017 (Bhattacharyya, 2018). Richmond and Peterson (2020) argues that developing a “greater understanding of how sexual consent is learned may be important in informing interventions to decrease sexual assault and ensure pleasurable sexual experiences” (p. 1). This is increasingly important as failing to recognise the importance, of obtaining consent that is clear and unambiguous, increases the risk of sexual assault and violence (Richmond & Peterson, 2020).

An increase in discussions regarding affirmative consent standards should decrease miscommunication that may lead to sexual assault however, researchers Jozkowski, Marcantonio, and Hunt (2017) argue that, often consent standards are influenced by socioeconomic factors. Researchers Richmond and Peterson (2020) argue that sexual consent behaviours are predicted by sexual consent attitudes and intentions. In an inductive analytic approach seeking to understand sexual consent claims by university students in the United States of America (USA), Jozkowski et al. (2017) found two overarching themes emerge: (1) males viewed obtaining sex as a conquest, and (2) students perceived a sexual double standard. Although the study has its limitations of a small data selection (30 participants, aged over 18, 57% female), these findings are observed in other studies; Cook and Wynn (2020) conducted a qualitative study and found evidence that “issues of consent and wellbeing were already prominent in the minds of young people” (p. 12); Gilbert (2018) argues that the pressure of turning no into a yes is becoming part of the social courtship. This emphasises the need for SRE to extend beyond the risk of sexual diseases to include discussion on consent (Gilbert, 2018).

Gilbert (2018) argues that teaching affirmative consent has consequently enriched gendered notions of sexual activity. These gendered notions of sexuality, which is referred to as a social harm, include the ideology that young males ask for consent and then young females either give or withhold

their yes (Gilbert, 2018); strengthening Jozkowski et al. (2017) findings of sexual double standards. Additionally researchers Cook and Wynn (2020) conducted a qualitative study, interviewing 28 Australian participants (aged 18 to 29), and found one participant explicitly highlight the nature saying no to sex being the woman's right and responsibility. Their comment reflects the culturally shaped prerogative on females specifically:

It's a good thing that this is really enforced into women, that you have every right to say no, whereas men aren't really given that opportunity to say no. So, I find that it is the onus on the woman where she will say 'it's got to happen, you've got to provide a condom or use a condom that I've got.' (p. 9)

In a controversial article, Fleming (2017) comments on the nature of males being unfairly accused of rape. The English professor bases this on the accusation of the broad definition of sexual assault and continues to remark:

Sometimes, men are positively expected to come on to women: most clearly so in the case of the unattached young at a meat market like a dance club. Or a fraternity party. So, does a woman attending a fraternity party mean she agrees to be raped? Of course not. Rape is a crime. But it does show greater availability and tacit interest than going out to dinner with her family. You still have to ask, but the asking itself is not illegitimate. Situations send signals, as does clothing, as does deportment. If the signals are right, it's legitimate to try. (p. 40)

This provoking comment by Fleming highlights the argument that a cultural shift is needed around communications regarding consent standards to ensure that students can identify the difference between consensual and non-consensual sex (Jozkowski et al., 2017). Cultural shift, or cultural change, here is referred to the changing of negative attitudes and behaviours of cultural norms embedded in young people (McCall et al., 2020). Addressing cultural norms, such as the prevalence of asking and receiving consent, by reinforcing a cultural shift could aid to decrease sexual violence and harassment among young people (McCall et al., 2020). Globally, SRE should therefore address the language of affirmative consent to shift the burden of females saying no to reinforce that both partners are to ask and receive a yes before having any kind of sex (Gilbert, 2018).

When affirmative consent is sought and established, and positive attitudes towards consent are held, Richmond and Peterson (2020) argue this can reduce sexual assault and promote enjoyable sex. Incorporating affirmative consent in SRE requires a focus on sexual consent attitudes and behaviours (Jozkowski et al., 2017). This includes navigating sexual communications relating specifically to "how an individual communicates sexual (non)consent to a partner and how an individual interprets and responds to their partner's (non)consent" (Richmond & Peterson, 2020, p. 4). Willis, Jozkowski, and Read (2019) recommend teaching consent before students become sexually active; the *Guidance* recommends consent to be taught to individuals from 12 years old (UNESCO, 2018).

Pornography

Pornography continues to raise concerns as many researchers argue it is a significant source of sexual education for many young people (Harkness, Mullan, & Blaszczynski, 2015; Lim, Agius, Carrotte, Vella, & Hellard, 2017; Rothman & Adhia, 2016). A cross-sectional study conducted by Rothman and Adhia (2016), involving 79 participants aged 16 to 17 years old (53% female), found that young people use pornography, more than parents and schools, as their primary source of education about sex related inquiries. The study also reported that 44% of the participants “had been asked to do something sexual that a partner saw in pornography” (Rothman & Adhia, 2016, p. 1). This reflects young people’s often permissive attitudes towards sex (Riddle & Simone, 2013; Tolbert & Drogos, 2019). Although participants of this study were classified as “U.S.-based, urban-residing, economically disadvantaged, primarily Black and Hispanic youth” (Rothman & Adhia, 2016, p. 1), thus reflecting a minority population, the findings suggest that young people use pornography as a form of sex education.

Similar behaviours are evident in Australia. According to the 2018 National Survey of Secondary Students and Sexual Health, the majority of students (78.7%) had used, at least once in their lives, the Internet as a source of sexual health information (Fisher et al., 2019). One participant mentioned pornography as an alternative source of seeking sexual information commenting on the inadequacy of their SRE; “I was left with still so many questions. I had to watch porn to understand what exactly sex was” (Fisher et al., 2019, p. 82). While, researcher Ollis (2016) argues that for some young people, pornography can provide an importance source of information where little else exists, Lim et al. (2017) expresses concern with young people accessing pornography as a source for information. This is because pornography often depicts behaviours that are not perceived as mainstream to many adults which can lead to the normalization of activities which are high risk in terms of sexual health (Lim et al., 2017).

Many researchers argue that pornography is one such media platform that continues to negatively influence young people’s attitudes, beliefs and expectations of sex and relationships (Lim et al., 2017; Riddle & Simone, 2013; Tolbert & Drogos, 2019; van Oosten, Peter, & Vandenbosch, 2017). In a study conducted by Willis, Canan, Jozkowski, and Bridges (2020), 50 20-minute segments within scenes in pornographic films were systematically analysed to determine whether pornography depicts sexual consent communication. The data suggests that pornography can directly or indirectly support sexual scripts that include “explicit verbal consent isn’t natural, women are indirect/men are direct, sex can happen without ongoing communication, lower-order behaviors don’t need explicit consent, and people receiving sexual behaviors can consent by doing nothing” (Willis et al., 2020, p. 52). Additionally, the data suggests that pornography provides patterns of sexual consent communication (Willis et al., 2020). This is concerning since many young people believe that they “do not think they learn about sexual consent when they watch pornography” (Willis et al., 2020, p. 62). As young people are seemingly turning to pornography for sexual education, it seems necessary that SRE address the implications associated to consent communication with pornography (Lim et al., 2017).

From an analysis of literature, it was evident there is a growing consensus for pornography to be addressed in SRE to diminish the social harms affecting young people (Goldstein, 2020; Litsou, Byron, McKee, & Ingham, 2020; Riddle & Simone, 2013; Tolbert & Drogos, 2019). Researcher Ollis (2016) argues for the inclusion of teaching pornography in SRE stating that “If SRE is not going to provide accurate information that enables young people to see and explore what equitable, inclusive, consensual, pleasurable sex looks like then where do they get it?” (p. 52). Her argument is supported by researchers Willis et al. (2020) who argue that SRE could benefit from addressing pornography by teaching about pornographic literacy. This is particularly important for middle and secondary school years considering evidence indicates that over half of Australian teenagers are viewing pornography before their first sexual encounter (Lim et al., 2017) with many young Australians being exposed to pornography by the age of 16 (Davis, Carrotte, Hellard, Temple-Smith, & Lim, 2017).

Ollis (2016) stresses that examining pornography in SRE is not without criticism. “Resistance from religious organisations, parent and other pressure groups continues due to fears about exposing young children to sexualised imagery and the ‘promotion’ of pornography in classrooms” (Sundaram & Sauntson, 2016, p. 4). A study conducted by van Oosten et al. (2017) found evidence to suggest that watching pornography increases the likelihood for adolescences to engage in sexual activity which has been supported by previous findings; suggesting that the more young people watch sexually explicit Internet material, the more willing they are to engage in casual sex (van Oosten et al., 2017). While criticism exists regarding examining pornography in SRE, it seems vital that pornography and other explicit Internet materials are critically addressed in SRE. Consequently, SRE can aid to effectively diminish the negative attitudes and behaviours that arise from watching pornography.

Traditional Gender and Sexual Norms

While SRE generally focuses on health and wellbeing outcomes, the *Guidance* emphasises the need to target wider outcomes, including those related to gender equitable attitudes; calling for an increase in gender equitable norms (UNESCO, 2018). Currently, norms associated to sexual behaviours are governed by gendered double standards that are embedded in culture (Szirom, 2017). Double standards of sexual behaviour imply male readiness for sex and support males as sexual initiators and sexually dominant (Ford, 2018; Jozkowski et al., 2017), whereas females are generally perceived as having little sexual desire and are seen as innocent protectors or gatekeepers of their virginity (Cook & Wynn, 2020; Trudell, 2017). These double standards are consistently reinforced in society, particularly in the media and the Internet as they become highly sexualized environments (Peter & Valkenburg, 2006). Szirom (2017) argues that SRE needs to disrupt the double standards of sexual behaviours associated to males and females.

Double standards associated to males and females is also prominent by the terminology associated to genders (Jozkowski et al., 2017; Szirom, 2017). Jozkowski et al. (2017) remarks, that quite often females are labelled a “slut” (p. 237) for appearing too sexually assertive or otherwise called a “cock tease” (p. 237) for not engaging in sexual behaviours or expressing sexuality. Such negative terminology however is not generally assigned to males, rather they are more likely to receive active

support including praise and encouragement from peers (Jozkowski et al., 2017). Meenagh (2020) argues that these associated discourses continue to be reproduced by social interaction, highlighting the need for SRE to disrupt the disrupt traditional gender norms that are governed by cultural norms.

Meenagh (2020) remarks that males often do not receive the opportunity to learn how to navigate their own sexual boundaries, arguing that heterosexual men's sexual refusals are spare. This is turn allows females to "police the boundaries of appropriate masculinity" (Meenagh, 2020, p. 14) as often females are not taught to listen to male's sexual refusals. Meenagh (2020) argues for SRE to construct more ethical sexual subject positions:

These programs seek to prevent violence against women by instilling in young people an understanding of gendered power dynamics and behavioral tools for promoting gender equity within their relationships; however, they do not yet go far enough in disrupting traditional gender norms. (p. 14)

This highlights the need for SRE to not only reinforce affirmative consent communication but to challenge and disrupt the "dominant discursive claim that [males] constantly desire sex and sexual attention, including the traditional gendered norms that are associated with it" (Meenagh, 2020, p. 15).

Double standards associated to males and females continue to reinforce hegemonic masculinity which have poor health consequences for males (Meenagh, 2020). Researchers Haavik, Joa, Hatloy, Stain, and Langeveld (2017) found that males are often less likely, than females, to seek help for mental health problems. This is due to the gender ideologies carrying the associated belief of hegemonic masculinity (Ellis, 2018). Hegemonic masculinity is based on the practice that enforces men's collective dominance and exploitation towards women (Connell & Messerschmidt, 2005; Craig, 1992). Reinforced by decades of stereotyping, masculinity continues to carry the perception of men as strong and assertive (Broverman, Vogel, Broverman, Clarkson, & Rosenkrantz, 1972). Reinforced stigmas around masculinity has led to researchers finding that often heterosexual males will engage in unwanted sex for many reasons; "the idea of putting their own lack of interest first was inconceivable" (Meenagh, 2020, p. 5); accepting all opportunities for sexual activity is considered the widely accepted way to perform masculinity (Ford, 2018); or the fact that males could be conceived as weak, cowardly, feminine, or gay for not engaging in sex (Ford, 2018; Meenagh, 2020). This reinforces the need for SRE to address the impact of gender roles and gender stereotypes in relationships (UNESCO, 2018)

Implementing a Cultural Shift: The Whole-School Approach

To effectively disrupt negative cultural norms associated to gender and sexuality, SRE needs to actively implement a cultural shift. As mentioned previously, a cultural shift involves a change in the negative attitudes and behaviours of cultural norms that are embedded in young people (McCall et al., 2020). Implementing a whole-school approach to SRE implies support from school administration, parents and the community, among the school staff and health nurses (Burns & Hendriks, 2018). When

a whole-school approach SRE is implemented, researchers Robinson, Smith, and Davies (2017) and (Thomas & Aggleton, 2016) argue that promoting gender equality and respectful relationships is most effective. The *Guidance* reinforces this stating that “school-based sexuality education should be a part of a holistic strategy... encompassing multiple settings, including schools, the community, health services and households/families” (UNESCO, 2018, p. 28). When a whole-school approach is adopted, core concepts taught during SRE should be reinforced and modelled formally and informally throughout the school community to effectively transform students attitudes and behaviours (Robina-Ramírez & Medina-Merodio, 2019); whereby effectively implementing a cultural shift.

An array of literature highlights the importance of seeking cooperation from parents during SRE implementation (Ringrose, 2016; Robinson et al., 2017; Thomas & Aggleton, 2016). Seeking cooperation from parents during curriculum implementation has found to be effective for both the school and students (Thomas & Aggleton, 2016). In a review of twenty-first century parent-child sex communication in the USA, Flores and Barroso (2017) identified parents as a prime source of sex education for young people. Similarly, the 2018 National Survey of Secondary Students and Sexual Health, surveying 6,327 students in Australian schools from Years 10 to 12, found that most students favoured their mothers or female guardians as an accurate source of sexual health information (Fisher et al., 2019). Therefore it is imperative to provide parents with information regarding SRE curricula to effectively address any gaps that may exist in adult’s learning in this area (Robinson et al., 2017). Researchers Ringrose (2016), Robinson et al. (2017), as well as Thomas and Aggleton (2016) agree that the provision of parallel programs providing information regarding curriculum, specifying the importance of SRE and the details on what the program entails, is crucial for successful integration of SRE in schools. While these programs aid to reduce parental concerns over the teaching content in SRE (Sundaram & Sauntson, 2016), they also ensure students receive coherency of information from both schools and parents regarding SRE matters (Thomas & Aggleton, 2016).

Implementing a whole-school approach to SRE is prevalent among SRE in Australia. Taking a whole-school approach to SRE was first mentioned in the document *Talking Sexual Health* produced by the Commonwealth of Australia (Australian Research Centre in Sex, 1999) as one of the five key components of implementing effective school-based SRE. Researchers Ollis and Harrison (2016) comment that a shared vision between the school and the wider community in Victoria, Australia, readily implements change. This collaborative approach requires anchoring SRE firmly within the aims and goals of the school which is achieved through implementing documented policies (Ollis & Harrison, 2016).

Beyond a Heteronormative Approach

Aligning to a comprehensive approach to SRE, Ezer, Kerr, Fisher, Heywood, and Lucke (2019) argue that it is necessary to provide SRE that is nuanced to the differing needs of young people in order to better peoples sexual health knowledge. This includes being inclusive of homogeneous and lesbian, gay, bisexual, transgender, intersex, and queer (LGBTIQ) persons. Historically, LGBTIQ people have been “derided, harassed, silenced and made invisible in Australia” (Ferfolja, 2013, p. 59). To eliminate

prejudice and discrimination, sexual orientation is now included in state and territory antidiscrimination legislation and education policies in Australia (Ferfolja, 2013). However, while these education policies seek to foster diversity and facilitate inclusion, Australian SRE continues to take a heteronormative approach according to Shannon (2016) and Thomas and Aggleton (2016). Research by Ezer, Kerr, et al. (2019) supports this. Drawing on data from the Fifth National Survey of Australian Secondary Students and Sexual Health 2013, Ezer, Kerr, et al. (2019) found that many Australian LGBTIQ people expressed frustration when SRE was presented to them with a heteronormative approach. One student commented:

100% of the sex education I have received has discussed safe sex practices in heterosexual relationships. As I'm a gay female, this left me with little to no understanding of safe sex practices when both partners are female. In fact, it left me with the belief that "safe sex" precautions were not necessary (Female, Age 17). (p. 605)

Consequences for adopting a heteronormative approach to SRE often leads to LGBTIQ students having no choice but to search outside of schools for information relevant to them, revealing the dangers of miscommunication (Ezer, Kerr, et al., 2019; Lim et al., 2017; Pingel, Thomas, Harmell, & Bauermeister, 2013). Lack of information regarding information on safe sex practices and relationships for LGBTIQ people in SRE does not reflect, and effectively serves to invalidate, their lived experiences (Shannon, 2016). This reinforces that primary focus on heterosexual behaviours and identities in SRE is limited in scope, it also contributes to the further marginalization of many gender and sexual minorities (Pingel et al., 2013; Shannon, 2016). Comprehensive SRE should therefore adopt a critical approach with a renewed focus on issues relevant for students from marginalized groups (Shannon, 2016).

Researchers Leonard, Marshall, Hillier, Mitchell, and Ward (2010) have found that many Australian teachers intentionally prevented discussing LGBTIQ issues in their SRE units. The researchers found, in their study of teachers in Victoria, that the predominant reason for this was due to confusion regarding government policy (Leonard et al., 2010). Researchers Johnson, Sendall, and McCuaig (2014) elaborate as they found that the silencing of controversial political issues was due to teachers developing anxiety over confusion on policies, as well as, the limited support and training for teachers regarding these seemingly controversial topics within sexuality education (Ezer, Jones, et al., 2019). This reinforces Shannon's (2016) argument that "without the guidance of strong policies, individual schools and teachers are ineffective at ensuring the best social outcomes for disadvantaged students" (p. 583), especially those who identify as LGBTIQ. This shows that although such education policies seek to foster diversity and facilitate inclusion there exists a significant gap between research knowledge and current policy and practices in SRE (Jones, 2015).

SRE in Australia

The inclusion of SRE in the Australian Curriculum

SRE has been formally included as part of school curricula since the 1970's in most states in Australia (Gibson, 2007). Since then SRE has enormously progressed especially in “inclusive practices, acknowledgement of sexual activity and improvement in the provision of resources to support [SRE] in schools” (Ollis, 2016, p. 49). This is particularly important concerning evidence suggests that many young people, males particularly, are encountering their first sexual experience in secondary school (Chow et al., 2017). In 2008, the Australian Curriculum, Assessment and Reporting Authority (ACARA) began to develop a national curriculum from Foundation to Year 10 in specified learning areas (ACARA, 2016b). Referred to as the Australian Curriculum (AC), it sets the expectations of teaching and learning for all Australian schools, teachers, parents, students and the community, regardless of the education jurisdiction (Department of Education Skills and Employment, 2020). The AC centres on “improving the quality, equity and transparency of Australia’s education system” (ACARA, 2016b). To uphold a high quality curriculum for young Australians, ACARA draws on the best national talent and expertise in the developmental process (ACARA, 2016b).

‘Sexuality and reproductive health’ first appeared in *The Shape of the Australian Curriculum: Health and Physical Education* in 2012 (ACARA, 2012). This document set the broad direction for the writing of the Australian Curriculum: Health and Physical Education (ACHPE) learning area (ACARA, 2016c). It mandates curriculum developer to ensure sexuality and reproductive health, among other focus areas, to be appropriately addressed across the scope of learning from F to Year 10 (ACARA, 2012). ‘Sexuality and reproduce health’ includes “understanding and managing physical, social and emotional changes that occur over time, exploring sexual and gender identity, managing intimate relationships, understanding reproduction and sexual health, [and] accessing community health services” (ACARA, 2012, p. 22). Inclusion of SRE into the ACHPE was partially in response to the need for the AC to address a range of public health concerns concerning children and young people (ACARA, 2012). This is most likely the reason for Shannon (2016) to imply that “sexuality education in Australia is predominantly framed as a corollary to public health promotion due to its place within the health and physical education curricula” (p. 577).

Nowadays, SRE is incorporated into the ACHPE under the term ‘sexuality and relationships’ (ACARA, 2016a). This specific focus area requires schools to address the significant role of sexuality and relationships throughout an individual’s life, or more specifically “addresses physical, social and emotional changes that occur over time and the significant role relationships and sexuality play in these changes” (ACARA, n.d.a). This focus area falls under the first content strand of the ACHPE which is personal, social and community health (ACARA, 2016a). This content strand is further separated into three sub strands: (1) healthy, safe, and active; (2) communicating and interacting for health and wellbeing; and (3) contributing to healthy and active communities (ACARA, 2016a).

The ambiguous nature of the Australian Curriculum

While SRE is mandated in the ACHPE, each state, territory and non-government education authorities are responsible for developing their own adapted curriculum that complements teachings and learnings outcomes of the AC (Department of Education Skills and Employment, 2020). Furthermore, flexibility remains for teachers and schools to develop their own programs and determine when and how to engage with them based on the provided broader learning sequences (ACARA, 2016a). The broader learning sequences, however, contributes to a lack of direction, due to the lack of vocabulary related to sex and sexual practices (Ezer, Jones, et al., 2019; Shannon & Smith, 2015). This presents controversy around sexuality education in Australia (Ezer, Kerr, et al., 2019; Shannon & Smith, 2015). Researchers Ferfolja and Ullman (2017) believe that the AC contains little instruction for sexual health teaching which prompts Ezer, Jones, et al. (2019) to suggest that the AC is not a curriculum but rather a framework.

Studies conducted analysing the AC in relation to SRE, present some interesting findings regarding the lack of vocabulary used in the curriculum (Allen, Rasmussen, & Quinlivan, 2013; Ezer, Jones, et al., 2019). Researchers Allen et al. (2013) argue that pleasure-based sexuality education is a notable silence in the AC. Furthermore, researchers Ezer, Jones, et al. (2019) have found that “the curriculum does not discuss act(s) of ‘sex’ or intercourse, but rather topics related to sex” (p. 563). They elaborate on the vocabulary of the AC by finding that:

The word ‘sex’ as referring to the activity of sex appears only once under the glossary definition of the term ‘sexuality’ but is never used as such in the curriculum itself. In all other instances, the word ‘sex(es)’ refers to the biological categories of male and female. When the word ‘sex’ does appear in the curriculum, it is usually part of a larger word or term, such as the following instances: sexuality, sexual health, same-sex attracted, intersex, sexual identities, sexism, sexting, sexual behaviour, sexual relationships, sexual experiences, and sexual orientation. (p. 559)

The decisions to speak vaguely about the topics of sex and relationships may be the result of various social and political pressures encountered by the curriculum authors (Ezer, Jones, et al., 2019). Shannon and Smith (2015) have a similar view stating that “parent and community sentiment, religious and ethical considerations, media commentary, as well as differing political and ideological persuasions all impact upon what is contained in any curriculum document and what can or cannot be addressed by teachers in the classroom” (p. 651). These perspectives shed light on possible causes for the ambiguous nature of the AC.

SRE in South Australia

The first unit of sex education was first officially recognised in the health education curriculum in South Australia in 1973 (Talukdar, Aspland, & Datta, 2013). By the late 1980’s, SRE was taught in

most state schools through the provision of health or human relationships programs (Talukdar et al., 2013). Nowadays, SRE is mandated as part of the ACHPE, which requires educators to address sexuality and relationship from Years 3 to 10; where Foundation to Years 2 require addressing relationships only (ACARA, 2016a). As previously mentioned, each state, territory and non-government education authorities are responsible for developing their own adapted curriculum that complement learning outcomes of the AC (Department of Education Skills and Employment, 2020). In South Australia, the Department for Education (2020c) require educators in government schools to adhere to the AC for Reception to Year 10 students; Reception corresponds to the same year level as Foundation is denoted in the AC.

To complement the AC, the Department for Education (2020b) constructed the Keeping Safe: Child Protection Curriculum (KSCPC). The KSCPC fits primarily within the ACHPE and can also be incorporated across all other learning areas (Department for Education, 2020b). The Department for Education (2020a) indicate that the KSCPC teaches children how to “recognise abuse and tell a trusted adult about it; understand what is appropriate and inappropriate touching; [and] understand ways of keeping themselves safe.” Documents and resources comprising the KSCPC however are only provided to staff who have completed necessary training (Department for Education, 2020b). According to a research on the review of child protection policies in Australia, researchers Walsh et al. (2013, p. 657) imply that South Australia has the most comprehensive approach to child sexual abuse prevention education in Australia because of the KSCPC.

Evaluation Studies Conducted on SRE

From an analysis of literature regarding SRE, it is evident that many studies tend to focus on best practices of SRE highlighting effective program characteristics, the shifting emphasis from sexual health to sexual rights within SRE curricula, inadequate program content and the positive related health outcomes (Haberland, 2015; Sundaram & Sauntson, 2016). Yet very few studies have evaluated the specific content of school-based SRE programs which raises an important question of what constitutes well-designed school-based SRE programs. To elaborate further, there exists a gap in the literature on *current* evaluative school based SRE programs. Peer-reviewed literature articles tend to be outdated with most relevant results published anywhere from the mid 1970’s to the late 2000’s (Kirby, 1984; Kirby, Alter, & Scales, 1980; Klein, Goodson, Serrins, Edmundson, & Evans, 1994; Lamberti & Chapel, 1977; Parcel & Luttmann, 1981; Smylie, Maticka-Tyndale, & Boyd, 2008; Voss, 1980; Voss & McKillip, 1979). These studies predominantly focus on SRE programs implemented in USA (Kirby, 1984; Kirby et al., 1980; Klein et al., 1994; Lamberti & Chapel, 1977; Parcel & Luttmann, 1981; Voss, 1980; Voss & McKillip, 1979), with only one studied based in Canada (Smylie et al., 2008). This highlights the lack of literature concerning evaluations of SRE programs implemented in Australia thus enhancing the gap and the need for literature to address this. Additionally, the lack of direction in the ACHPE deems it important to examine SRE programs in Australia to better understand what exact constitutes SRE programs being delivered to students (Ezer, Jones, et al., 2019).

Summary

Comprehensive SRE acknowledges that many young people are engaging in sexual intercourse and therefore teaches students how to minimize the risk of STIs and HIVS and how to engage in healthy relationships. Literature concerning school based SRE predominantly reflects discourses on explicit Internet material (specifically pornography), consent communication, and peer influences embedded in cultural norms. These controversial concepts of curriculum are embedded within SRE that is founded on a gender equality framework. In terms of literature regarding how to properly implement these concepts into comprehensive SRE, it is limited. Similarly, the ambiguous nature of the AC, provides yet another unreliable guidance for implementing these concepts. It is therefore necessary for researchers to address how SRE is currently being implemented and whether SRE effectively addresses controversial concepts of curriculum that have been identified in this chapter. The following chapter presents the methodology of this research that was used to conduct an evaluation of the *SRE Program*.

Chapter 3

Methodology

Introduction

This chapter presents the theoretical framework to this research. After discussing the benefits of a program evaluation, the theoretical framework of the intrinsic case study approach is presented. Aligning to an intrinsic case study approach, this chapter presents the conceptual framework that forms the structure of Chapter 4 and Chapter 5. The conceptual framework was developed based on the CIPP (context, input, process, and product) evaluation model developed by Stufflebeam (1983). These four types of evaluation are explored in depth by providing the procedure, the data selected, and the evaluation methods used for each evaluation. The chapter concludes by presenting a rationale for the validity and reliability of this research and discusses the limitations and ethical considerations.

Theoretical Framework

The history of educational program evaluations dates back to the nineteenth century in Great Britain where they were used in attempts to reform education (Madaus, Stufflebeam, & Scriven, 1983). At the time these program evaluations were “informal and impressionistic in nature” (Madaus et al., 1983, p. 4) however they have since developed to be “promising sources of guidance” (Worthen et al., 1997, p. 43). Conducting a program evaluation is “concerned with deciding on the value or worth wholeness of a learning process as well as the effectiveness with which it is being carried out” (Bharvad, 2010, p. 72). It is the process of obtaining information for judging the worth of an educational program that not only uncovers strengths and issues but enhances the efficacy of intended outcome of the program (Bharvad, 2010).

To conduct a program evaluation on the *SRE Program*, this research employed a case study approach. The focus of a case study is the detailed inquiry of a unit of analysis as a bounded system (the case), over time, within its context (Harrison, Birks, Franklin, & Mills, 2017). Case study research has been used across several disciplines, particularly the social sciences, education, business, law, and health (Harrison et al., 2017). Aligning to the purpose of a program evaluation, the outcomes of a case study research can lead to an in-depth understanding of behaviours, processes, practices, and relationships in context (Harrison et al., 2017). Stake (1995) emphasises the uniqueness of the case in a case study research consciously:

A child may be a case. A teacher may be a case. But her teaching lacks the specificity, the boundlessness, to be called a case. An innovative program may be a case. All the schools in Sweden can be a case. But a relationship among schools, the reasons for innovating teaching, or the policies of school reform are less commonly considered a case. These topics are generalities rather than specifics. The case is a specific, a complex, functioning thing... The case is an integrated system. The parts do not have to be working well, the purposes may be irrational, but it is a system. Thus people and programs clearly are prospective cases. (p. 2)

According to Creswell (2013), there exists three variations of qualitative case studies; those being, single instrumental case studies, collective case studies, and intrinsic case studies. The intrinsic case study approach focuses on developing an in-depth description and analysis of the case itself (Creswell, 2013) and is conducted by a means of learning about a particular case (Stake, 1995). Given this research was conducted to evaluate the *SRE Program*, this research fits primarily in the intrinsic case study approach.

Case study research methods are primarily qualitative inquiry (Harrison et al., 2017). From a social science perspective, Hammersley (2012) defines qualitative research as:

a form of social inquiry that tends to adopt a flexible and data-driven research design, to use relatively unstructured data, to emphasize the essential role of subjectivity in the research process, to study a small number of naturally occurring cases in detail, and to use verbal rather than statistical forms of analysis. (p. 12)

This research is data driven as data is analysed to generate categories rather than to place data into predetermined ones (Hammersley, 2012); data is used without seeking to quantify their content in the manner of much content analysis (Hammersley, 2012); subjectivity of the researcher is recognized and accepted; this research investigates the ordinary or “natural setting” in which people live and work (Hammersley, 2012, p. 13); this research employs a qualitative inquiry which involves a small set of data; lastly, the predominant mode of analysis is verbal description and interpretation (Hammersley, 2012). Encompassing these qualities of a qualitative inquiry, this research is qualitative as it complements the purpose of the research which is to develop an in-depth understanding by analysing the *SRE Program* for merit and improvement.

Research Approach

To evaluate the *SRE Program* adhering to an intrinsic case study approach, data was evaluated and presented according to the CIPP evaluation model as developed by Stufflebeam (1983). The CIPP evaluation model is one such model that encompasses a curriculum program evaluation that is concerned with looking at how a particular curriculum works within its instructional setting (Bharvad, 2010). The model is generally applied to evaluate material, personnel, students, programs, and projects in a range of disciplines (Stufflebeam, 2000) which aligns to the intrinsic case study approach. The CIPP

Model was the central topic at the International Conference of the Evaluation of Physical Education held in Jyvaskyla, Finland in 1976 (Stufflebeam, 1983). The sole purpose of the evaluation is “not to prove but to improve” (Stufflebeam, 1983, p. 118) the program that is being evaluated. Designed to promote growth, the CIPP model provides evaluation services to institutional decision makers and other stakeholders (Bharvad, 2010). This reinforces the alignment of employing the CIPP model to this research given that the program evaluation was prompted by an external beneficiary.

Based on the importance of the CIPP evaluation model, a conceptual framework was developed by modifying a particular CIPP evaluation model, which is presented in Appendix 1, to fit the context of this research. The conceptual framework developed for this research is presented in Figure 1 and outlines the approach of this research. The context, input and process evaluation construct the findings, Chapter 4, of this research, while the production evaluation constitutes the discussions, Chapter 5. The sections that follow illustrate the data that was collected and details the analytical methods for each of the four types of evaluation.

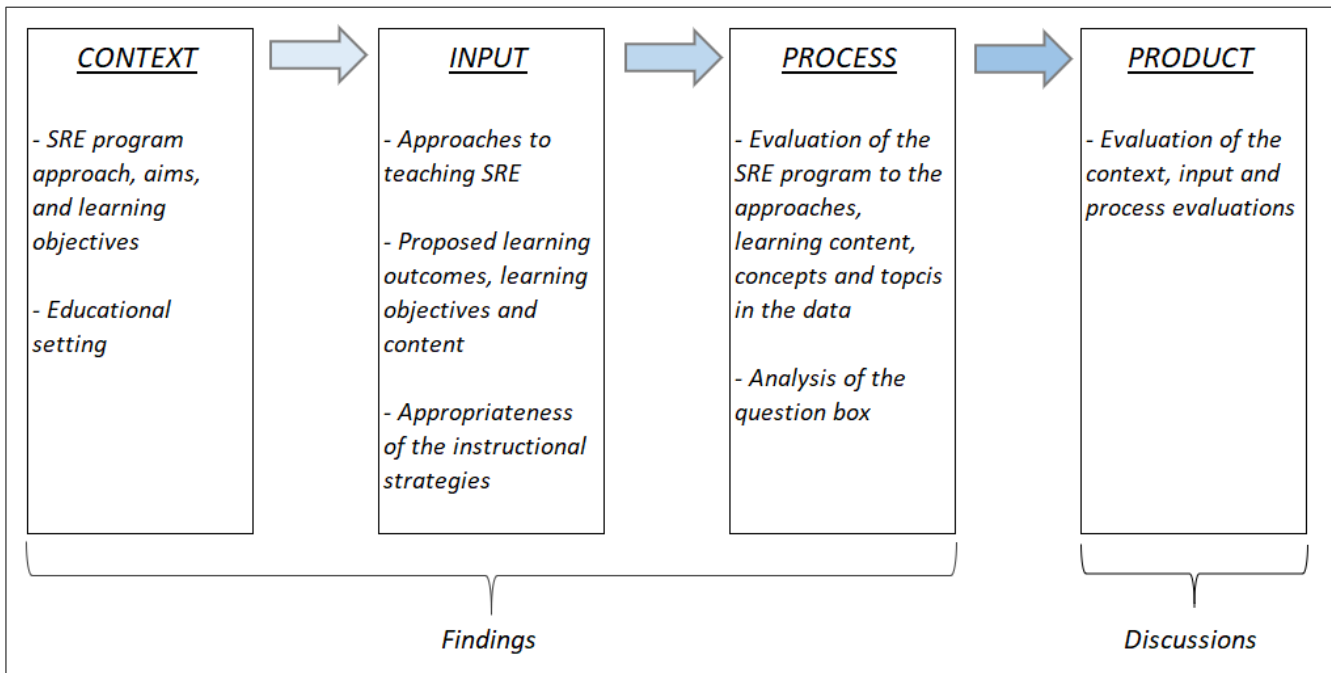


Figure 1: Conceptual framework

Context Evaluation

To commence the program evaluation, the context evaluation was performed to evaluate already established goals, learning outcomes and educational setting priorities of the *SRE Program*. Essentially, the context evaluation “involves studying the reality in which the programme is run” (Bharvad, 2010, p. 73). This evaluation was conducted with a document review of the *SRE Program* as a basis for judging outcomes and for surfacing and addressing potential barriers to the program’s success (Stufflebeam, 2000). Documents, in form of PowerPoint slides, collected from the program facilitator to aid in the context evaluation include:

- Parents Information Evening
- Professional Development Workshop
- Lectures on the following topics:
 1. The Media, Gender, and Sexuality (Session 1)
 2. Gender, Power, and Pornography (Session 2)
 3. Sexual Activity and the Law (Session 3)
 4. Respectful Relationships (Session 4)

Both the Parents Information Evening and Professional Development Workshop were delivered by the program facilitator prior to the delivery of the lectures and lessons to the Year 8 students. The Parents Information Evening was delivered to the parents and caretakers of the students in the Year 8 classroom. This presentation outlined the significance of SRE, and the approach and key concepts of the *SRE Program*. The Professional Development Workshop, delivered by the program facilitator, was presented to the staff at the South Australian school in which the *SRE Program* was conducted. This workshop informed staff of the approach and learning outcome of the *SRE Program*, outlined the lecture topics and provided lesson plans to complement each lecture. The program facilitator delivered the four lectures to the Year 8 students in 60-minute sessions, over the duration of four weeks. Essentially, each week the students received a one-hour lecture accompanied by a lesson from staff at their school to reinforce concepts presented in the lecture, and this occurred for four weeks. Therefore, for the purpose of this research the lectures will be referred to as sessions which are denoted with a number in the numerical order in which they were presented to the student.

The researcher attended the lectures to gain a sense of context to the *SRE Program*. It is important to note however, that although the lessons were observed, the observations during these lectures are not included in this research as it does not align with the purpose of this research. The purpose being to evaluate the *SRE Program* primarily in terms of its contents and not in relation to its delivery.

Input Evaluation

Secondly, an input evaluation was conducted to “provide information for determining how alternative curricula strategies would be able to contribute to the attainment of curricula intentions” (Bharvad, 2010, p. 73). The input evaluation typically examines the appropriateness of the selected objectives, congruency between these objectives and the content, and the appropriateness of the instructional strategies and assessment procedures (Bharvad, 2010). Due to the nature of this research, the appropriateness of the instructional strategies and assessment procedures are not being evaluated, only the appropriateness of the selected objectives and the congruency between objectives and the content are being evaluated. To conduct this evaluation, document analysis was used adhering to the principles of an intrinsic case study approach. Document analysis is the “process of evaluating documents in such a way that empirical knowledge is produced, and understanding is developed” (Bowen, 2009, pp. 33-34). This involved examining relevant approaches, proposed learning outcomes, learning objectives and content, and appropriateness of the instructional strategies (Stufflebeam,

2000). Documents were selected as a basis for monitoring and judging implementation to provide an in-depth understanding and evaluation of the program aligning to an intrinsic case study approach. The following two documents are publicly available and were used as data.

1. *International technical guidance on sexuality education: An evidence-informed approach (the Guidance)*

Published in 2018, UNESCO's revised edition of the *Guidance* "was developed to assist education, health, and other relevant authorities in the development and implementation of school-based and out-of-school comprehensive sexuality education programmes and materials" (UNESCO, 2018, p. 12). Additionally, the *Guidance* is reflected as an accountability tool as it is "useful for anyone involved in the design, delivery and evaluation of sexuality education programmes" (UNESCO, 2018, p. 12). Due to the nature of the *Guidance*, providing a foundation for educational requirements, this data was deemed essential for the evaluation of the *SRE Program* to international guidelines. In addition, the *Guidance* specifies a range of age-appropriate concepts and topics that are separated into four age groups. Given that the *SRE Program* is delivered to South Australians in Year 8 that are approximately 13-14 years old, this research focused on recommendations for the 12-15 years age group.

2. *Australian Curriculum: Health and Physical Education (ACHPE)*

The ACHPE version 8.3 was chosen for data as it provides the foundation for high quality teaching to meet the needs of all Australian students (ACARA, n.d.b). The ACHPE provides content descriptions and achievements standards for students specific to a range of year levels. The Years 7 and 8 was examined as it aligns with the intended audience of the *SRE Program*. Additionally, the complementary resource to the ACHPE called the Health and Physical Education: Focus areas (hereafter HPE: Focus areas) document was selected as it provides further information on relationships and sexuality (ACARA, n.d.a). Hereafter, when mentioning ACHPE it will refer to both the ACHPE version 8.3 and HPE: Focus areas documents as they are essentially umbrella documents for ACHPE.

Process Evaluation

Thirdly, the process evaluation was conducted to evaluate implementing decisions by providing a comparison of the actual implementation with the intended program (Stufflebeam & Shinkfield, 1985). Process evaluation also fulfils two other functions which are "(1) to provide information to external audiences who wish to learn about the program and (2) to assist program staff, evaluators, and administrators in interpreting program outcomes" (Gredler, 1996, as cited in Tunc, 2010, p. 23). To conduct process evaluation, this research employed a visual analytical tool which is most commonly known as curriculum mapping (Perlin, 2011). Curriculum mapping "is a roadmap of a curriculum, guiding students, faculty members, teachers, curriculum planners, evaluators, and coordinators through the various elements of the curriculum and their interconnections" (Perlin, 2011, p. 28). Curriculum mapping is efficient in measuring the quality of implementing decisions and have been used in many disciplines including medicine, pharmacy, public health, and education in Australia (Komenda et al., 2015; Oliver, Ferns, Whelan, & Lilly, 2010; Perlin, 2011). They are used by a means of continuous

quality improvements as they demonstrate linkages between course content and the achievement of program objectives or learning outcomes (Perlin, 2011).

This research encompassed curriculum mapping by mapping the key concepts and learning outcomes in the *SRE Program* to the *Guidance* and the ACHPE documents. As outlined by Perlin (2011), curriculum mapping begins with a linking process whereby it requires “placing a mark in a table with courses on the horizontal axis and the competencies on the vertical axis” (p. 30). This process has been adopted; the four topics of the *SRE Program* are on the horizontal axis and the key concepts and learning outcomes as presented in the *Guidance* and ACHPE are on the vertical axis and a dot represents correlation between competencies. However, Perlin (2011) stresses the importance of acknowledging just how much each course contributes to the competencies and content areas. To account for the dept to which each contributes, this research used a shaded circle to represent a strong correlation, that is, all knowledge, attitudinal and skill-based learning objectives were met; and an unshaded circle represents a mild correlation between the *SRE Program’s* key concepts and learning outcomes to the selected data. Due to the transparent and comprehensive nature of curriculum mapping, they are recognised as beneficial for curriculum designers and innovators (Komenda et al., 2015) thereby benefiting the external beneficiary in this research.

Another method of conducting process evaluation is by obtaining specific information to aid programmed decisions (Stufflebeam, 2000). At the end of each lecture, the program facilitator encouraged students to submit anonymous questions, of any queries they encountered during the lectures, to a question box. These student questions were supplied by the program facilitator to the researcher and were used in the process evaluation to aid program decisions. Questions where the handwriting was incomprehensible were disregarded, as too were any inappropriate questions or comments. While the actual student questions are not disclosed in this research paper, due to ethical reasons, a thematic analysis was conducted on them. Thematic analysis requires pattern recognition whereby themes, emerging through a careful, more focused re-reading and review of the data (Bowen, 2009), become the categories for analysis (Fereday & Muir-Cochrane, 2006). The emerging themes include bystander action, condoms, gender and/or sexual diversity, male genitalia, masturbation and orgasms, negotiating sexual activity and consent, nudes, other, pornography, relationships, and STI’s.

Product Evaluation

Lastly, the product evaluation was conducted to measure, interpret and judge the attainments of the *SRE Program* (Stufflebeam & Shinkfield, 1985). This evaluation forms Chapter 5 of this research, being the discussions chapter. During the product evaluation, outcomes of the program, both positive and negative (Gredler, 1996, as cited in Tunc, 2010) are derived from the context, input and process evaluations (Stufflebeam, 2000). This is conducted to determine the extent to which identified needs were met, as well as to identify the broad effects, or merit and worth, of the program (Stufflebeam, 2000; Tunc, 2010). Again, thematic analysis was employed which is an “increasingly popular method of qualitative data analysis”

Following the context, input and process evaluations, the product evaluation presented the following themes:

1. Structure and approach of the *SRE Program*
2. Discrepancy in teaching concepts
3. Gender and sexual diversity
4. Help-seeking strategies
5. Critical literacy skills
6. Navigating sexual activity and consent

Selected Data

Aligning to an intrinsic case study approach, the data selected for this research provides a comprehensive in-depth understanding of the *SRE Program* (Harrison et al., 2017). Figure 2 illustrates the data selected as illustrated in the context, input, and process evaluation sections above. The figure presents the data in a hierarchical structure to demonstrate the hierarchical relationship that exists between them; the international guidelines influence the Australian and South Australian guidelines which influence the development of the SRE, and thus the *SRE Program*, in South Australia. These documents were selected as they were required to develop a response to the first research question.

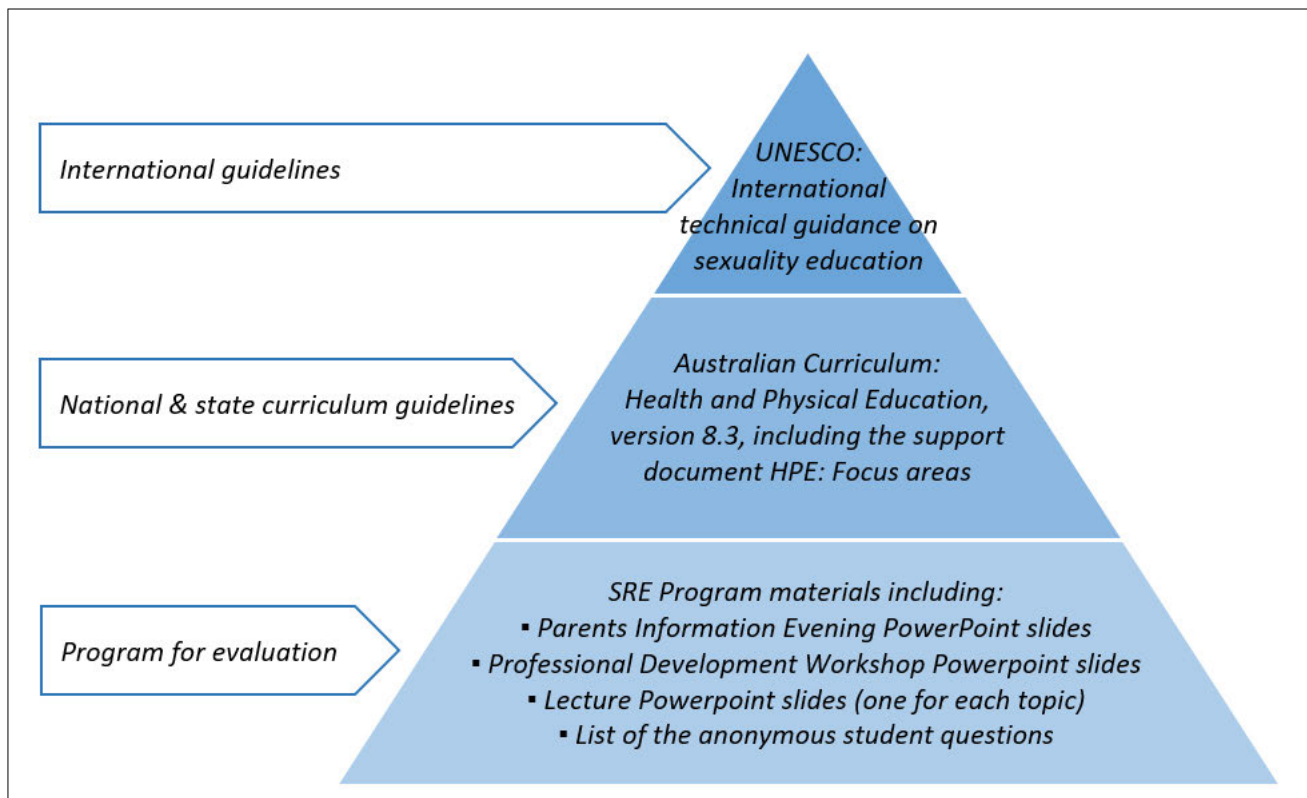


Figure 2: Selected data

Validity and Reliability

The *Guidance* and the ACHPE, the data selected to conduct the evaluation, were recommended by the program facilitator as they were used in the process of developing the *SRE Program*. These documents are used by educators to develop SRE in South Australia which reinforces trustworthiness of the data. The documents selected for data are published by government and intergovernmental organisations and are therefore considered grey literature. Grey literature documents aid to enhance credibility of the research by reducing reporting biases from published literature such as articles (Benzies, Premji, Hayden, & Serrett, 2006). As the *Guidance* and ACHPE were the only two sources of data used in the evaluation, other than the *SRE Program*, the evaluation process was extensive, allowing for a deep and rich evaluation to enhance credibility of the research (Cutcliffe & McKenna, 1999).

The *SRE Program* that was evaluation was provided by an external beneficiary, referred to as the program facilitator, reflecting the reflexive nature of this research. As the researcher does not have an affiliation to the *SRE Program*, there are no conflicts of interest which enhances to minimise researcher bias (Cutcliffe & McKenna, 1999). Additionally, the process of evaluation was conducted in a thorough manner to reduce researcher bias.

Limitations

In this research, there were three key limitations. The collection of data was limited due to the word restrictions of the Teaching Dissertation course. The KSCPC would have been ideal to analyse as it fits primarily within the ACHPE and it is mandated for all educators in the Department of Education (2020b), South Australia. For this reason, the KSCPC would have been ideal to as it could aid to strengthen identity or further similarities and differences of the *SRE Program* to the interstate guidelines.

While attempts were made to reduce researcher bias, the process of curriculum mapping could have introduced researcher bias. Interpretations of the *SRE Program* were required to complete the curriculum mapping of the *SRE Program* to the *Guidance* and the ACHPE. The final limitation lies in the theoretic framework of the case study approach. This research focuses predominantly on the *SRE Program* which is unique in nature as it is designed to be implemented in South Australia and delivered to males. The structure of the *SRE Program* including topics of discussion intended for a male audience and this may not be representative of how SRE is taught in a unisex or all female school in South Australia or Australian wide.

Ethical Considerations

No primary data has been collected as part of this research. The *SRE Program* materials that were collected to conduct the evaluation, including the PowerPoint presentation slides and the student questions, were provided by the program facilitator as secondary sources of data for the researcher. As they are classified as secondary data, no primary data has been collected, there are no ethical concerns surround the collection of this data. The program facilitator has requested for the *SRE Program* to remain confidential which has been recognised and reflected by the researcher as the name of the company has not been provided. While the student questions were submitted anonymously and voluntarily deeming them de-identified data, consent was not obtained from the students to have them published and therefore they too will remain confidential. The program facilitator gave consent for the *SRE Program* materials to be evaluated and this research acknowledges that they have the right to withdraw at any stage during the research which will be acknowledged without hesitation. Lastly, the identities of the program facilitator and the South Australian school, in which the *SRE Program* was delivered, will remain confidential and are therefore not disclosed at any stage of this research.

Summary

The intrinsic case study approach was used to evaluate the *SRE Program* as it aligns with the purpose of this research, being to evaluate the *SRE Program* for merit and to provide recommendations. The *SRE Program* will be evaluated to the *Guidance*, as the international governing document, and the ACHPE, as the Australian governing document, as they are essential guidelines for SRE curriculum developers. The evaluation will be conducted by analysing the approach, aims and learning objectives, and teaching concepts that are recognised in each document. Curriculum mapping is an essential evaluation tool used in this process and although this evaluation method may introduce researcher bias, this process was conducted thoroughly to ensure credibility in the findings of this research.

Chapter 4

Findings

Introduction

This chapter presents the findings of the context, intent, and process evaluations. The context evaluation presents findings on the educational setting, approach, aims and learning objectives of the *SRE Program*. The intent evaluation presents findings on the approaches, aims, learning objectives and content descriptions of the *Guidance* and the ACHPE. Lastly, the process evaluation presents the curriculum mapping which highlights the notable similarities and differences in the tables and presents findings from the questions the students submitted to the question box.

Context Evaluation

Educational Setting

The *SRE program* is designed to be delivered to Year 8 students, approximately 13-14 years old, attending an all-boys secondary school in South Australia, where students are of diverse cultural backgrounds and socioeconomic status. Relationships and sexuality is a focus area mandated in the ACHPE and therefore requires schools to address SRE in the curriculum for Foundation through to Year 10 (ACARA, 2016a). As outlined in Chapter 3, the *SRE Program* delivers four lectures accompanied by follow up lessons to reinforce teaching concepts; this is conducted over four weeks.

Approach, Aim and Learning Objectives of the SRE Program

The *SRE program* is delivered through an evidence-based, sex-positive, and harm reduction approach as illustrated in the *SRE Program* materials. An evidence-based approach provides information that is evidence driven; a sex-positive approach delivers SRE that discusses sex openly, honestly, and in a positive light; and a harm reduction approach aims to minimise the risk of unhealthy sexual and relationships experiences, including sexual assault. The learning objectives of the *SRE program* include: to develop healthy relationship skills, identify personal values and relationship needs; determine boundaries around preferred sexual activity; communicate and negotiate preferred sexual activity; understand and identify coercion; understand and recognise consent; and enjoy safe and consenting relationships. A detailed description of the learning objectives in each of the *SRE Program* documents is detailed as follows:

- Parents Information Evening

Delivered to parents, this information evening reinforces the importance of teaching SRE to students and outlines the sequence of learning outcomes, providing rationale for the concepts addressed.

- Professional Development Workshop

Delivered to staff, this workshop highlights the importance of teaching SRE; details the learning outcomes of the *SRE Program*; includes evidence-based statistical facts to provide a rationale for concepts during the program; informs staff about the portrayal of gender in the media and the associated constructed cultural behaviours; provides an outline of the four lectures that are presented by the program facilitator; and provides detailed lesson plans, including complementary activities, for the staff to deliver to the students.

- Session 1: The Media, Gender, and Sexuality

This session encompasses sexual health, gender and sexual diversity, the representation of gender, sexuality, and relationships in media, LGBTIQ folk, and the impact of media (including stereotyped norms around masculinity) on men's mental health, well-being, and relationships.

- Session 2: Gender, Power, and Porn:

This session evaluates pornography literacy by discussing the reality of it, evaluates relationship and sexual attitudes developed from watching pornography, analyses the impact of pornography on sexual expectations and relational templates, explores the portrayal of gender and masculinity in porn, violence against people (presenting the bystander intervention method for violence prevention), and compares sex in pornography to the real-life sex.

- Session 3: Sexual Activity and the Law

This session addresses the implications of coercion and reinforces the importance of consent while also addressing consent online, victim blaming, legislation and revisits gender and sexual equality and inequality from previous sessions.

- Session 4: Respectful Relationships

This session aims to develop healthy relationships skills by covering asking someone out and breaking up with them, safer sex (including emotionally), evaluating good and bad relationships, relationship values, and protection and contraception. Additionally, the student questions in the anonymous question box were addressed during this session.

Intent Evaluation

Approach to SRE

The *Guidance* primarily advocates a human rights-based approach to SRE which:

... builds on and promotes an understanding of universal human rights – including the rights of children and young people – and the rights of all persons to health, education, information equality and non-discrimination. Using a human rights-based approach within CSE also involves raising awareness among young people, encouraging them to recognize their own rights, acknowledge and respect the rights of others, and advocate for those whose rights are violated. (UNESCO, 2018, p. 16)

This approach “emphasizes values such as respect, acceptance, equality, empathy, responsibility and reciprocity as inextricably linked to universal human rights” (UNESCO, 2018, p. 85). Embedded in a framework of human rights and gender equality, the *Guidance* calls for SRE to be delivered in a manner that is positive, affirming, and centred on the best interest of young people (UNESCO, 2018). The *Guidance* is “grounded in the understanding that advancing gender equality is critical to young people’s sexual health and wellbeing” (UNESCO, 2018, p. 34). To complement this, the *Guidance* also supports a learner-centric approach whereby the focus of instruction encourages collaborative learning strategies and a spiral-curriculum approach which ensures information that is presented builds upon previous learnings (UNESCO, 2018). These approaches aid to deliver a comprehensive SRE that focuses on positive sexuality and good sexual and reproductive health (UNESCO, 2018). To strengthen in-school SRE, while also ensuring long-term results, the *Guidance* recommends that SRE should involve not only young people and educators, but seek the support from parents/ family members and other community stakeholders too (UNESCO, 2018).

The ACHPE emphasises a strengths-based approach which “has a strong focus on supporting students to develop the knowledge, understanding and skills they require to make healthy, safe and active choices that will enhance their own and others’ health and wellbeing” (ACARA, 2016a, p. 5). Additionally, the ACHPE emphasise including a critical inquiry approach whereby “students will critically analyse and critically evaluate contextual factors that influence decision-making, behaviours and actions, and explore inclusiveness, power inequalities, assumptions, diversity and social justice” (ACARA, 2016a, p. 6). To enhance the delivery of curriculum content, the ACHPE advocate a broader school environment by stating that “a healthy and supportive school environment may be enriched through health-promoting school policies and processes, and partnerships with parents, community organisations and specialist services” (ACARA, 2016a, p. 6).

Cultural Relevance

Both the *Guidance* and ACHPE emphasise the need for SRE to reflect and be relevant to the local context (ACARA, 2016a; UNESCO, 2018). The *Guidance* reinforces that “the guidance is voluntary and non-mandatory, based on universal evidence and practice, and recognizes the diversity of different national contexts in which sexuality education is taking place” (UNESCO, 2018, p. 35). This reinforces that the key concepts, topics and learning objects presented in the *Guidance* should be adapted to local contexts to ensure relevance (UNESCO, 2018). Meanwhile, the ACHPE recognise that:

... values, behaviours, priorities, and actions related to health and physical activity reflect varying contextual factors which influence the ways people live. The curriculum develops an understanding that the meanings and interests individuals and social groups have in relation to health practices and physical activity participation are diverse and therefore require different approaches and strategies. (ACARA, 2016a, p. 6)

This again reinforces that SRE should be relevant to the contextual factors in each school.

Aims and Learning Objectives

Aligning to comprehensive SRE, the *Guidance* provides educational guidance in with the aim for students to develop knowledge, skills, attitudes and values that “empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives” (UNESCO, 2018, p. 16). While the *Guidance* provides knowledge, attitudinal and skill-based learning objectives per age group, the *Guidance* “does not systematically illustrate each type of learning objective for all the topics identified” (UNESCO, 2018, p. 35); these topics will be discussed in the sections that follow.

There are five aims the ACHPE denote for students in Foundation to Year 10 (ACARA, 2016a). The aims, that are cited by ACARA (2016a), require students to develop knowledge, understanding and skills to enable students to:

- access, evaluate and synthesise information to take positive action to protect, enhance and advocate for their own and others’ health, wellbeing, safety and physical activity participation across their lifespan;
- develop and use personal, behavioural, social and cognitive skills and strategies to promote a sense of personal identity and wellbeing and to build and manage respectful relationships;
- acquire, apply and evaluate movement skills, concepts and strategies to respond confidently;
- competently and creatively in a variety of physical activity contexts and settings;
- engage in and enjoy regular movement-based learning experiences and understand and appreciate their significance to personal, social, cultural, environmental and health practices and outcomes; [and]
- analyse how varied and changing personal and contextual factors shape understanding of, and opportunities for, health and physical activity locally, regionally, and globally. (ACARA, 2016a, p. 4)

The Three Domains of Learning

According to the *Guidance*, the three domains of learning are knowledge, attitudinal and skills-building learning objectives; “knowledge provides a critical foundation for learners, ... attitudes help young people shape their understanding of themselves, sexuality and the world... [and] skills... enable learners to take action” (UNESCO, 2018, p. 35). These skills include “communication, listening, refusal,

decision-making and negotiation; interpersonal; critical-thinking; building self-awareness; developing empathy; accessing reliable information or services; challenging stigma and discrimination; and advocating for rights” (UNESCO, 2018, p. 35). The *Guidance* encourages curriculum developers to maintain a balance of learning objectives across all three domains as “a combination of all three domains of learning is critical to empowering young people” (UNESCO, 2018, p. 35). While the ACHPE does not stipulate domains of learning, the curriculum should be implemented to expand on students’ (ACARA, 2016a). The ACHPE emphasises that “in health and physical education, students develop the skills, knowledge, and understanding to strengthen their sense of self, and build and manage satisfying, respectful relationships” (ACARA, n.d.a, p. 4).

Teaching Concepts

The *Guidance* provides eight key concepts which are “equally important, mutually reinforcing and intended to be taught alongside one another” (UNESCO, 2018, p. 35). Each of these key concepts are further delineated into two to five topics (UNESCO, 2018). This research focused on the age group 12-15 years old, as it aligns with the audience of the *SRE Program*. The eight key concepts and topics addressed in the *Guidance* are standard across all age groups (UNESCO, 2018) which are cited below:

- 1) Relationships:
 - families;
 - friendships, love, and romantic relationships;
 - tolerance, inclusion, and respect;
 - long-term commitments and parenting.
- 2) Values, rights, culture, and sexuality:
 - values and sexuality;
 - human rights and sexuality;
 - culture, society, and sexuality.
- 3) Understanding gender:
 - the social construction of gender and gender norms;
 - gender equality, stereotypes, and bias;
 - gender-based violence.
- 4) Violence and staying safe:
 - violence;
 - consent, privacy, and bodily integrity;
 - safe use of information and communication technologies.
- 5) Skills for health and well-being:
 - norms and peer influence on sexual behaviour;
 - decision-making;
 - communication, refusal, and negotiation skills;
 - media literacy and sexuality;
 - finding help and support.

6) The human body and development:

- sexual and reproductive anatomy and physiology;
- reproduction;
- puberty;
- body image.

7) Sexuality and sexual behaviour:

- sex, sexuality, and the sexual life cycle;
- sexual behaviour and sexual response.

8) Sexual and reproductive health:

- pregnancy and pregnancy prevention;
- HIV and acquired immunodeficiency syndrome (AIDS) stigma, care, treatment, and support;
- understanding, recognizing, and reducing the risk of STIs, including HIV. (UNESCO, 2018, p. 36)

SRE is reflected in Stand 1 of ACHPE relating to personal, social and community health; the other strand relating to movement and physical activity (ACARA, 2016a). The strand personal, social and community health for Year 7 and 8 is separated into three sub-strands, each with additional threads (ACARA, 2016a). ACARA (2016a) details the content descriptions as follows:

1) Being healthy, safe, and active:

- Identities;
- changes and transitions;
- help-seeking;
- making healthy and safe choices.

2) Communicating and interacting for health and wellbeing:

- interacting with others;
- understanding emotions;
- health literacy.

3) Contributing to healthy and active communities:

- community health promotion;
- connecting to the environment;
- valuing diversity. (ACARA, 2016a, p. 8)

These content descriptions do not explicitly mention sexuality or relationships, however elaborations to the threads do. In addition, ACARA (n.d.a) provide a more comprehensive elaboration of teaching concepts for SRE in which students from Year 3 to 10 should learn about the following:

- people who are important to them;
- strategies for relating to and interacting with others;
- assertive behaviour and standing up for themselves;

- establishing and managing changing relationships (offline and online);
- bullying, harassment, discrimination, and violence (including discrimination based on race, gender and sexuality);
- strategies for dealing with relationships when there is an imbalance of power (including seeking help or leaving the relationship);
- puberty and how the body changes over time;
- managing the physical, social and emotional changes that occur during puberty;
- reproduction and sexual health;
- practices that support reproductive and sexual health (contraception, negotiating consent, and prevention of sexually transmitted infections and blood-borne viruses);
- changing identities and the factors that influence them (including personal, cultural, gender and sexual identities); [and]
- celebrating and respecting difference and diversity in individuals and communities. (ACARA, n.d.a)

Process Evaluation

Evaluation of the SRE Program to Guidance's Key Concepts and Topics

To determine whether the *SRE Program* meets the standards of the international guidelines, the *SRE Program* has been evaluated to the key concepts and learning topics in the *Guidance*. Using curriculum mapping as the evaluative tool, the key concepts and topics presented in the *Guidance* were compared against the *SRE Program* and the mark symbolises a similarity between these. Table 1 presents the findings. It is evident in the table that the *SRE Program* covers each of the eight key concepts that UNESCO present, however at varying degrees.

As evident in Table 1, key concepts presented in the *Guidance* (UNESCO, 2018) that are covered explicitly in the *SRE Program* include (1) values, rights, culture, and sexuality, (2) understanding gender, (3) violence and staying safe, and (4) sexuality and sexual behaviour. Of these four key concepts, the associated topics are mentioned in each of the four sessions in the *SRE Program*.

UNESCO Key Concepts and Topics	Session 1	Session 2	Session 3	Session 4
<i>1. Relationships</i>				
1.1 Families				
1.2 Friendship, Love and Romantic Relationships	•	•		
1.3 Tolerance, Inclusion and Respect	•	•	•	•
1.4 Long-term Commitments and Parenting				
<i>2. Values, Rights, Culture and Sexuality</i>				
2.1 Values and Sexuality				•
2.2 Human Rights and Sexuality		•	•	
2.3 Culture, Society and Sexuality	•	•	•	•
<i>3. Understanding Gender</i>				
3.1 The Social Construction of Gender and Gender Norms	•	•		
3.2 Gender Equality, Stereotypes and Bias	•	•	•	
3.3 Gender-based Violence		•		
<i>4. Violence and Staying Safe</i>				
4.1 Violence			•	
4.2 Consent, Privacy and Bodily Integrity			•	
4.3 Safe use of Information and Communication Technologies	•	•		
<i>5. Skills for Health and Well-being</i>				
5.1 Norms and Peer Influence on Sexual Behaviour	•	•	•	
5.2 Decision-making			•	
5.3 Communication, Refusal and Negotiation Skills				
5.4 Media Literacy and Sexuality	•	•		
5.5 Finding Help and Support	•	•	•	•
<i>6. The Human Body and Development</i>				
6.1 Sexual and Reproductive Anatomy and Physiology	•	•		•
6.2 Reproduction				•
6.3 Puberty				
6.4 Body Image		•		
<i>7. Sexuality and Sexual Behaviour</i>				
7.1 Sex, Sexuality, and the Sexual Life Cycle		•		
7.2 Sexual Behaviour and Sexual Response	•	•	•	•
<i>8. Sexual and Reproductive Health</i>				
8.1 Pregnancy and Pregnancy Prevention			•	•
8.2 HIV and AIDS Stigma, Care, Treatment and Support				
8.3 Understanding, Recognizing and Reducing the Risk of STI's			•	•

Table 1: Correlation between the *SRE Program* and the *Guidance's* key concepts and topics

Topics, as outlined in the *Guidance* (UNESCO, 2018), that are covered consistently throughout the *SRE Program* include (1) culture, society, and sexuality, (2) finding help and support, and (3) sexual behaviour and sexual response. They are consistent as they are present in each of the four sessions in the *SRE Program*. Throughout each sessions the *SRE Program* discusses social and cultural norms and ones that specifically influence sexual behaviour in society (UNESCO, 2018). The program extends to influence students to be conscious of social and cultural norms thereby influencing positive attitudinal behaviours. At the conclusion of each of the lectures and lessons, a list of good sources for sexual, reproductive, and mental health help and support services are provided. Additionally, the program encourages students to perceive the importance of critically assessing sources for health and support (UNESCO, 2018). Lastly, sexual behaviours and responses are reinforced as information regarding making informed decisions is delivered to promote one's own health and well-being.

Topic's, as outlined in the *Guidance* (UNESCO, 2018), that are not covered in the *SRE Program* include (1) families, (2) long-term commitments and parenting, (3) puberty, and (4) HIV and AIDS stigma, care treatment and support.

Evaluation of the SRE Program to the ACHPE Learning Objectives

To determine whether the *SRE Program* meets the standards of the national guidelines, the *SRE Program* has been evaluated against the learning objectives in the ACHPE, using curriculum mapping as the evaluative tool. The correlation between the learning objectives of the ACHPE for Year 7 and 8 has been mapped to the *SRE Program's* content and the results are shown in Table 2. It is evident that the two most prominent similarities between the learning objectives of the *SRE Program* and ACHPE are within the sub-strand *Communicating and interacting for health and wellbeing* (ACARA, 2016a). Within the threads *Investigate the benefits of relationships and examine their impact on their own and others' health and wellbeing* (ACARA, 2016a) and *Evaluate health information and communicate their own and others' health concerns* (ACARA, 2016a), the following four elaborations, provided by ACARA (2016a), are consistently reinforced throughout the *SRE Program*:

- understanding and applying online and social protocols to enhance relationships with others and protect their own wellbeing;
- recognising the impact bullying and harassment can have on relationships, including online relationships;
- exploring skills and strategies needed to communicate and engage in relationships in respectful ways; [and]
- developing health literacy skills while exploring and evaluating online health information that is aimed at assisting young people to address health issues. (ACARA, 2016a, pp. 46-47)

Australian Curriculum: Health and Physical Education strand 1: personal, social and community health (Years 7 and 8)

Being healthy, safe and active

Investigate the impact of transition and change on identities

Evaluate strategies to manage personal, physical and social changes that occur as they grow older

Practise and apply strategies to seek help for themselves or others

Investigate and select strategies to promote health, safety and wellbeing

Communicating and interacting for health and wellbeing

Investigate the benefits of relationships and examine their impact on their own and others' health and wellbeing

Analyse factors that influence emotions, and develop strategies to demonstrate empathy and sensitivity

Evaluate health information and communicate their own and others' health concerns

Contributing to healthy and active communities

Plan and use health practices, behaviours and resources to enhance health, safety and wellbeing of their communities

Plan and implement strategies for connecting to natural and built environments to promote the health and wellbeing of their communities

Investigate the benefits to individuals and communities of valuing diversity and promoting inclusivity

	Session 1	Session 2	Session 3	Session 4
Investigate the impact of transition and change on identities	●	●	○	○
Evaluate strategies to manage personal, physical and social changes that occur as they grow older	●		○	○
Practise and apply strategies to seek help for themselves or others		○		●
Investigate and select strategies to promote health, safety and wellbeing		○	○	
<i>Communicating and interacting for health and wellbeing</i>				
Investigate the benefits of relationships and examine their impact on their own and others' health and wellbeing	●	●	●	●
Analyse factors that influence emotions, and develop strategies to demonstrate empathy and sensitivity	●			●
Evaluate health information and communicate their own and others' health concerns	●	●	●	●
<i>Contributing to healthy and active communities</i>				
Plan and use health practices, behaviours and resources to enhance health, safety and wellbeing of their communities	○	○	○	○
Plan and implement strategies for connecting to natural and built environments to promote the health and wellbeing of their communities				
Investigate the benefits to individuals and communities of valuing diversity and promoting inclusivity	○	○		

Table 2: Correlation between the *SRE Program* and ACHPE's content strand 1: personal, social and community health

Table 2 also highlights that *Plan and implement strategies for connecting to natural and built environments to promote the health and wellbeing of their communities* (ACARA, 2016a) is not covered in the *SRE Program*. Elaborations detailed in the ACHPE regarding this thread relate to identifying natural local resources and understanding the positive impact of being outdoors and being active in a natural setting (ACARA, n.d.a, p. 47).

Evaluation of the SRE Program to the ACHPE Teaching Concepts

To determine whether the *SRE Program* meets the standards of the national guidelines, the *SRE Program* has been evaluated against the learning concepts in the ACHPE, using curriculum mapping as the evaluative tool. The *SRE Program* was mapped to the HP: Focus areas learning concepts for Year 3 to 10 and is shown in Table 3. As evident in the table, the *SRE Program* is consistent across three focus areas, as cited by ACARA (n.d.a). These include: (1) bullying, harassment, discrimination, and violence, (2) reproduction and sexual health and (3) celebrating and respecting difference and diversity in individuals and communities (ACARA, n.d.a). Discussions surrounding bullying, harassment, discrimination, and violence is evident across all four sessions in the *SRE Program* whereby discussions surrounding discrimination based on gender and sexuality are consistently explored. Sexual health is also consistently reinforced in concepts taught whereby the *SRE Program* provides educational material to encourage students to critically analyse social norms and behaviours. Lastly, the *SRE Program* ensures difference is respected throughout each of the lectures whereby slides containing positive messages such as ‘we have more in common across genders, than we have differences’ are included and repeated in the duration of the program.

While Table 3 highlights a strong correlation between the *SRE Program* the teaching concepts of the ACHPE, there are some notable differences. Table 2 highlights two concepts which have not be explicitly covered in the *SRE Program*; those being (1) people who are important to them and (2) puberty and how the body changes over time (ACARA, n.d.a). Further investigation of puberty in the ACHPE find that the word puberty is only mentioned once in the Years 7 and 8 curricula (ACARA, 2016a). During the Session 4, the *SRE Program* explores relationships values whereby students are prompted to evaluate their most important values or aspects of an intimate/romantic relationship. This does not however extend to relationships beyond intimate/romantic ones. The concept of puberty and how the body changes over time (ACARA, n.d.a) is not explicitly covered in the *SRE Program* either. The program briefly touches on this concept very slightly during the Session 2 when addressing pornography whereby the *SRE Program* mentions that sexual curiosity is a normal part of the developmental process, however this is not enough to warrant a correlation.

	Session 1	Session 2	Session 3	Session 4
Australian Curriculum: Health and Physical Education focus area: relationships and sexuality (Years 3 to 10)				
People who are important to them				○
Strategies for relating to and interacting with others	○	●	●	●
Assertive behaviour and standing up for themselves		●	○	○
Establishing and managing changing relationships (offline and online)	○		○	●
Bullying, harassment, discrimination and violence (including discrimination based on race, gender and sexuality)	●	●	●	●
Strategies for dealing with relationships when there is an imbalance of power (including seeking help or leaving the relationship)		●	●	○
Puberty and how the body changes over time				
Managing the physical, social and emotional changes that occur during puberty		○	○	○
ⁱ Reproduction				
Sexual health	●	●	●	●
Practices that support reproductive and sexual health (contraception, negotiating consent, and prevention of sexually transmitted infections and blood-borne viruses)	○	○	●	
Changing identities and the factors that influence them (including personal, cultural, gender and sexual identities)	●	○		
Celebrating and respecting difference and diversity in individuals and communities	●	●	●	●

Table 3: Correlation between the SRE Program and teaching concepts of relationships and sexuality in HPE: Focus areas

ⁱ Reproduction and sexual health are grouped together in the document HPE: Focus areas however this research has separated reproduction from sexual health to draw a distinction between the two.

Analysis of the Student Questions

As mentioned in Chapter 3, at the conclusion of each lecture, students were encouraged to submit questions regarding any queries they had on anything that was discussed during the lecture. These student questions are not disclosed in this research due to ethical reasons. Questions where the handwriting was incomprehensible were disregarded, as too were any inappropriate questions or comments. The remaining appropriate questions were analysed into 13 different categories. The categories and frequency of questions asked are shown in Figure 3.

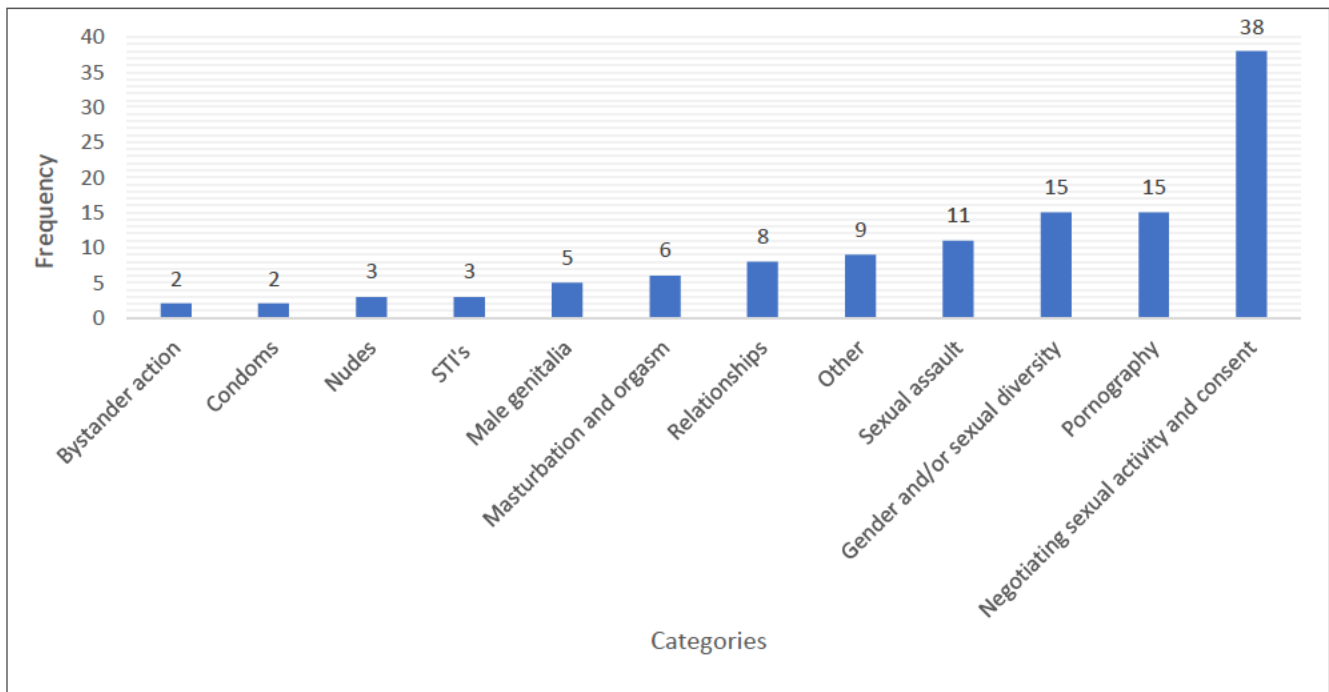


Figure 3: Frequency of student asked questions for each category

The results indicate that a high proportion of questions were submitted regarding queries on navigating sexual activity and consent. Of these 38 questions, 9 relate to understanding the laws associated with age of consent and the consequences of underage sex. Of the remaining 29 questions, almost half of these relate to skills-based knowledge questions such as how sexual activity is navigated and understanding when consent has properly been asked for and received. Sexual assault, gender and/or sexual diversity and pornography questions were also highly regarded by the students. Majority of the sexual assault questions are knowledge-based inquiries, querying the theoretical or practical understanding of concepts. Questions include queries regarding consequences for sexual assault, how to react to falsely accused sexual assault claims, and understanding the fine line between consent and sexual assault. Gender and sexuality questions primarily concerned sexual diversity; expressing sexuality, changing identities, navigating sexual feelings, and understanding why those feelings arise. One question asked whether their sexual feelings towards a friend is normal. In relation to porn, many students queried whether it was okay to watch pornography and to what extent does engagement with pornography become unhealthy.

The remaining questions concern relationships, male genitalia, masturbation and orgasms, STI's, nudes, condoms, bystanders' action and questions that do not belong in one of these categories are included in other. Of the questions relating to relationships, the questions predominantly focus on managing skills between intimate and romantic relationships. The questions concerning bystanders' action were skill-based questions also, inquiring how to properly intervene as an active bystander. Questions regarding condoms were largely related to condom availability. The category 'other' includes questions regarding social constructs of gender, improving mental health, using helplines effectively, the legal drinking age and whether sex is worth having in contemporary society.

Summary

The context evaluation provided the contextual factors of the *SRE Program*; the four-week program is delivered to males in a South Australia secondary school and focuses on media literacy, sexual and gender equality, consent communication and respectful relationships. The input analysis highlighted a similarity between the *Guidance* and the ACHPE, both emphasising curriculum developers to implement SRE that is relevant to the contextual factors in each school. Analysis of the *SRE Program* to the *Guidance* and the ACHPE highlighted the most prominent strength of the *SRE Program* that lies in the consistent approach to respecting and valuing gender and sexual differences. Finally, the analysis of the student questions during the process evaluation, found the most frequently asked questions to concern queries on navigating sexual activity and consent.

Chapter 5

Discussions

Introduction

This chapter discusses the key findings of Chapter 4. The structure and approach of the *SRE Program* present some similarities and differences to the frameworks of the *Guidance* and the ACHPE which are discussed. Following this, discussions concerning the strengths and limitations of the *SRE Program* are presented and include the discrepancies in teaching concepts; facilitating gender and sexual diversity; the development of help-seeking strategies and critical literacy skills; and navigating sexual activity and consent.

Structure and Approach of the SRE Program

The findings indicate that both the *Guidance* and the ACHPE urge curriculum developers to include parents in the development and implementation of SRE (ACARA, 2016a; UNESCO, 2018). Establishing this relationships not only enriches a healthy and supportive school environment but enables students to cement long-term learning objectives (ACARA, 2016a; UNESCO, 2018). This analysis supports the theory of researchers Ollis and Harrison (2016) and Thomas and Aggleton (2016) who imply that seeking cooperation from parents ensures coherency of information for the students between the schools and the parents. Including parents in SRE is also a feature of a whole-school approach which aids to increase the recognition of the importance of SRE (Burns & Hendriks, 2018). As the *SRE Program* incorporates the Parent Information Evening presentation into the implementation of SRE, this encompasses a whole-school approach. This suggests that the *SRE Program* has developed, what is argued to be, the most effective approach for promoting gender equality and respectful relationships (Robinson et al., 2017; Thomas & Aggleton, 2016).

Analysis of the *Guidance* and the ACHPE found that the approach to SRE should predominantly encompass a human rights-based approach (ACARA, 2016a; UNESCO, 2018). As the findings indicate, this approach promotes an understanding of universal human rights for themselves and others in relation to health, education, general well-being, information equality and non-discrimination (ACARA, 2016a; UNESCO, 2018). Similarly, the *SRE Program* encompasses the same approach. It achieves this through incorporating learning content and activities that teach students the fundamental knowledge, attitudes, and skills to developing healthy egalitarian relationships. The findings also indicate a prominent difference in the approach to the delivery of SRE in the *SRE Program*. The *SRE Program* explicitly mentions a sex-positive approach in which Pound et al. (2017) describe as being “open, frank, and positive about sex” (p. 5). This approach is however not mentioned in the *Guidance* or the ACHPE (ACARA, 2016a; UNESCO, 2018) . A sex-positive approach is reflected in the findings whereby the *SRE*

Program constantly celebrated and respected difference and diversity in individuals and communities (ACARA, n.d.a) as evident in Table 3. Evidently this approach contradicts traditional SRE that was delivered on the assumption of sexual abstinence until marriage (Goodson et al., 2003) however, this approach correlates to Ollis's (2016) argument that, by incorporating discussions of sex into the curriculum, the curriculum acknowledges that many young people become sexually active. A potential limitation to this approach could be the exclusion of people with religious views, believing in no sexual intercourse before marriage. However, considering the *SRE Program* is delivered in a Western society, where the average male first encounters sexual activity in secondary school (Chow et al., 2017), students with this faith background seems unlikely.

Discrepancy in Teaching Concepts

The findings highlight that teaching concepts including families, long-term relationships, HIV and AIDS stigma, and puberty are not covered in the *SRE Program*. As indicated by the program facilitator, the students already have access to education about puberty, reproduction, STIs and sexual and reproductive health (clinically speaking) and therefore the *SRE Program* does not cover this content. Despite this, these findings will still be discussed as they are significant findings.

A prominent difference between the *SRE Program* and the intended learning outcomes of the *Guidance* and the ACHPE are the types of interpersonal relationships each are referring to. Both the *Guidance* and the ACHPE refer to relationships that encompass all interpersonal relationships including families, friendships, romantic relationships, and long-term relationships (UNESCO, 2018). The *SRE Program*, however, is limited in context to developing healthy relationship skills, as it predominantly focuses on intimate and romantic ones. The findings indicate that the questions submitted by the students concerning relationships tend to focus on managing skills between intimate and romantic relationships. This indicates two proposals. Firstly, the *SRE Program* has effectively enabled students to develop the knowledge and attitudinal-based objectives of intimate and romantic relations yet the skill-based learning objectives have the potential to be developed further (recommendations for this are provided in Chapter 6). Secondly, as these student questions do not query family, friendships, or long-term relationships, this reinforces that the *SRE Program* reflects and is relevant to the students. Through incorporating teaching concepts that align with the attitudes and behaviours embedded in young people (McCall et al., 2020), this highlights that the *SRE Program* is relevant to the cultural context; which is an aspect that the *Guidance* and the ACHPE emphasise the need for in SRE.

Concepts including HIV and AIDS stigmas and forced marriages are not covered in the *SRE Program*. In Australia, the prevalence of HIV is low (Jones & Mitchell, 2014) and the occurrence of forced marriages are scare (Lyneham & Bricknell, 2018). Consequently, the researcher argues it is not critical for the *SRE Program* to address these concepts as they are not extremely relevant to Australia. By acknowledging the cultural factors where the students live, the *SRE Program* recognises the students' needs and instead focuses on more relevant concepts for the students. This demonstrates that the *SRE Program* is being culturally relevant which both the *Guidance* and the ACHPE argue curriculum developers to adhere to (ACARA, 2016a; UNESCO, 2018).

Another finding is that the *SRE Program* has a strong focus on men's mental health, the portrayal of masculinity in the media and pornography, and coercion. Again, the analysis indicates a reason for this could be explained by what is deemed culturally relevant. These topics are predominantly directed at males which is in line with the argument made by Meenagh (2020). She proposes that hegemonic masculinity needs to be addressed in SRE and that males need to be provided with the opportunity to learn how to navigate their sexual boundaries (Meenagh, 2020). This aligns with the educational setting of the *SRE Program* which is designed to be delivered to males. If the audience of the *SRE Program* included females, perhaps emphasis would instead be directed towards concepts such as body integrity and teaching refusal skills. This relates to recommendations mentioned in Chapter 6.

The findings indicate that puberty was not covered in the *SRE Program*. Furthermore, further analysis found the word puberty to be mentioned only once in the Year 7 and 8 curricula (ACARA, 2016a); and only two out of the twelve elaborations regarding sexuality and relationships, for Year 3 to 10, focus on puberty (ACARA, n.d.a). This finding seems prevalent as peer reviewed articles regarding puberty, in the context of SRE for middle and secondary years, is slim. Lee et al. (2018) argues that withholding teaching puberty in SRE is a flaw, however other researchers' perspective of puberty in SRE is limited. Literature instead tends to focus on sexual knowledge associated with the social and cultural norms of gender and sexual constructs in the comprehensive approach to SRE (Meenagh, 2020; Szirom, 2017; UNESCO, 2018). Seemingly, the concept of puberty is becoming undermined in SRE.

Gender and Sexual Diversity

The *SRE Program* consistently celebrates and respects difference and diversity in individuals as indicated in the findings. This is achieved as the *SRE Program* incorporates activities that specifically focus on recognising and respecting sexual diversity. These activities enable students to explore ethical concepts of discrimination based on sexuality and the implications of community attitudes and assumptions towards sexual diverse people. This effectively allows students to reflect on how their values can impact their beliefs and gender bias (UNESCO, 2018). This finding correlates with addressing the argument of Szirom (2017), who argues for disrupting the stigma and double standards of sexual behaviour towards gender. By exploring inclusivity and diversity, students have the opportunity to develop values such as empathy and equality which contribute to enhance others health and wellbeing (ACARA, 2016a; UNESCO, 2018).

Help-Seeking Strategies

Both the *Guidance* and the ACHPE recommend students to develop help-seeking strategies in SRE. Developing help-seeking strategies are important for promoting inclusivity, equality, and respectful relationships (UNESCO, 2018). Previous research has found that males are often less likely

to seek help for mental health problems (Haavik et al., 2017) highlighting the necessity for the *SRE Program* to address seeking help. The findings show that finding help and support is a consistent across all four sessions in the *SRE Program* which is a prominent strength. This is achieved as the *SRE Program* provides accurate and reliable referral support services for sexual, reproductive, and mental health, that are relevant to South Australia. This enables individuals to develop an understanding of where to access support for themselves. The *SRE Program* also provides students with the opportunity to develop the skills to find websites and services that young people can access for health concerns, LGBTIQ and relationship support. Additionally, the *SRE Program* promotes the bystander intervention method for violence prevention in Session 3. The findings of the student questions, that concern bystanders' action, are skill-based inquiries. This suggests that that the *SRE Program* could strengthen practicing and applying skills to effectively seek help. This suggestion however is not reliable due to the lack of data on the student questions concerning the bystanders' action, which include only two questions.

Critical Literacy Skills

The *SRE Program* heavily dedicates time into developing critical literacy skills which is one such skill that is highlighted in both the *Guidance* and the ACHPE (ACARA, 2016a; UNESCO, 2018). Developing critical literacy skills are especially important in today's society where sex is becoming a cornerstone of commercialism (Cook & Wynn, 2020). Session 1 predominantly focuses on the representation of gender, sexuality, and relationships in the media to promote critical thinking skills. Additionally, Session 1 allows students explore discrimination embedded in cultural norms of sexually diverse people. In doing so, the *SRE Program* progressively attempts to deconstruct the gendered double standards that are embedded in culture (Szirom, 2017). These findings indicate that the *SRE Program* undoubtedly provides students with the opportunity to develop critical literacy skills, in relation to addressing the impact of gender and sexual roles and stereotypes in relationships (UNESCO, 2018), in sexually explicit media.

During Session 2, the *SRE Program* focuses on evaluating pornography which aligns to the teaching concepts of the *Guidance* and the ACHPE (ACARA, 2016a; UNESCO, 2018). Incorporating teaching concepts concerning pornography reflects that it is culturally relevant given the male audience of the *SRE Program*. This analysis aligns with the allegation that Scarcelli (2015) makes, claiming that it is typically more socially acceptable for males to use pornography in Western society. The results indicate that the *SRE Program* evaluates pornography in term of facts, relationships, and sexual attitudes; impact on sexual expectations and relational templates; the portrayal of people and masculinity in pornography; violence in pornography; and pornography myths. From this analysis, the *SRE Program* effectively distinguishes between myths and facts of pornography (UNESCO, 2018); clarifies behaviours that many adults do not perceive as mainstream (Lim et al., 2017); deconstructs gender ideologies carrying the associated belief of hegemonic masculinity (Ellis, 2018); and encourages students no to use pornography as a source of sexual information, whereby developing critical literacy

skills. However, as the findings indicate, many of the student questions regarding pornography query why people watch it and whether becoming sexually aroused and masturbating to pornography is appropriate. These questions are knowledge-based inquiry questions prompting that the *SRE Program* could develop further knowledge-based learning outcomes.

Navigating Sexual Activity and Consent

The findings indicate that the *SRE Program* passively addresses strategies to promote health, safety, and well-being. This includes proposing and practicing strategies for celebrating safely, including assertiveness and refusal skills (ACARA, 2016a). Aligning to a human rights-based approach to SRE, the curriculum should prompt students to investigate and select strategies to promote health, safety, and wellbeing which includes navigating sexual activity (ACARA, 2016a; Gilbert, 2018; Jozkowski et al., 2017; UNESCO, 2018). The *SRE Program* addresses sexual activity by defining and discussing implications of coercion and by instilling the importance of consent in Session 3. According to the learning objectives in the *Guidance*, consent is first introduced in the age group 12-15 years which aligns to the audience of the *SRE Program*. This coincides with the argument of Willis et al. (2019) who believe that consent should be taught at an early age and before the students become sexually active themselves. The *SRE Program* teaches that consent must be mutual, continuous, required for everything, definite and voluntary; and of course, never involve pressure. This approach is similar to those observed in peer reviewed articles that call for consent to be taught as affirmative, voluntary and conscious (Gilbert, 2018; Meenagh, 2020).

Socioeconomic factors affecting negative consent behaviours are addressed in the *SRE Program*. This is because teaching concepts consistently reflect on the way in which social behaviours influence students' attitudes. Students have displayed acknowledgement of the importance of giving and perceiving sexual consent as evident in the questions they asked regarding navigating sexual activity. This indicates that the students have developed an attitudinal awareness concerning consent. This might suggest that affirmative consent has been taught, according to the researchers Jozkowski et al. (2017). However, based on the findings of the analysis of the student questions, a more plausible explanation is that students have not firmly developed affirmative consent communication skills.

Approximately a third of the questions about negotiating sexual activity and consent concern skill-based related inquiries. Even though the *SRE Program* provides students with the opportunity to develop critical awareness skills to navigate whether consent was given, in Session 3, the student questions suggest the need for enhancing assertiveness and refusal skills. It is important that these skills are developed as in the absence of clear communication, the uncertainty of obtaining a clear and unambiguous consent can lead to negative experiences, including unwanted sex, sexual assault, and unsafe sex (Richmond & Peterson, 2020; Willis et al., 2019). Perhaps the underlying issue of effectively teaching sexual consent and communication skills lies in the inconsistencies regarding the definition of sexual consent (Muehlenhard, Humphreys, Jozkowski, & Peterson, 2016). Laws in South Australia and

the *Guidance* both reinforce that consent must be *explicit* (UNESCO, 2018; Youth Law Australia, 2020) however what this exactly entails is ambiguous. Consequently, student questions implying fears of having sexual intercourse because of false rape allegations, is sadly unsurprising. Further research is needed to establish effective consent communication in SRE.

Summary

The *SRE Program*, the *Guidance* and the ACHPE all recognise SRE to be delivered on a human-rights based approach. Although there are some discrepancies in the teaching concepts provided in the *Guidance* and the ACHPE to the content covered in the *SRE Program*, the contextual factors of the school may provide reasoning for these not being addressed. The main highlights from this discussion are that the *SRE Program* has allowed students to develop critical literacy skills and an attitudinal awareness regarding the importance of consent.

Chapter 6

Recommendations and Conclusion

Introduction

The final chapter outlines a description of this research which highlights the importance of SRE and the direction of the program evaluation that led to answering the research questions. Recommendations are provided, addressing the limitations of the *SRE Program* that were discussed in Chapter 5; they are provided as suggestions of resources which are currently implemented in Australia and therefore comply to the ACHPE; exceptions are drawn to the reader's attention. Following, recommendations for future research are provided. The chapter then concludes by highlighting the importance of this research and reveals the most important statements derived from conducting the program evaluation.

Description of the Research

SRE is critical for young people as it empowers individuals to engage in health and respectful relationships, whereby enhancing their own and other's health and wellbeing. This instils the need for effective programs to be implemented in schools. To address this problem, this research conducted an evaluation of the *SRE Program*, that was implemented in an all-male, Year 8, South Australian secondary school. This research began by examining literature on SRE in schools. From an analysis of literature regarding SRE, it is evident that controversial concepts such as pornography, consent communication and implementing a cultural shift on prevalent cultural norms was among the most prominent topics of discussions. These topics argue the need for cultural norms of gender and sexual constructs in society to be analysed through a comprehensive approach to SRE.

Evaluation of the *SRE Program* was conducted using two documents that assist SRE curriculum developers. On the international level, UNESCO's (2018) *Guidance* was used as it services the globe by providing best evidence and practices for delivery of SRE. On the national level, ACARA's (2016a) ACHPE document was selected as it provides the foundation for all teaching standards across the nation to adhere to. This approach provides insight into how program evaluations can be conducted to deliver beneficial findings.

A combined analysis of the *SRE Program* to the *Guidance* and the ACHPE highlighted similarities and differences in their aims, approaches and teaching concepts. One of the main differences, as highlighted by the findings, is grounded in the context of the school. SRE must be relevant to the context in which it is implemented (ACARA, 2016a; UNESCO, 2018). This is evident in the *SRE Program* as it incorporates men's mental health, the portrayal of masculinity in the media and pornography, and

coercion into the curriculum which are relevant to males. Consequently, the *SRE Program* does not incorporate all the teaching concepts that the *Guidance* recommend. However, this is not alarming as the *Guidance* essentially services the globe, by providing universal evidence and practices (UNESCO, 2018) for SRE across the nation. By gearing the curriculum to the needs and interest of the students and presenting SRE from a foundation that serves promoting the health and well-being of the students, the *SRE Program* has arguably met the standards of the international and national curriculum guidelines.

One of the most prominent strengths of the *SRE Program* lies in the consistent approach to respecting and valuing gender and sexual differences. This is achieved as the *SRE Program* incorporates activities that specifically focus on recognising and respecting sexual diversity; allows individuals to explore ethical concepts of discrimination based on sexuality; and addresses the implications of community attitudes and assumptions of sexual diverse people. The *SRE Program* effectively provides student with the opportunity to develop an awareness to challenging discrimination and for advocating their rights. Additionally, by addressing that discrimination and gender-based violence are displays of unequal power differences in relationships, the *SRE Program* allows students to develop an awareness of inequalities in society, thereby challenging cultural norms of gender and sexual inequalities.

Recommendations for the SRE Program

The extent to which knowledge, attitudinal and skills-based learning objectives were met in the *SRE Program* sparked the researchers' interest. To develop a robust understanding of pornography, the *SRE Program* could provide a definition of pornography, outline the reason for the existence and the relevant laws associated to pornography. By incorporating a definition of pornography, such as "pornography is printed or visual material containing explicit description or display of sexual organs or activity, intended to stimulate sexual excite" (Government of Western Australia, n.d.), this acknowledges that some students in the classroom are not aware of pornography yet ever purposely viewed it. Educating students that it is legal for people under the age of 18 to view pornography involving adults (Legal Services Commission, 2020) could elude students creating a negative association with pornography use.

As touched upon in the discussion, it is uncertain as to what extent the *SRE Program* provides the necessary skills for the students to seek support. The researcher suggests skill-based learning objectives of seeking support could be improved by exploring life-long skills associated to help-seeking strategies. This could be achieved by exploring help-seeking scenarios young people encounter and sharing strategies for dealing with each situation; practicing different communication techniques to persuade someone to seek help; discussing emotional responses to interactions within relationships; and proposing strategies to seek help (ACARA, 2016a). Help-seeking resources as recommended by the researcher include activities titled *Assertive help-seeking: What can you do?* (Department of Education and Training, 2016, pp. 60-61) and *Peer support texts* (Department of Education and Training, 2016, pp. 61-62). These resources enable students to practice different ways to communicate concerns about their health (ACARA, 2016a) and provide support to those seeking help. This is especially important for

a male dominated audience as males are more reluctant than females to talk about their feelings (Ellis, 2018). Additionally, these resources incorporate developing interpersonal relationships skills with family, friends, and peers therefore enhancing the *SRE Program* to explore concepts of relationships past predominantly intimate and romantic ones.

Approximately a third of the questions submitted by the students concerning negotiating sexual activity and consent specifically queried navigating the distinction between consensual and non-consensual sex. The researcher recommends that the *SRE Program* could expand by presenting student with the opportunity to develop skills related to beginning a discussion with a partner and what they are to say in the conversation regarding asking for consent; a few activities recommended include activities by The Australian Research Centre in Sex, Health and Society (2015a) which include *Non-verbal communication* (pp. 2-4) and *Checking-in relay* (pp. 5-6). Additionally, deFur (2016) provides two lesson plans which include practicing communicating enthusiastic consent, these however are implemented in America so alignment to the ACHPE standards are required.

Lastly, as considered relevant in the eyes of the research, the *SRE Program* could benefit by broadening the scope of relationships to include aspects of peer and/ or family relations. To incorporate family and peer scenarios into the teaching concepts of power and privilege, the researcher recommends the resource titled *Positive and negative uses of power and privilege* (Department of Education and Training, 2016, pp. 80-81). This activity allows students to identify and consider both the positive and negative ways that power can be expressed and experiences in different relationships (Department of Education and Training, 2016). Alternatively, the research recommends the resource by The Australian Research Centre in Sex, Health and Society (2015b) titled *Standing up for yourself* (pp. 21-23), with a particular emphasis on the complementary video (Vimeo, 2020). These resources examine the power in relationships between friends and then extends to recognising power within romantic relationships.

Recommendations for Future Research

This research has highlighted the complexities of teaching consent to young people. The reality of obtaining a clear and affirmative consent is complex and challenging. Consent is an important topic to highlight in SRE as it acknowledges that young people are talking engaging in sexual activity. To better understand how to implement teaching consent, future studies could provide further guidance on the best teaching strategies to effectively teach students to articulate an informed decision. With a clear understanding of consent, young people will be able to engage in healthier and more rewarding sexual experiences.

While this study analysed student questions it would be beneficial to conduct a survey to monitor the student's outcomes and shifts in perspectives. The findings of this research doubted whether the students have developed necessary skills to communicate affirmative consent and to seek

help. Conducting a survey would aid to determine the effects of long-term attitudes and behaviours and assist to provide feedback on the curriculum and activities.

This research was conducted using an intrinsic case study approach which provided insightful interpretations of the *SRE Program*. As mentioned previously, the KSCPC is implemented in South Australia and is complementary to SRE; however, access is limited to this document. By attaining access to this document and evaluating the *SRE Program* to the KSCPC, this will allow for researchers to determine whether information between the two are coherent and would provide evaluation of the *SRE Program* to documents at the state level. Another method of program evaluation could entail comparing the *SRE Program* to other SRE programs, whereby developing a different approach to the program evaluation in this research. Similar program could include ones that are either implemented in Australia or other countries, such as Sweden, Norway, and the Netherlands (UNESCO, 2018), that have long standing comprehensive SRE programs in schools.

Conclusion

As we approach the third decade of the twenty-first century, there has never been a more renowned time for advocating equality among gender and sexual differences. This revolutionary time sees the social constructs of the masculinity be torn away from traditional norms of male dominance. Addressing unequal power differences in society and in relationships allows young people to navigate healthy decisions to engage in positive sexual experiences. To achieve this requires addressing cultural norms that associate to inequalities between gender and sexuality in a SRE that is embedded in a gender equality framework. This research has shown how one such SRE program has effectively challenged cultural norms of gender and sexuality differences and may provide guidance for other curriculum developers to do the same, because, at the end of the day, a life without discrimination, coercion and sexual violence is critical for every person's empowerment.

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Appendices

Appendix 1: CIPP Evaluation Model

To assist in developing the conceptual framework used in this research, the CIPP (content, input, process and product) evaluation model as developed by Stufflebeam (1983) was used. A detailed version of the CIPP model directly extracted from Stufflebeam (2000) is presented in Table 4 as illustrated on the following page.

	<i>Context Evaluation</i>	<i>Input Evaluation</i>	<i>Process Evaluation</i>	<i>Product Evaluation</i>
<i>Objective</i>	<ul style="list-style-type: none"> to define the institutional/ service context to identify the target population and assess its <i>needs</i> to identify pertinent <i>assets</i> and <i>resource opportunities</i> for addressing the needs to diagnose <i>problems</i> underlying the needs to judge whether <i>goals</i> are sufficiently responsive to the assessed needs 	<ul style="list-style-type: none"> to identify and access <i>system capabilities</i> and alternative service <i>strategies</i> to closely examine planned <i>procedures, budgets, and schedules</i> for implementing the chosen strategy 	<ul style="list-style-type: none"> to identify or predict <i>defects</i> in the procedural design or its implementation to provide information for the programmed decisions to record procedural events and activities for later analysis and judgement 	<ul style="list-style-type: none"> to collect descriptions and judgements of <i>outcomes</i> to relate outcomes to <i>goals</i> and to <i>context, input, and process information</i> to interpret the effort's <i>merit and worth</i>
<i>Method</i>	<ul style="list-style-type: none"> by using such methods as survey, document review, secondary data analysis, hearings, interviews, diagnostic tests, system analysis, and the Delphi technique 	<ul style="list-style-type: none"> by <i>inventorying</i> and <i>analysing</i> available human and material resources by using such methods as <i>literature search, visits to exemplary programs, advocate teams, and pilot trials</i> to identify and examine promising solution strategies by <i>critiquing</i> procedural designs for relevance, feasibility, cost, and economy 	<ul style="list-style-type: none"> by <i>monitoring</i> the activity's potential procedural barriers and remaining alert to unanticipated ones by obtaining specified <i>information for programmed decisions</i> by <i>interviewing</i> beneficiaries, <i>describing</i> the actual process, maintaining a <i>photographic record</i>, and by continually <i>interacting</i> with and observing the activities of staff and beneficiaries 	<ul style="list-style-type: none"> by operationally defining and <i>measuring</i> outcomes by <i>collecting judgements</i> of outcomes from stakeholders by performing both <i>qualitative</i> and <i>quantitative analyses</i> by <i>comparing outcomes</i> to assessed needs, goals, and other pertinent standards
<i>Relation to decision making in the change process</i>	<ul style="list-style-type: none"> for deciding on the <i>setting</i> to be served for defining <i>goals</i> and setting <i>priorities</i> for surfacing and addressing potential <i>barriers</i> to success for providing assessed needs as a <i>basis for judging outcomes</i> 	<ul style="list-style-type: none"> for selecting <i>sources of support</i> and solution <i>strategies</i> for explicating a sound procedural <i>design</i>, including a budget, schedule, and staffing plan for providing a <i>basis for monitoring and judging implementation</i> 	<ul style="list-style-type: none"> for <i>implementing and refining the program design and procedures</i>, i.e., for effecting <i>process control</i> for logging the actual process to provide a <i>basis for judging implementation and interpreting outcomes</i> 	<ul style="list-style-type: none"> for deciding to <i>continue, terminate, modify, or refocus</i> a change activity for presenting a clear <i>record of effects</i> (intended and unintended, positive, and negative) for <i>judging</i> the effort's merit and worth

Table 4: Four types of evaluation taken from Stufflebeam (2000, p. 302)