YOUTH WORKERS' EXPERIENCE REGARDING SEXUAL AND REPRODUCTIVE HEALTH EDUCATION IN SECONDARY SCHOOLS

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Abstract: The alarming prevalence of HIV/AIDS and unwanted pregnancy among learners is of considerable concern. This study aimed to explore the barriers encountered by youth workers in implementing sexual and reproductive health education (SRHE) in secondary schools South Africa in the Western Cape province of South Africa and also to explore the benefits these youth workers bring. Qualitative methods and individual interviews were used to gather data. The findings show that cultural socialisation remains a major barrier to the effective implementation of SRHE by youth workers. Positive outcomes from the presence of the youth workers in schools include an increase in learners' self-esteem and greater acceptance of moral values such as good citizenship and respect for others regardless of differences. Accordingly, this study recommends integrating youth workers into the schools by adding SRHE to the curriculum and having it implemented by them. When such programmes are set up, the role of youth workers in schools should be clearly articulated to avoid conflict between teachers and youth workers.

Keywords: youth workers, sexual education, reproductive health education, unwanted pregnancy, HIV/AIDS

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Worldwide, there is concern regarding unwanted teenage pregnancy, rates of HIV/AIDS, and the quality of sexual and reproductive health education (SRHE) that learners receive (United Nations Population Fund, 2023). In their work exploring the views of British young people on SRHE, Measor and colleagues (2000) found that a high proportion were involved in sexual activities at a young age. In a study conducted in urban slums in South Africa, approximately 44% of young males between the ages of 14 and 24 reported engaging in sexual activity using condoms; significantly, 46.3% of all youth said they had engaged in sexual activity with more than one partner (Kamndaya et al., 2014). Gevers and colleagues (2013) found that both out-of-school and school-going youth between the ages of 14 and 16 in Cape Town, South Africa were already engaged in sexual activity. Negative consequences of early sexual activity among learners include sexually transmitted infections, abortions, and even suicide (Badillo-Viloria et al., 2020). Mturi (2015) noted that a lack of knowledge among teen girls regarding the physiology of their bodies is a main contributor to teen pregnancy. Teen girls who are living with HIV/AIDS who attend schools in Cape Town are frequent victims of shame and social stigma (Bhana & Ngabaza, 2012). In order to address risky sexual behaviour among learners, several countries have introduced SRHE and reproductive health-friendly services. Studies conducted by Bay-Cheng (2003) and Fentahun et al. (2012) concerning SRHE show that it contributes to providing learners with knowledge about their sexuality. Mturi and Bechuke (2019) argued that in spite of the importance of SRHE, teachers in schools in Mahikeng, South Africa, are not paying attention to this subject matter, with the result that learners lose interest. In addition, they found a lack of good working relationships between schools and the professional nurses who regularly come to the schools and are able to clarify some matters better than teachers. The high rates of HIV/AIDS and unwanted pregnancy among learners in South Africa are of great concern regarding the development of young people and are likely to affect the South African economy (South African Department of Health, 2023).

This study aimed to explore the barriers youth workers face in the implementation of SRHE in secondary schools in the Western Cape province of South Africa, as well as the benefits thereof. To my knowledge, this is the first study that has attempted to understand the lived experiences of youth workers implementing SRHE in secondary schools in the Western Cape. It is envisaged, therefore, that this study will add to a better understanding of both barriers and benefits. Previous studies, such as Kagola and Notshulwana (2022) and Peskin et al. (2011), looked at the experience of teachers in SRHE, but neglected the involvement of youth workers, even though the latter are experienced in working with youth directly, in both formal and informal education, to curb anti-social behaviour, including risky sexual behaviour.

Literature Review

According to Alldred (2017), youth workers in SRHE in the United Kingdom share information to help young people make healthy choices about their sexuality and sex practices. A Minnesota Department of Education (2014) working paper stated that youth workers in SRHE use creative methods to deliver content that inspires youth to make well-informed decisions. Eisenberg et al.'s (2013) study on the barriers to providing SRHE in Minnesota emphasised the need to develop curriculum that can provide SRHE to learners. This is especially important since, according to a Nigerian study conducted by Nmadu et al. (2020), talking about or engaging in SRHE remains taboo for some youth, particularly those affiliated with religious institutions.

Both the Nigerian Federal Ministry of Health (2017) and Iyer et al. (2014) study of SRHE in Asia indicated that cultural beliefs can be barriers to implementing sexual education. In public schools in Texas, professional social services are not allowed to enter schools to provide SRHE; however, teachers encounter difficulties when they attempt to deliver SRHE on their own, such as a lack of support from the school and parental opposition (Leos & Wiley, 2019). In their study conducted in Ghana, Kenya, Peru, and Guatemala, Keogh et al. (2018) revealed that there is a lack of coordination between schools and the nongovernmental organisations (NGOs) responsible for youth development regarding who should deliver SRHE; in addition, NGOs working with youth receive little funding to deliver SRHE, hampering its successful implementation. Social service professionals (i.e., school social workers) may be called upon to assist in providing SRHE in schools using the abstinence-based approach; however, Sosa's (2020) study of Texas schools that take this approach contended that it does not work, as there was no reduction in teen pregnancies.

In their study of the effectiveness of sexuality training in primary schools in Tanzania, Bilinga and Mabula (2014) pointed out that learners' sexual knowledge came mostly from sources outside of school; they asserted that teachers lack the training to deliver adequate SRHE. In the United States, Reynolds et al. (2021) conducted a pilot study of a SkillFlix® training video aimed at developing teachers' and community educators' skills in promoting SRHE and found an improvement in dealing with LGBTQ inclusivity, and in answering sensitive questions. Many studies, including Barr et al. (2014) and Eisenberg et al. (2013) in the United States, and Wang et al. (2015) in the Bahamas, have found that curriculum development and targeted teacher training are needed to improve SRHE. According to MacDonald et al. (2011), some Canadian learners do not regard their teachers as suitable instructors for sexual education, while Kimmel et al. (2013) said that teachers' inability to communicate SRHE effectively led to African American learners undermining them. Joseph et al.'s (2021) study shows that some teachers in South India believed that including SRHE in the curriculum would promote, rather than discourage, premarital sexual behaviour among learners.

A knowledge gap was identified in previous studies in SRHE. Most of the studies I reviewed looked at the challenges faced by teachers in delivering the subject matter and paid little attention to the challenges youth workers face as an emerging profession that works with schools in the

prevention of risky sexual behaviour among youth. This study sought to fill that gap by highlighting the barriers faced by youth workers in implementing SRHE in secondary schools. The need for youth workers, either as full-time school staff or as volunteers, can be expected to last into the foreseeable future due to the incidence of HIV/AIDS and unplanned pregnancy among teenagers in South Africa. This study aimed to explore the barriers experienced by youth workers in implementing SRHE in secondary schools in the Western Cape, and the benefits these workers provide. The research questions are:

- Which barriers to implementing SRHE in secondary schools are encountered by youth workers in the Western Cape?

- What are the benefits of involving youth workers in the implementation of SRHE in schools?

Method

Research Design

To gain a better understanding of the challenges that youth workers experience in implementing sexual and reproductive health education (SRHE) in secondary schools, the present study used the qualitative research method. The qualitative method is helpful in understanding a complex issue from the participant's viewpoint (Hossain, 2011). Due to the nature of this study, a phenomenological research design was used because it enabled the researcher to understand everyday social issues through the participants' retelling of their perceptions or lived experiences.

Participants

This study was carried out in the Western Cape province of South Africa, where the main language is Afrikaans. Fifteen isiXhosa youth workers between the ages of 18 and 35 who were stationed in schools were recruited purposively to participate in this study. Purposive sampling (augmented by snowball sampling as described below) was essential in selecting participants who understood the aims of the study and had knowledge about the subject matter. Each of the youth workers participating in this study had more than six months lived experience of implementing SRHE in schools and in youth development centres that are part of after-school programmes managed by NGOs. The demographic characteristics of the participants are presented in Table 1.

Access to Participants

Information about possible participants was sourced from the NGOs that are responsible for placing youth workers in secondary schools to implement SRHE. Thereafter, the researcher contacted those who were eligible and explained the aims of the study. Of those contacted, 15 agreed to participate.

Ethical Considerations

Ethical considerations, such as voluntary participation and confidentiality (the non-disclosure of their names and organisations), were explained to the participants and their informed consent was obtained. Trustworthiness was a consideration in this study: the researcher received permission to conduct the interviews from the organisations to which the participating youth workers belonged. Accordingly, ethical clearance was obtained from the Tshwane University of Technology Research Ethics Committee (reference number FCRE/PE/STF/2021/11).

Table 1. *Demographic Characteristics*

Pseudonym	Gender	Age	Language	Education
Youth worker 1	Male	21	isiXhosa	Matric
Youth worker 2	Male	18	isiXhosa	Matric
Youth worker 3	Female	23	isiXhosa	Matric
Youth worker 4	Male	35	isiXhosa	Diploma in Business Management
Youth worker 5	Female	32	isiXhosa	Social auxiliary work
Youth worker 6	Female	34	isiXhosa	Matric
Youth worker 7	Female	30	isiXhosa	Matric
Youth worker 8	Female	20	isiXhosa	Social auxiliary work
Youth worker 9	Female	28	isiXhosa	Matric
Youth worker 10	Female	31	isiXhosa	Matric
Youth worker 11	Male	26	isiXhosa	Matric
Youth worker 12	Female	32	isiXhosa	Matric
Youth worker 13	Male	34	isiXhosa	Matric
Youth worker 14	Female	31	isiXhosa	Matric
Youth worker 15	Female	28	isiXhosa	Matric

Data Collection

Individual interviews were used to gather rich, in-depth information concerning the subject matter. Due to COVID-19, in-person interviews were not possible. Interview data were collected either by telephone or over the internet; 10 interviews were collected through WhatsApp, an instant messaging service, and five through telephone conversations with the participants. In the recorded telephone interviews, the researcher gathered data through individual conversations with the youth workers. In other cases, the researcher sent interview questions to the participants through WhatsApp, an instant messaging service. The researcher was available to provide clarity about the questions when necessary. This initiative was effective and helped to reach more participants because the participants were able to forward interview questions to other youth workers who were implementing SRHE in secondary schools (snowball sampling). After answering the WhatsApp individual interview, participants sent their responses to the researcher.

Data Analysis

A thematic approach, as described by Braun and Clarke (2006), was used to analyse the data collected. All the steps employed in thematic analysis — familiarisation, coding, generating themes, reviewing themes, defining and naming themes, and writing up — were followed. Familiarisation: The recordings of the telephone interviews were listened to and transcribed verbatim; the written WhatsApp texts were read and then transcribed. During the telephonic interviews, some participants expressed themselves in isiXhosa. The researcher translated these responses into English. The transcribed data were read through to check for meaningfulness in terms of what the study intended to achieve. Coding: The initial codes were generated. The researcher paid attention to the data items that could answer the study questions, and assembled a coding manual. Generating themes: The researcher combined the codes into potential themes significant to this study. Reviewing themes: The researcher reviewed all the relevant themes, checking them against the data. Defining and naming themes: The researcher clearly defined the themes, and chose names for them that would make sense to the readers. Writing up: The researcher wrote up the final report. Thematic analysis was important and easy to use in this study because it did not involve any use of theory to analyse these data.

Results

The data analysis allowed the researcher to identify the barriers that youth workers encountered when implementing SRHE in secondary schools in the Western Cape and the benefits of involving them in the implementation of SRHE.

Barriers to the Implementation of SRHE in Schools

In this section, the barriers youth workers faced when implementing SRHE in secondary schools are examined. The following themes emerged: mistreatment by teachers, cultural socialisation, and inadequate training.

Mistreatment by Teachers

Most traditional teachers, as portrayed by the participants, still hold the view that the school environment is meant for teaching and learning academic subjects only. Extracurricular activities that are meant to contribute to the development of learners are not given priority. A few participants interviewed in this study cited the negative experiences they had had with some schools because of the way some teachers had treated them. The participants felt uncomfortable about implementing SRHE in these schools, particularly in the presence of the teachers who had mistreated them. Furthermore, a few participants emphasised that some teachers did not regard them as having an important role to play in promoting youth's health in schools, regarding them instead as having no meaningful qualifications or experience with regard to providing SRHE:

> Sometimes we have teachers regard us with scepticism, ask about our training and
> qualifications in health. There was a time when I had a teacher who told me I must

go back to school and get a better career rather than doing what I am doing. This often makes me feel uncomfortable. (Youth Worker 3)

Teachers always undermine us, regard us with suspicion, and see us as people who can influence learners negatively. I think teachers need to accept that they do need help from another professional in delivering sexual education in schools. (Youth Worker 1)

When participants felt that teachers did not trust their knowledge and training concerning SRHE, they felt uncomfortable in the classroom. For the development of learners on the school's premises, it is essential that teachers acknowledge the important role that other stakeholders in youth development can play in addressing youth's risky sexual behaviour.

Nevertheless, one participant also spoke of the more positive relationship he had with Life Orientation teachers, especially with one such teacher who had worked with various nonprofit organisations (NPOs) before becoming a teacher. Youth worker 4 declared, "I never had any problems with some teachers when I was promoting sexual and reproductive health education in schools. I had a good working relationship with one L.O. teacher who worked with vulnerable youth before he became a teacher." It is thus clear that not all teachers have a bad attitude towards youth workers in schools. Furthermore, teachers with an in-depth understanding of youth development were more positive about working with youth workers in schools than were teachers with no experience in the nonprofit sector.

Cultural Socialisation

Regardless of the introduction of SRHE in schools, and of South African television programmes that seek to promote sexual education (e.g., "Soul Buddyz"), cultural socialisation remains a major barrier to the successful implementation of SRHE. A few participants noted that cultural socialisation prevented some of the learners from becoming fully engaged in the subject matter. According to Youth Worker 6:

When we engage learners in the classroom, some learners from a Christian background were reluctant to participate, particularly when we spoke about sex and topics of homosexuality because these beliefs are in conflict with their upbringing. This makes some of them feel uncomfortable and become upset sometimes when we go to the schools.

Some of the learners in schools hate sexual education because they believe it promotes early risky sexual behaviour rather than seeing it as a preventive method. Some learners report their schools to their parents. Teachers have to explain to parents the importance of sex education. (Youth worker 9)

On the other hand, some youth workers did not find that cultural socialisation was a barrier to successful teaching:

> I have always worked well with my learners; my lesson is full of engagement; learners enjoy sexual education and see it as a way of empowering them to stay away from sexual activities at a young age. (Youth worker 7)

Cultural socialisation, however, often caused learners to have mixed feelings about, and negative experiences with, SRHE, with youth workers often struggling to teach effectively because of the various religions, beliefs, and personalities of learners. However, in many cases a positive outcome was achieved regarding delivering SRHE because learners were able to engage meaningfully in the classroom when youth workers were present.

Inadequate Training

The participants stated that their lack of educational training in youth health and youth development makes it difficult for them to implement SRHE in schools effectively. Most of the participants felt that proper delivery of the subject matter to learners requires people with extensive knowledge of the subject, which would be best acquired from an accredited service provider. Some participants reported that it can be difficult for them to provide SRHE, particularly in reproductive health, since the curriculum includes extensive health terminology. More adequate training for youth workers would enable them to provide more authoritative and appropriate information to learners:

> We are placed in different schools to deliver SRHE without being trained by a qualified person. This creates a problem for us when we have to stand in front of learners who have acquired knowledge about these things through the social media. (Youth worker 8)

> Learners in secondary schools are mature enough, some have already heard or seen what we teach on Facebook, YouTube, and if we go there with limited knowledge of SRHE, the learners will laugh at us. I think we need more training, especially if we are trained in community health promotion and receive certificates, it will help us acquire more knowledge. (Youth worker 10)

The participants felt that, since learners can now access SRHE information through their phones and other digital media, youth workers could implement SRHE in schools more effectively if provided with better training. It is therefore essential for youth workers to receive training in facilitation skills and SRHE to ensure that learners receive accurate information.

The Benefits of Involving Youth Workers in the Implementation of SRHE in Schools

The following themes emerged regarding the benefits of involving youth workers in the implementation of SRHE in schools: an increase in sexual awareness, an increase in self-esteem, and the cultivation of moral values.

Increase in Sexual Awareness

Despite a few barriers that youth workers experienced in implementing SRHE, a positive element was noted in this study: all the participants felt that their presence in secondary schools had a positive outcome with regard to learners' sexual and reproductive health awareness. Furthermore, the participants stated that young girls were more likely than young boys to come to them and discuss their love lives and family issues. Those who were in an intimate relationship indicated to the youth workers that they could now communicate effectively with their partners concerning the use of the different methods of contraception and that they had a say in what happened to their bodies:

> We witness changes in one of the schools where we are doing health talks, sexual education, and other prevention. We had the challenge of a high rate of teen pregnancy, but now the rate has started to decline. I think we are making an impact in schools. (Youth worker 12)

> When I was placed in a school in 2019, our learners couldn't talk to us about condoms, but, now learners do talk to us about the importance of using a condom when one gets involved in sexual activities, not for pregnancy prevention, but for sexually transmitted disease prevention. (Youth worker 11)

Through examining the participants' points of view, this study has established the vital role youth workers play in schools. Their presence helped to decrease the rate of teen pregnancy in one of the schools where the rate had been high. Moreover, learners told the youth workers that they were able to have a conversation about the importance of using condoms when they became involved in sexual activities.

Increase in Self-Esteem

Some participants reported that their presence in schools built learners' self-esteem. Learners who had been bullied because of their personalities and sexuality had started to disengage from social activities. However, after being empowered by the youth workers, they were able to participate more fully in school and social activities. Some participants reported that the learners started to become more open about family planning and how they intended to work hard to develop a career for themselves without rushing to start a family. The participants all shared the view that female learners seemed to benefit more than male learners from SRHE. They felt that this was

because female learners also attended extracurricular activities that were organised by the participants after school:

> One of the girls who was bullied because people in her community and school think she is a lesbian came to me and says my presence in school gives her a reason to live again, now she believes she can do anything and have no fear of other people. She is participating in sports activities now, so I think our presence does make a difference. (Youth worker 14)

There is indeed a clear indication that, from the participants' perspectives, SRHE extends beyond the learners' sex lives to also equip them with skills that help them socialise with other people and accept who they are.

Cultivation of Moral Values

It is widely perceived in South Africa that schools have witnessed a period of moral decay — that, as a country, we have paid too much attention to teaching and learning subjects that prepare learners for the world of work, and too little attention to instilling accepted values (Chauke, 2021). Therefore, one of the most important points raised by the participants was that they are delivering SRHE using physical games that promote social cohesion among learners from different races, as well as other good habits:

> We see Coloured, White, and Black learners playing together. When we first started, they were not playing together. This is a true reflection of the important role that we play in schools in promoting moral values amongst learners. We see male learners respecting female learners and not harassing them sexually as before. (Youth worker 15)

> There is a young girl who completed her matric and who used to enjoy my SRHE lessons; after school, she would teach kids in her community about reproductive health, such as how females should react when they experience their first menstruation periods. She is now running her own NPO, and this shows the importance of our presence in schools. (Youth worker 15)

The participants in this study claimed that because of their presence in schools, they were able to instil moral values in learners, contributing to a respectful atmosphere in the schools, and to community development. The latter was seen when a learner, as a beneficiary of SRHE implemented by youth workers in schools, led a similar programme in her community.

Discussion

The youth workers who participated in this study were recruited from a group of young volunteers, who were working for NGOs in the Western Cape that place youth workers in schools

to implement SRHE. These youth workers receive an incentive in the form of a stipend from these NGOs. The five male and 10 female youth workers in the present study each had more than 6 months' experience implementing SRHE in schools and in youth development centres associated with after-school programmes managed by the NGOs. None of these youth workers, all of whom were South African youths themselves, had formal qualifications in youth development, as a child and youth care worker, or in youth work. However, all did have matric certificates, which is necessary for enrolment in higher education in South Africa.

Overall, the findings of the study provided valuable insights into the barriers that youth workers face in the implementation of SRHE and the benefits of involving youth workers in that process. Tension between teachers and youth workers in the school environment was noted as one barrier to effective delivery of SRHE. Some teachers held a negative attitude towards youth workers: they felt that youth workers were lacking in formal education and did not have sufficient knowledge of SRHE to teach it successfully. This agrees with Zulu, Kinsman, et al. (2019), who showed that in Zambia, where the decision regarding how to teach SRHE is left up to individual teachers, they did not include youth groups in implementing it. Haberland (2015) pointed out that poor relationships between teachers and important stakeholders in SRHE, like youth groups, tend to make other stakeholders disapprove of SRHE in schools. Moreover, teachers' negative attitudes towards youth workers make the workers uncomfortable and less confident in their ability to implement SRHE successfully in the classroom. Keogh et al. (2018) also found that poor coordination between teachers and youth workers resulted in a poor working relationship with regard to promoting SRHE.

It is clear that the relationship between teachers and youth workers is significant in promoting SRHE in schools. Regardless of the negative aspects recorded in this study, there were some youth workers who managed to develop a healthy working relationship with Life Orientation teachers, particularly with one teacher who had had experience working with youth in an NPO. Based on that study finding, it seems likely that teachers who have worked with youth in a nonformal education setting are likely to be supportive and work well with youth workers; such support is crucial in helping youth workers to fulfil their role. As Zulu, Blystad, et al. (2019) noted, all stakeholders who have youth's best interests at heart should collaborate in health-related issues.

Cultural socialisation — beliefs emanating from how learners were socialised at home and in their community — caused learners to have mixed feelings about SRHE, presenting another barrier to its successful implementation. Traditional beliefs are of great concern in the implementation of SRHE: there are words that are difficult to mention in some cultures, such as the terms for sex organs (Francis, 2016). Other studies have shown that SRHE remains unacceptable in some cultures; for example, Joseph et al.'s (2021) study of secondary schools in South India found that teachers there viewed SRHE as a way of encouraging learners to start engaging in sexual activities at a younger age than they normally would. The present study found that learners were sometimes resistant to participating in SRHE because they felt that the subject matter was not aligned with their upbringing, as when learners with Christian beliefs did not participate despite the efforts of

youth workers to engage them in the subject matter. Their lack of engagement was detrimental not only to the learners involved: youth workers feared that this behaviour was influencing other learners. However, the study findings further revealed that some learners were not so affected by cultural socialisation and enjoyed the SRHE promoted by youth workers in schools.

Youth workers expressed the view that they had received inadequate training on matters related to youth health and youth development and that this was a barrier to implementing SRHE. Inadequate training created anxiety among the youth workers, who feared that their efforts to deliver SRHE content might actually have a negative impact on the development of the youth. Vanwesenbeeck et al. (2016) confirmed that a lack of training in SRHE makes it difficult to implement. Bilinga and Mabula (2014) alluded to the fact that teachers do not have the proper skills to implement SRHE because they are not trained in this field, and proposed that both teachers and stakeholders should receive such training. The youth workers in this study agreed that being trained by a certified person in SRHE would improve their ability to provide instruction to youth. Information related to SRHE is already in the public domain and youth can access it through their phones, albeit in a less constructive and organised way than classroom instruction can provide. Therefore, well-informed and innovative ways of delivering this content should be a matter of priority for the youth work sector. The youth workers reported that being trained in facilitation skills helps them to deliver the curriculum in classrooms in the era of modern technology.

Despite the barriers that youth workers faced in the implementation of SRHE, their efforts produced benefits as well. One positive aspect was that the presence of youth workers in schools increased learners' sexual awareness. This agrees with Bay-Cheng (2003) and Fentahun et al. (2012), who showed that SRHE helps to provide learners with sexual knowledge. In addition, the information delivered by youth workers in schools helps learners take ownership of their lives and protect themselves by communicating with their partners regarding contraceptives that sexually active people should use. The findings of this study further report that since the youth workers have started visiting schools, the rate of unwanted teen pregnancy has been reduced. This is in contrast to Sosa's (2020) study, which showed an increasing rate despite the implementation of SRHE in schools.

Young people with high self-esteem are more likely than those with low self-esteem to feel good about themselves and confront their fears. This study showed that another benefit of the presence of youth workers implementing SRHE in schools was an increase in the learners' self-esteem; this helped learners who were the victims of bullying to start believing in themselves. Youth workers in SRHE tend to be creative, enabling them to deliver content in a way that inspires youth to make well-informed decisions (Minnesota Department of Education, 2014). All the youth workers in this study asserted that their involvement in school strengthened learners' self-esteem, and helped them to be proud of their sexuality. Another benefit found in this study is that youth workers were able to inculcate moral values in learners in the course of their instruction, such as teaching the importance of serving humankind. The WHO (2017) has emphasised that SRHE builds learners' characters and helps them become responsible citizens.

To my knowledge, no qualitative study focusing specifically on 18- to 35-year-old youth workers who are volunteering in schools has previously been attempted in the Western Cape. Previous studies explored this important topic from the perspectives of teachers and community health workers, while the present qualitative study provides a deeper understanding of the lived experiences of the youth workers.

Conclusion

This study, which reports on the lived experience of youth workers implementing SRHE in schools, contributes to a body of new knowledge. Previous studies that focused on the challenges faced by teachers in SRHE paid little or no attention to youth workers as people who work with youth in both formal and informal education. Uniquely, these findings draw on the lessons learned in youth work practice by youth workers with lived experience in SRHE from a volunteering point of view. Importantly, SRHE in schools was seen to be reducing both teen pregnancies and HIV/AIDS. Furthermore, this study also revealed that the youth workers in schools help to empower the youth, so that they learn to understand their roles in society and how to protect themselves, which is a crucial aspect of their development.

Limitations

In this study, the participating youth workers were drawn from only one province in South Africa and only 15 participants were sampled; therefore, the study findings cannot be generalised to the entire group of South Africa youth workers. There is a need for future research in the same topic to be conducted in the other eight provinces in South Africa, as well as for future research that uses quantitative approaches.

Recommendations

This study recommends that youth workers be integrated into the school curriculum, youth workers implement SRHE in schools, and the role of youth workers in schools be clearly articulated. Specifically:

- The Department of Basic Education should introduce youth health education in schools as a subject to be delivered by educational psychologists, school social workers, and school youth workers who have the necessary qualifications. A major qualification in public health should be part of the examination. This will help learners to spend adequate time on SRHE, and will ensure that the time is well spent.

- The alarming rate of teen pregnancy in South African schools is of great concern. Therefore, more SRHE is needed, with classroom lessons increased to twice a month in all South African schools, delivered by youth workers.

- Youth workers should be hired as teacher's assistants, with the special role of also implementing SRHE and these youth workers should be hired on a full-time basis.

- Youth workers should receive professional development and training so that they can implement SRHE more effectively.

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