UNIVERSITY OF LEEDS

Cultural and Religious Barriers to Setting Up Sex and Relationship Education in a Muslim Country: A Case Study of Brunei Darussalam

Naiyirah Haji Tahamit

Submitted in accordance with the requirements for the degree of

Doctor of Philosophy

The University of Leeds

School of Sociology and Social Policy

August 2015

The candidate confirms that the work submitted is her own and that appropriate credit has been given where reference has been made to the work of others.

This copy has been supplied on the understanding that it is copyright material and that no quotation from the thesis may be published without proper acknowledgement.

© 2015 The University of Leeds and Naiyirah Haji Tahamit

The right of Naiyirah Haji Tahamit to be identified as Author of this work has been asserted by her in accordance with the Copyright, Designs and Patents Act 1988.

ACKNOWLEDGEMENT

In the name of Allah, the Beneficent, the Merciful

First of all, I would like to humbly thank Allah for the strength that He has given me throughout my life and most importantly the ability to complete this study. This comes with a timely reminder from Allah Subhanahu Wa Ta'ala:

"On no soul doth Allah place burden greater than it can bear. It gets every good that it earns, and it suffers every ill that it earns." – (Quran, 2:286)

A list has been comprised of the people whom have given me help to complete my thesis. The contributions vary but the appreciation is still large. This work will not have the spirit and motivation without these people:

Most of all, I am forever indebted to Dr. Teela Sanders for her supervision and constant support. Her invaluable help of constructive comments and suggestions have contributed to the completion of this study. Not forgotten, my appreciation to my co-supervisor, Dr. Sharon Elley for her support and knowledge regarding this topic. I appreciate for both of their understanding, patience, wisdom, encouragement and for pushing me farther than I thought I could go. This dissertation would not exist without the help of their ideas, suggestions, feedback and care.

I also wish to express my gratitude and appreciation to Ministry of Education, Brunei Government for the sponsorship of my study in the United Kingdom.

To the participants who have contributed their commitment and time. Otherwise none of these would be possible.

I owe the greatest debt to my parents, Bapa Haji Tahamit bin Haji Nudin and Mama Hajah Jainap binti Haji Hassan for supporting my pursuit for additional knowledge, for their endless love, prayers and encouragement.

My sincere gratitude and appreciation also go to my sister, Hazirah Tahamit and Hussin Ali Idris who are going through the same journey as me, for always listening and giving me words of encouragement and sources of inspiration.

To my caring friend, Nur Ahlina Haziqah binti Haji Hamdani, for her continuous moral and emotional supports, patience, love which I have valued so much throughout my emotional PhD journey. Thanks for the friendship and memories.

Last but not least, to many others who have helped in the contribution of the research and those who have assisted me through the 'thick and thin'. In no particular order, my deepest gratitude goes to Dr Hebrieyah Raimi binti Ibrahim, Dr. Aida Maryam binti Basri and I am sure that I have omitted several names. To all my dearest brother and sisters, I wish to express my sincere thanks for their understanding, love and care. Also not forgetting my fiancé, Abdullah Husaini for adding colours in my life. May Allah bless you all.

Naiyirah Haji Tahamit

AUGUST 2015

Abstract

Sex and Relationship Education (hereafter, SRE) - a comprehensive sex education has a long debate in the Western worlds. This study explores the cultural and religious barriers of setting up SRE in a Muslim country, Brunei Darussalam. Using semi-structured interviews, I focus on key informants' and young people's perspectives on teenage pregnancy for instance, the policy context of school exclusion due to teenage pregnancy. I argue that the negative perceptions of SRE are stemmed from cultural taboo and customary practices of the country. This further suggests that these practices impose stigma effects that represent persistent patterns of dissolutions in reducing the rate of teenage pregnancy and HIV/AIDS transmission among young people. The other themes examine: perceptions of the respondents of the customary practice of social exclusion policy; positive and negative reactions to SRE; gender differences in sex and relationship; young people lack of knowledge associated with SRE; social issues associated with teenage pregnancy; attitudes toward NGOs; perceptions of the current school-based sex education and positive and negative attitudes towards SRE. This study also calls for pedagogical implications for future practice in the education sector. Finally, this study concludes with a brief discussion of the study.

Keywords:

Young people, sexual reproductive health, sex education, teenage pregnancy, STIs - prevention, Sex and Relationship Education.

Pg.

TABLE OF CONTENTS

ACKNOWLEDGEMENTS…… i

ABSTRACT…… ii

TABLE OF CONTENTS…….. iii

LIST OF APPENDICES……... x

LIST OF TABLES…… xi

LIST OF FIGURES……... xii

LIST OF ABBREVIATIONS…… xiii

CHAPTER 1: INTRODUCTION

1.0 GENERAL INTRODUCTION 1

1.1 RESEARCH BACKGROUND 1

1.2 RESEARCH PROBLEM, AIM AND OBJECTIVES 3

1.2.1 *Problem statement* 3

1.2.2 *Aim of Study* 4

1.2.3 *Research Question* 4

1.2.4 *Objectives* 4

1.3 THE EMERGENCE OF A RESEARCH AREA:
THE RESEARCHER'S STORY 6

1.4 THESIS OUTLINE 7

CHAPTER 2: NEGOTIATING SEX AND RELATIONSHIP EDUCATION, RELIGIOUS BELIEFS AND CULTURE: A CRITICAL REVIEW OF THE LITERATURE

2.0 CHAPTER OVERVIEW 11

2.1 INTRODUCTION 11

2.1.1 *The Complexity Interplay of Religion and Culture* 12

2.2 RECOGNISING ISLAMIC RELIGION: SHARIA' LAW 14

2.2.1 *The application of Quranic verses and the Sunnah to nikah (marriage) and zina (adultery)* 15

2.3 PERCEIVING WESTERN-BASED EDUCATION: DEFINITION OF SEX AND RELATIONSHIP EDUCATION AND ISSUES 20
2.3.1 *Parliamentary discussions* 21
2.3.2 *Parental oppositions* 24
2.3.3 *Pedagogical concerns* 25
2.3.4 *Practice* 27
2.4 CHALLENGES OF DIVERSITY IN SEX AND RELATIONSHIP EDUCATION 28
2.4.1 *Sex and relationship within the context of multi-ethnicity* 28
2.5 LITERATURE ON BRUNEI AS A STUDIED CONTEXT 33
2.5.1 *Brunei as a Sharia' compliance country* 35
2.5.2 *Towards realising Brunei as a Dzikir Nation* 37
2.5.3 *Education system based on Malay Islamic Monarchy* 38
2.5.4 *Compulsory Religious Education* 38
2.5.5 *Sexual health concerns in Brunei* 40
2.6 RESEARCH GAP 42
2.7 CHAPTER SUMMARY 43

CHAPTER 3: CONCEPTUAL FRAMEWORK

3.0 CHAPTER OVERVIEW 45
3.1 POSITIONING THE PERSPECTIVE OF THIS THESIS 45
3.1.1 *Complexity Theory Perspective* 45
3.1.2 *Conceptual Overview of Readiness* 47
3.2 DEVELOPMENT OF A READINESS FRAMEWORK 48
3.3 CHAPTER SUMMARY 50

CHAPTER 4: METHODOLOGY AND RESEARCH DESIGN

4.0 CHAPTER OVERVIEW 51
4.1 CHAPTER INTRODUCTION 52
4.2 EPISTEMOLOGICAL POSITION UNDERPINNING THE STUDY 52
4.3 CHOOSING THE RESEARCH METHOD 54

4.4 SAMPLING, ACCESS AND THE PROCEDURES OF RESPONDENTS SELECTION 55
4.4.1 *The selection of respondents for interviews* 55
4.4.2 *Location of the study* 56
4.4.3 *Demographic data of the respondents* 57
4.5 CARRYING OUT THE INTERVIEWS 61
4.5.1 *Carrying out the interviews with young people* 63
4.5.2 *Access to young people and working with gatekeepers* 64
4.5.3 *Approaches to researching 'children' and 'youth'* 64
4.5.4 *What are the threats for the respondents?* 65
4.5.5 *What are the threats for the researcher?* 66
4.5.6 *Gaining access* 67
4.5.7 *Ethical considerations in researching young people* 68
4.5.8 *Discussions on consent* 69
4.6 CARRYING OUT THE INTERVIEWS WITH OFFICIALS WITH HONORIFIC TITLES 71
4.6.1 *Senior key informants in Brunei Darussalam* 71
4.6.2 *Anonymisation of the honorific government official* 72
4.6.3 *Sampling and access* 72
4.7 CARRYING OUT THE INTERVIEWS WITH A NON-GOVERNMENT ORGANISATION 73
4.8 RISK, SAFETY AND RESEARCHER 73
4.8.1 *Project Information Sheets* 75
4.8.2 *Confidentiality* 75
4.8.3 *Securing the data* 75
4.8.4 *Incentives* 76
4.9 KEY CHALLENGES IN RESEARCH 77
4.9.1 *Challenges to recruiting Muslim respondents* 77
4.9.2 *Cross-cultural interviews* 78
4.9.3 *Difficulties in transcribing and translating from Malay language to English language* 80
4.9.4 *Transcription biased* 80

4.9.5 *How to validate e-transcripts* 81

4.10 DATA ANALYSIS 82

4.10.1 *Limitations of Thematic Analysis* 86

4.11 BEING A REFLEXIVE RESEARCHER 87

4.11.1 *Reflections on research: emotion, cross-cultural research and power imbalance* 87

4.11.2 *Choosing the 'voice' to respond* 89

4.12 CHAPTER SUMMARY 90

CHAPTER 5: KEY INFORMANTS AND YOUNG PEOPLE'S PERCEPTIONS ON TABOO AND STIGMA SURROUNDING TEENAGE PREGNANCY AND HIV/AIDS

5.0 CHAPTER OVERVIEW 91

5.1 CHAPTER INTRODUCTION 91

5.2 INVESTIGATING THE RESPONDENTS' OPINIONS ON THE SOCIAL CONSEQUENCES OF PRE-MARITAL SEX 92

5.2.1 *Failure or lack of Muslim parents acceptance in Sex and Relationship Education* 94

5.2.2 *Lack of knowledge in self-protection leads to bad decisions* 101

5.2.3 *Deprived of love and attention* 104

5.3 EXPLORING THE RESPONDENTS' VIEWS ON EDUCATION ATTAINMENT OF TEENAGE PARENTS 106

5.3.1 *Policy context on social exclusion of teenage pregnancy and teenage parenthood* 108

5.4 THE STATUS OF CHILDREN BORN OUTSIDE WEDLOCK 112

5.5 SOCIAL STIGMA SURROUNDING HIV/AIDS 113

5.6 CHAPTER SUMMARY 116

CHAPTER 6: ATTITUDES AND PERCEPTIONS OF THE KEY INFORMANTS TOWARDS SEX AND RELATIONSHIP EDUCATION

6.0 CHAPTER OVERVIEW 118
6.1 INTRODUCTION 118
6.2 EXPLORING KEY INFORMANTS POSITIVE ATTITUDES AND PERCEPTIONS OF SEX AND RELATIONSHIP EDUCATION 119
6.2.1 *Knowledge as a weapon to arm the young people* 120
6.2.2 *Knowledge for self-protection from abuse* 125
6.2.3 *Responsibility and gender equality in relationships* 129
6.3 ACCESSING NGO: BRIDGING THE ROLES OF BRUNEI HIV/AIDS CENTRE 133
6.4 CHAPTER SUMMARY 138

CHAPTER 7: KEY INFORMANTS' PERCEPTIONS ON THE IDEOLOGICAL AND RELIGIOUS RESISTANCE TO SEX AND RELATIONSHIP EDUCATION

7.0 CHAPTER OVERVIEW 140
7.1 INTRODUCTION 141
7.2 PERCEIVED IDEA THAT SEX AND RELATIONSHIP EDUCATION IS A SENSITIVE TOPIC 141
7.3 THE PERCEIVED IDEAS THAT BRUNEI ALREADY HAS SEX AND RELATIONSHIP EDUCATION 148
7.4 EXPLORING BRUNEIAN KEY INFORMANTS' NEGATIVE ATTITUDES AND PERCEPTIONS OF SEX AND RELATIONSHIP EDUCATION 153
7.4.1 *Perceived liberal contents in SRE as the main highlight* 153
7.4.2 *Teaching to be faithful and sex-abstinence* 157
7.4.3 *The perceived breakdown of the Malay Muslim family values on (teenage) marriage* 161
7.5 USE OF QURANIC VERSE AND THE PROPHET'S TRADITIONS AS REFERENCE TO SUPPORT THE KEY INFORMANTS' VIEWS 165
7.6 CHAPTER SUMMARY 169

CHAPTER 8: ATTITUDES AND PERCEPTIONS OF BRUNEIAN YOUNG PEOPLE TOWARDS 'SEX' AND 'RELATIONSHIPS'

8.0 CHAPTER OVERVIEW 171

8.1 INTRODUCTION 171

8.2 BRUNEI YOUNG PEOPLE'S UNDERSTANDINGS OF 'SEX' 172

8.3 BRUNEI YOUNG PEOPLE'S UNDERSTANDING OF 'RELATIONSHIPS' 174

8.4 BRUNEIAN YOUNG PEOPLE'S INFORMATION SOURCES ON SEX: CONTRACEPTION, INFORMATION AND ADVICE 178

8.4.1 *School-Based Sex Education: perceptions and experiences* 178

8.4.2 *Contraception and its relationship with pregnancy, HIV/AIDS and STIs Prevention* 182

8.4.3 *Informal sex education* 185

8.5 EXPLORING BRUNEIAN POSITIVE AND NEGATIVE ATTITUDES AND PERCEPTIONS OF SRE 189

8.6 CHAPTER SUMMARY 193

CHAPTER 9: CONCLUSION AND RECOMMENDATIONS

9.0 CHAPTER OVERVIEW 194

9.1 REFLECTIONS ON STUDY 196

9.1.1 *Cultural Context*

9.1.1.1 *Cultural concept of teenage pregnancy and marriage* 197

9.1.1.2 *Gendered perceptions* 199

9.1.1.3 *The issue of condom-use in Muslim communities* 199

9.1.2 *Pedagogical Context* 201

9.1.2.1 *The complexity of challenges: integrating Islam in SRE* 201

9.1.2.2 *Existing state of readiness for SRE in Brunei* 203

9.1.2.3 *Occupational roles interlinked with religious beliefs and national philosophy* 204

9.1.2.4 *The desired climatic influences for SRE in Brunei* 206

9.2 FURTHER RESEARCH AND PRACTICE 213

9.2.1 *Evaluation of methodologies employed* 213

9.2.2 *Investigating the research finding using multiple methods* 213

9.2.3 *Comparative study of other Muslim States in SRE* 214

9.2.4 *Future research* 214

9.3 FINAL COMMENTS 215

REFERENCES 218

LIST OF APPENDICES

Appendix A - Glossary of Islamic Terms 266

Appendix B - Initial Consent Form 268

Appendix C - Information Sheets 277

Appendix D - Ethics Approval Letter 279

Appendix E - Interview Schedule 281

Appendix F - Demographic Information 287

LIST OF FIGURES

Figure 1: Flowchart of Thesis Structure 10

Figure 2: Brunei National Philosophy 34

Figure 3: Linking Islamic teachings based on Qur'an and Prophet's Traditions with MIB, Sharia Law and CRE 37

Figure 4: Conceptual Framework of Readiness and its Relationship with Climatic Factors 49

Figure 5: Research Design Process 51

Figure 6: Map of Brunei Darussalam 56

LIST OF TABLES

Table 1: Connections between methods, the research questions and objectives 5

Table 2: Spread of Respondents by Gender 57

Table 3: Spread of Respondents by Occupation and Gender 58

Table 4: Spread of Respondents by Occupation and Religion 60

Table 5: Process of Analysing Themes ‘During’ and ‘After’ Data Collection 84

Table 6: Occupational Roles Interlinked with Islam and Malay Culture 205

LIST OF ABBREVIATIONS

AIDS	**Acquired Immunodeficiency Syndrome**
BDAC	**Brunei Darussalam AIDS Council**
CPC	**Criminal Procedure Code**
CRE	**Compulsory Religious Education**
DfES	**Department for Education and Skills (UK Government)**
HEFCE	**Higher Education Funding Council for England**
HEJ	**Health Education Journal**
HIV	**Human Immunodeficiency Virus**
IPPF	**International Planned Parenthood Federation**
JSS	**Jabatan Sekolah-Sekolah (Brunei Government)**
MIB	**'Melayu Islam Beraja' (Malay Islamic Monarchy)**
MoE	**Ministry of Education**
MoH	**Ministry of Health**
MoRA	**Ministry of Religious Affairs**
NCB	**National Children's Bureau**
NGO	**Non-Government Organisation**
OFSTED	**The Office for Standards in Education, Children's Services and Skills (UK Government)**
PBUH	**Peace Be Upon Him**
SIECUS	**Sexuality Information and Education Council of the United States**
SRE	**Sex and Relationship Education**
STD	**Sexually Transmitted Disease**
STI	**Sexually Transmitted Infection**
UN	**United Nations**
UNAIDS	**Joint United Nations Programme on HIV/AIDS**
UNESCO	**United Nations Educational, Scientific and Cultural Organization**
UNFPA	**United Nations Population Fund**
UNICEF	**United Nations Children's Fund**
WHO	**World Health Organisation**

CHAPTER 1
INTRODUCTION

1.0 GENERAL INTRODUCTION

The context of this study is introduced in Chapter 1. This chapter provides an overview of the research background in the area of study and the issues that rationalise this study. This chapter then discusses the aims and objectives that lead to the research question, hypothesis and methodology. The emergence of a research area around SRE is clarified and the chapter concludes with an overview of the thesis structure.

1.1 RESEARCH BACKGROUND

For the last twenty years, there has been an increased literature in sex and religion from Muslim scholars and academics. For instance, Ahsan, (2007) states that there are books on sex education issues that have been published in the past decade, for example: Ghulam Sarwar, Sex Education (London: Muslim Educational Trust, 1996); Michael J. Reiss and Sheikh Abdul Mabud, Sex Education and Religion (Cambridge: The Islamic Academy, 1998); and Shahid Athar, Sex Education: An Islamic perspective (Chicago: Kazi Publications, 1996). The first two books that have been mentioned by Ahsan (2007) are written in the context of the British education system, while the latter one is written in the context of the United States. Meanwhile, literatures on gender (Htun and Weldon, 2012) and SRE curriculum (Al-Dien, 2010; Sanjakdar, 2009; Halstead and Reiss, 2003) have been explored in relation to how Muslims experience and negotiate SRE by families, professionals and service providers. Until recently, surprisingly little has been written about SRE and multi-ethnics and religions. However, a number of authors have written about SRE within a minority, multi-cultural and religion framework (See Sanjakdar, 2009; Al-Dien, 2010). As demonstrated by Sanjakdar's study (2009), it shows that the content of SRE has lack of sensitivity towards religion and cultural issues especially when teaching Australian Muslim's minorities. This is not to suggest that researchers have not included Muslim countries in their researches; however there are relatively few studies that explore the conjoining of SRE experiences and Muslims-majority countries (Wahba and Roudi-Fahimi, 2012).

Therefore, it is interesting to recognise that within these literatures of sex and Islam, very little attention has been put on areas of interest that specifically explore SRE

experiences of Muslims in Muslim-majority countries. For instance, in Egypt, there is a great concern among the researchers that there is a severe lack of knowledge among adolescents concerning sexual and reproductive health (Geel, 2012). Similarly, in Saudi Arabia, the sexual health knowledge of female students has been measured and the connections between parental roles, friends and school setting have been recognised (AlQuaiz et al., 2013). While these studies provide additional knowledge about the various experiences of SRE for Muslims, however, Muslims drawn from these studies are not sufficiently representing for all Muslims. As Biddulph (2007:2) argues that sexuality discourse is often distinctive across 'nation geographically' and 'culturally distinct' in relation to sexuality. In Brunei, the Muslims community reflects the non-secular and *puak*[1] diversity lives under the national philosophy of *Melayu Islam Beraja* (or in English, Malay Islamic Monarchy) which may not be found in other Islamic states.

It is this content which has lead to my focus on the following hypothesis:

Hypothesis: Identified cultural and religious factors have a relationship with Brunei readiness for Sex and Relationship Education particularly in reducing teenage pregnancy and STIs cases

No research of this nature has been performed in Brunei. The importance of this research brings us the comprehension of the complexity of employing SRE within a complex nature[2] of a Muslim country.

[1] Puak means ethnics. There are 7 puak in Brunei namely Puak Melayu Brunei, Puak Kedayan, Puak Tutong, Puak Belait, Puak Dusun, Puak Murut and Puak Bisaya.

[2] In this context, I argue that Brunei as a complex organisation, governed by an absolute monarch which has great influence in the country's development.

1.2 RESEARCH PROBLEM, AIM AND OBJECTIVES

1.2.1 Problem Statement

Emphasis on the importance of SRE curriculum for effective improvement of reducing teenage pregnancy and STIs is highlighted internationally particularly in developed countries (Weaver et al., 2005). In Bruneian context, promptness for SRE in Brunei is reflected in the beliefs, attitudes and intentions of the government-ministerial agencies regarding the extent to which changes are needed to successfully control the rise of teenage pregnancy and STIs. Malay Islamic Monarchy further complicates the readiness of employing SRE due to the complex nature of SRE that may interfere with the national philosophy. The present regime of Brunei is characterised by Blomqvist (1998:551), as Sultan has the absolute power despite the 'Western' structure of the government. In His Majesty's *Titah*[3] on Prophet Muhammad's (PBUH) birthday, the monarch denounces the influence of 'uninvited elements' in government policies and educational content that can corrupt the society. He stated:

> ***Government policies and educational content should not deviate "even slightly" from the national philosophy of Malay Muslim Monarchy (MIB) – His Majesty Sultan Haji Hassanal Bolkiah Mu'izzaddin Waddaulah, The Sultan and Yang Di-Pertuan of Brunei Darussalam (Brunei Times, published on January 3rd, 2015).***

Blomqvist (1998) describes that the ministers and senior officials are advisors to and are answerable to the ultimate decision-maker, the Sultan. As a consequence, lack of coordination between different authorities often occurs and generally slows down the decision-making process (Blomqvist, 1998; Ali, 1997; Clearly and Wong 1994). Convincing the mind set of a Muslim leader can be a fundamental step on the push for reform in Brunei. Understanding the complexity of the country within intricate management and organisations affects the development for improvements. This is the motivation that drives this investigation in Brunei Darussalam.

[3] Titah means decree from the Sultan and must be followed as Sultan is the ultimate decision-maker in Brunei.

1.2.2 Aim of Study

The main aim of this research is to recognise the cultural and religious factors that influence the country's initiatives for effective SRE programs or curriculum in Brunei. By identifying these factors, it will provide a detailed analysis of how the Bruneians use their *Melayu Islam Beraja* (Malay Islamic Monarchy) identity in developing SRE curriculum. The research aim is supported by several objectives, which are discussed in the following sub-sections.

1.2.3 Research Question

This study seeks to answer the main research question, supported by subsidiary questions derived from the objectives. The main research question is: What are the cultural and religious barriers in setting up Sex and Relationship Education in a Muslim Country: A case study of Brunei Darussalam. Table 1 shows the connections between the methods, the research question and the objectives.

1.2.4 Objectives

To fully explore the research questions, the following objectives are identified:

a) To find out the current debates and review the literature on SRE curriculum, its linkages with the nature of sex in Islam.

b) To investigate and identify cultural and religious factors that challenge the country's readiness to support improvements in reducing teenage pregnancy and STIs in Brunei.

c) To investigate and explore the desired crucial factors which promote the country's readiness to support Sex and Relationship Education in Brunei's public schools.

As such, this research aims to explore the perceptions of Bruneian Muslims, by using semi-structured interviews to gather deep understanding of how they perceive SRE in a Muslim country. This aim is aligned with answering the overall thesis question which is primarily concerned to be explored: 'What are the cultural and religious barriers of setting up SRE in a Muslim country?' In order to answer the main research question, three subsidiary questions are posed and examined in Table 1 below:

METHOD(s)	RESEARCH QUESTION	OBJECTIVE
Literature review	**(Subsidiary)** What do we understand about SRE and the nature of sex in Islam?	1. To find out the current debates and review the literature on SRE curriculum, its linkages with the nature of sex in Islam. Various perspectives are looked at, to help understanding the connections in a more inclusive and holistic approach.
Qualitative Literature review	**(Main)** What are the cultural and religious barriers to setting up Sex and Relationship Education in a Muslim country?	2. To investigate and identify the cultural and religious factors that challenge the country's readiness to support improvements in reducing teenage pregnancy and STIs in Brunei.
Qualitative Literature review	**(Subsidiary)** What are the positive and negative perceptions of the respondents towards SRE?	3. To investigate and explore the desired crucial factors that promote the country's readiness to support Sex and Relationship Education in Brunei's public schools.

Table 1: Connections between methods, the research question and objectives.

In response to the aim and objectives of this thesis, I wish to begin by presenting how I initially became interested in studying this research project. The chapter ends by outlining the main points of each chapter.

1.3 THE EMERGENCE OF A RESEARCH AREA: THE RESEARCHER'S STORY

Before I started this study, I had developed curiosity in designing SRE curriculum particularly for special needs students. Having a profession as a special needs teacher before, my initial interest was born out of some specific preconceptions about this particular group of people. However, the previous years had witnessed a close family uphill battle in dealing with my teen cousin's pregnancy outside wedlock, hence had shifted the focus of my study to a more general group. During this time, I was already embarking on a Research Degree in Sociology. Some of my first memories were of the unconstructive cultural practices I learned from our Bruneian people when dealing with teenage marriage due to conceiving a baby outside wedlock. This family experience sparked the popular social stigma, which revealed depictions of the constant challenges caused by this family incident.

In 2010, I started teaching in one of the schools built on water village called *Kampong Ayer*. The school was located within a highly populated Malay Muslims area and in a lower-tier school identified as the 'sinking zone'. I was surprised to discover the social issues there and the frequency of having children outside wedlock which can easily be identified from the student's name ending in Abdullah (which means the slave of Allah). The shocking stereotyping was upheld among the school teachers and I can honestly say, I was no exception to that. Combining all these factors had decorated a worrying depiction for global Muslim societies, something I found myself becoming progressively more concerned with. This concern subsequently grows throughout my academic journey. In response to the above experiences, I developed a strong interest in finding the cultural and religious barriers on setting up Sex and Relationship Education in a Muslim country. As part of my study, I started documenting published statistics and newspaper clippings on teenage pregnancy, rates of prevalence of HIV/AIDS in the country and related casualties such as new-born abandonment.

1.4 THESIS OUTLINE

The thesis consists of eight chapters, which are briefly explained below:

Chapter 1: Introduction

This chapter introduces the basis of this study and provides a brief overview of the research background including its aims and objectives, the research questions and the emergence of a research area. Identifying the research gap from the varying themes leads to the construction of the objectives, research question, research design and hypothesis.

Chapter 2: Literature Review

This chapter begins by introducing the key concepts and provides discussion on the literature around 'religion' and 'culture'. This chapter also explores the key underlying existing discussions relevant to this research. It is specifically focusing on three main themes that knead throughout the four data chapters (Chapter 4 – 7). The three themes include: (1) Recognising Islamic Religion; (2) Perceiving Western-based SRE and (3) Brunei Literature. The ranges of complexities that drive the UK Government's promptness to support SRE are identified from the literature and Brunei as a studied context is also explored. The findings of the literature review serve as the foundation for this study.

Chapter 3: Conceptual Framework

In this chapter, the framework of Complexity Theory is investigated. In the second part of this section, a theoretical discussion of readiness concept is presented, positioning the perspective of this thesis.

Chapter 4: Methodology and Research Design

This chapter addresses the methodological and philosophical stance underpinnings the study. It explores semi-structured interview that is employed in this research. The chapter also explains how twenty-one key informants were accessed for interview including ten young people. These interviews further deepened my understandings on the complexities of recruiting young people, the difficulties of transcribing and

translating Malay language to English language and the challenges of recruiting Muslim participants are also presented.

Chapter 5: Key Informants' and Young People's Perceptions on Taboo and Stigma Surrounding Teenage Pregnancy and HIV/AIDS

This chapter examines the extent to which, and in what ways, Islamic religion and Malay culture can inform the issues of teenage pregnancy and HIV/AIDS infections. The analysis reveals that the complexities within the respondents' constructions of religious beliefs are often interlinked with the national philosophy, *Melayu Islam Beraja* (Malay Islamic Monarchy). Social taboo and stigma surrounding teenage pregnancy, people living with HIV/AIDS and children born outside wedlock are broadly common among the respondents. Customary practice of social exclusion of teenage parents is also discussed in this chapter. The data in this chapter shed on some gender discrimination and inequality particularly in social exclusion of teenage mothers.

Chapter 6: Positive Attitudes and Perceptions of the Key Informants towards Sex and Relationship Education

This chapter explores the key informants' positive attitudes and perceptions towards SRE. The positive perceptions of SRE are often associated with child's safety and self-protection. Emerging evidences from this study show that there is a strong sense among some of the key informants to protect Bruneian children and young people from what they perceive as negative associations of sex and relationship. Additionally, responsibility and gender equality in relationships are also pointed out in this chapter. Finally, the supportive roles of a non-government organisation called HIV/AIDS Centre are addressed as a 'positive theme' as it is perceived as an alternative arrangement for SRE.

Chapter 7: Key Informants' Ideological and Religious Resistance to Sex and Relationship Education

This chapter investigates the negative perceptions of the key informants which are primarily concerning ideological and religious resistance towards SRE. In the interviews, various professionals include Islamic religion which broadens the discussions of marriage, faith-based sex education and the use of Quranic verse and

the Prophet's traditions to strengthen their responses. The findings altogether put emphasis on preserving Brunei own domestic interest which further reinforces the negative attitudes and perceptions towards SRE.

Chapter 8: Attitudes and Perceptions of Bruneian Young People towards 'Sex' and 'Relationships'

This chapter presents a discussion of young people's perceptions towards 'sex' and 'relationships': heterosexual and homosexual. The analysis reveals that majority of the respondents perceive that sex is only permissible in marriage; therefore abstinence is encouraged for unmarried populations. This chapter further studies how the young people perceive biological science as SRE and Religious curriculum called *Munakahat* as a pre-marital course which they do not consider as sex education.

Chapter 9: Conclusion and Recommendations for Implications of Practice

Chapter 9 assimilates the crucial findings and draws conclusions from this research. This chapter reviews the findings, provides overall research findings and identifies knowledge contributions to setting up SRE programme in Brunei Darussalam as a Muslim country. This chapter also presents the limitations of the research and make further recommendations for further research and implications of practice. Finally, closing thoughts are presented at the end of this study.

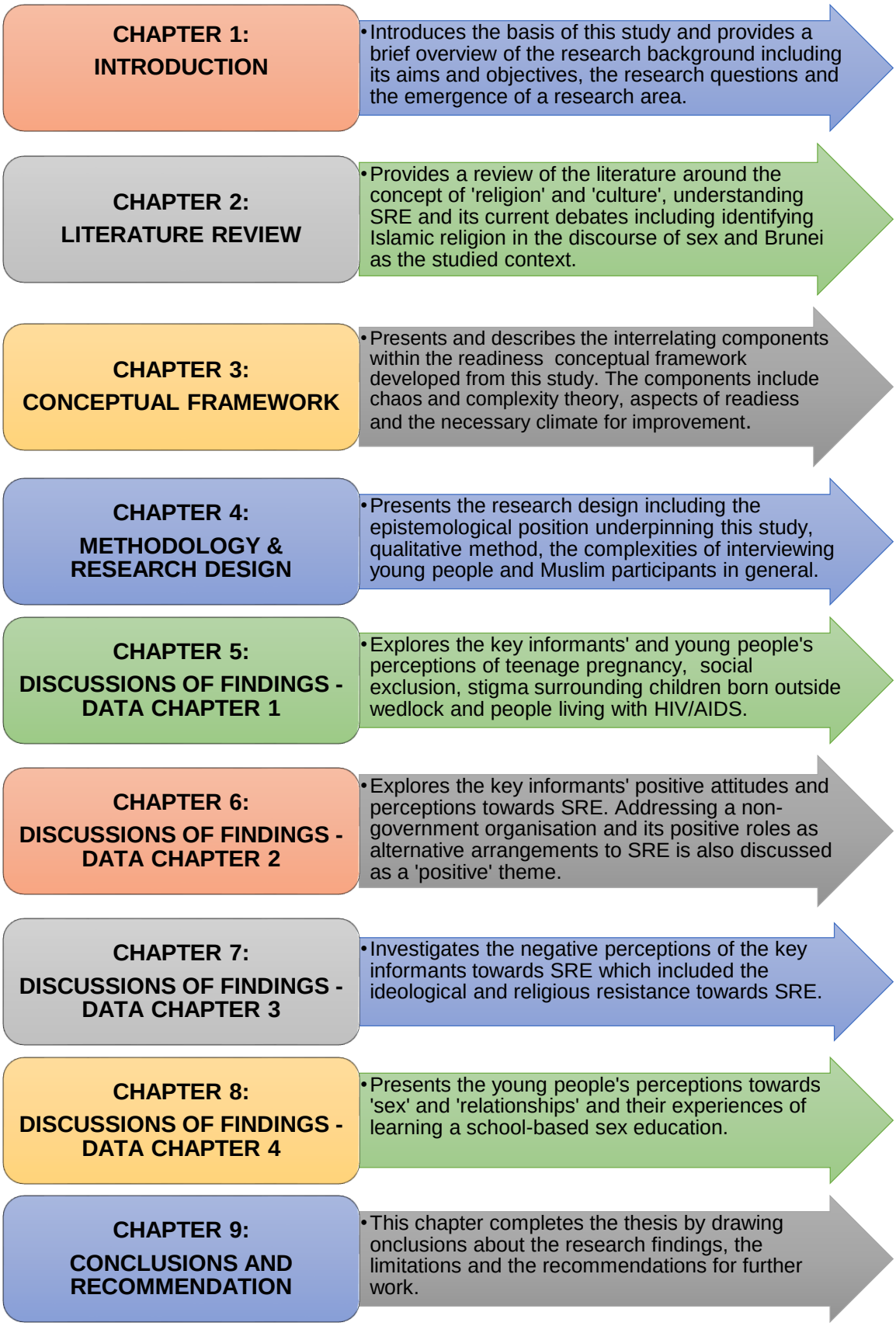

Figure 1: Flowchart of thesis structure.

CHAPTER 2

NEGOTIATING SEX AND RELATIONSHIP EDUCATION, RELIGIOUS BELIEFS AND CULTURE: A CRITICAL REVIEW OF THE LITERATURE

2.0 CHAPTER OVERVIEW

This chapter provides a critical review of the literature on understanding Sex and Relationship Education and its current debates. This chapter will also include the concept of sex in Islam, the debates surrounding culture and religion, and the political climate of Brunei which is relevant to the understanding of SRE as it is significant to the aims of the thesis.

2.1 INTRODUCTION

Chapter 2 briefly introduces the key concepts of religion and culture. It centres on finding the difference between religion and culture as both can have complex interplay particularly in this study. The literature is divided into three themes: The first theme titled: 'Recognising Islamic Religion' that involves with how religious beliefs such as the Quran responses and Prophet's Traditions are applied to individuals in perceiving and experiencing sex and relationship. In view of this, literature relating to *nikah* (marriage) and *zina* (adultery) is explored. In this way, it can be argued that appreciating these religious beliefs allows us to understand in more depth how religion shapes and influences the respondents' perceptions in the data chapters (Chapter 4 – 7).

The second theme titled 'Perceiving Western-based SRE' presents the literature that explores the performance of SRE in the United Kingdom. The section further examines the debates in this field especially in four identified factors: parliament, parental oppositions, pedagogical concerns and practice. Furthermore, it also explores selective countries with SRE. It attempts to study the diverse intersections of SRE experiences with culture, religion and nationality. Different factors within the literature include institutional barriers, cultural and religious barriers and efforts to adhere to a sense of ethnic and religious identity are also explored.

The third section titled 'Brunei Literature' explores Brunei as the studied context. This section also investigates the implementation of Sharia' Law and the national

philosophy: Melayu Islam Beraja (Malay Islamic Monarchy). This chapter finishes with research gaps that this study intends to fill in. In the following sub-section, I will provide a brief review of these concepts: religion and culture.

2.1.1 COMPLEX INTERPLAY OF RELIGION AND CULTURE

This section investigates the complex interplay between religion and culture. Before taking this discussion further, the concepts of religion and culture will be briefly explained. Even though religion continues to play an important role for many individuals, religion is still debatably complex as there is no general consensus on the definitions of religion (Mapadimeng, 2009). According to a social constructionist approach, Beckford (2003) stated that it is conceptually complex to define religion because there is no single universal definition of religion. This altogether seeks explanation to understand the meaning of this concept, for instance what is religion and what is not? According to Kilp (2011:197), in the Western societies, the role of religion as belief has lost its cultural relevancy, but religion as a cultural symbol of identity has remained functional both in construction of 'Self' and 'Other'.

On the other hand, Avruch (1998) explained that much of the difficulty in understanding the concept of culture started from the different usages of the term. Hofstede (1991:10) presented different levels of culture, for example, a) a national level according to one's country (countries for people who migrated during their lifetime; b) a regional and/or ethnic and/or religious and/or linguistic affiliation, as most nations are composed of culturally different regions and/or ethnic and/or religious and/or language groups; c) a gender level, according to whether a person was born as a girl or as a boy; d) a generation level, which separates grandparents from parents from children; e) a role category, for example, parent, son or daughter, teacher, student; f) a social class level, associated with educational opportunities and with a person's occupation or profession and g) for those who are employed, an organisational or corporate level according to the way employees have been socialised by their work organisation. According to Matsumoto (1996: 18), 'culture is as much an individual, psychological construct as it is a social construct. To some extent, culture exists in each and every one of us individually as much as it exists as a global, social construct.

According to Bonney (2004), in certain specific rites, what is cultural may become confused with what is religious. According to Baofu (2007), the first sub-level of cultural complexity concerns religion, in the context of complexity. In the process of reviewing the literature on complexity and culture (or religion), Baofu (2007:200) stated that complexity theory has been used or abused by both sides for and against religion. Culture is of vital importance to the presence of religion in all nations. Therefore, religion cannot be isolated from culture because both are inter-related. Furthermore, it is not easy to make a distinction between cultural and religious issues (Dhiri, 1999 cited from Tavakol et al., 2003). It is important to note that religions always influence societies' attitudes towards reproductive health, especially family planning (Sahu, 2010 and Tavakol et al., 2003). A number of studies did investigate the importance of taking consideration of religion and cultural differences in sex education (Al-Dein, 2010; Sanjakdar, 2009; Bennett, 2007). The studies do not, however, describe precisely how to achieve this balanced approach. Bennett (2007), in his study also presumes that in the context of sexuality education, religion was used as guidelines to reinforce the existing custom of proven practicality.

It is clear from the above studies that there are complexities around religion and culture. According to Mapadimeng (2009:91), both religion and culture's influences on society are dualistic in nature. They could either help to foster social cohesion and solidarity to achieve different ends or could be divisive. In Brunei's history, for instance, Islam was used to legitimise and justify government policies which enhanced consensus and social cohesion through shared values. Similarly, it was noted in Mapadimeng's study that (2009:92) that culture's influence on the society's socio-economic life can enhance consensus or generate conflicts and instability, leading to either regressive or progressive change. In this thesis, there are at least two very different understandings of culture. Firstly, the concept of culture as defined by Matsumoto (1996), for instance, the culture of stigmatising teenage pregnancy from the social construct. Secondly, adopting from Hofstede (1991), the other culture concept in my study refers to a national level of culture according to one's country. Spencer-Oatey (2012) asserted that culture and nation are commonly treated as equivalent terms. This culture concept suits my study as Brunei is predominantly inhabited by one cultural group, Malay Muslims.

2.2 RECOGNISING ISLAMIC RELIGION: SHARIA' LAW

In 2010, there are 1.6 billion Muslims around the globe, representing 19.8% in Middle East North Africa, 15.5% in Sub-Saharan Africa and the largest Muslims population live in Asia and the Pacific with 61.7% (Pew Research Centre, 2012). Islam is 'growing but slowing' and Islam continues to increase from 23.4% in 2010 and is expected to increase to 26.4% by 2030 (The Economist, 2011). Islam is frequently associated as a 'harsh religion that forbids leniency' (Shahrur, 2009:197). In regard to this study, Islamophobic sentiments surrounding Muslims involve sexuality and human rights issues such as female genital mutilations (Dorkenoo et al., 2007), inequality of women's rights in marriage (Hossain, 2003; Mir-Hosseini, 2007), for instance sexual consent and contraception choice (Srikanthan et al., 2008; Sharma and Pasha, 2011), the men's rights to marry up to four wives which supports for polygamy rather than monogamy (Johnson, 2005), stoning and flogging punishments for adultery (Mir-Hosseini, 2010). Whilst these crucial issues are not the core of my research interests, these issues seem to form the political landscape behind the debates and barriers surrounding SRE.

According to some studies, there are some predominant Muslim countries that have adopted and practised hudud[4] however the executions of heavy corporal punishments such as stoning and amputation are reported to be 'rare to non-existence' (Otto, 2010:633). Rehman (2005:44) highlighted 'the complexities inherent in enunciating absolute principles of the Sharia'. For instance, the complexities of Quranic attitudes towards punishment is argued by MacEoin (2006) as the words Bismillah Ar-Rahman Ar-Rahim (which means 'In the name of God, the merciful, the compassionate') is lacking of God's compassion in the case of modern application of Shari'a law. It is widely believed that Sharia' Law received strong criticism on the basis that the law is unjust to women for instance in the Zina Laws which is viewed as violence against Muslim women (Mir-Hosseini, 2010) and punishment of rape (Musawah, 2014). However, according to Dahlen (2014), as far as the jurisprudence is concerned, the

[4] Hudud means bounds of acceptable behaviour and punishments for serious crime implemented in Islamic states such as Brunei, Saudi Arabia, Iran, Sudan, Northern states of Nigeria. The punishable crime (hudud) includes theft, consumption of alcohol or other intoxicants such as drugs, apostasy, false accusation of adultery (Qazf), adultery (zina) and fornication (zina).

task of logic in Quran brought 'absolute' principles which no opposition is possible between definite reason and revelation, but only between defect reasons. To reinterpret Islam in the 21st Century, the practice of Ijtihad (interpretation and reasoning based on the holy Book of Quran) must be revived (United States Institute of Peace, August 2004). Affi and Affi (2014) explained on the practice of Ijtihad[5], as a form of exercise of rational judgement. In *Theory of Limits in Islamic legislation*, Sharur et al. (2009:190) explained that 'theory of limits is based on the notion of a flexible system of law that replaces legislation containing rigid regulations and certain penalties that allow no mitigation'. Therefore, it can be summarised that Islam is not homogenous (Sanjakdar, 2013), and it is understandable that there are varying interpretations of the implementation of the Sharia' law. The interpretations can be concluded in these 3 categories: 1) strictly adhering to Islamic teaching and Sharia' law serves as the supreme law of the country such as in Saudi Arabia (Affi and Affi, 2014); 2) applying Sharia' law selectively on certain punishments only (as illustrated by Otto, 2010:633); and finally, 3) some aspects of Sharia' law co-exist alongside with the civil law (Nundy, 2004; Coughlin, 2006).

The following section will significantly discuss some of the literature which engages in studying a research that focuses on Islamic perspectives on sex and relationships. These perceptions can influence in shaping and informing Muslims' religious and cultural identities. The following section explores the relatively small body of literature of interpretations of the Quran's teachings of sex and marriage.

2.2.1 THE APPLICATION OF QURANIC VERSES AND THE SUNNAH TO NIKAH (MARRIAGE) AND ZINA (ADULTERY)

Islamic law which is stated in the Sunnah and Quran[6] provides clear guidance about what is appropriate and inappropriate for Muslims in the area of sexual behaviour (Bennett, 2007). From an Islamic point of view, cohabitation, homosexual partnerships, sexual acts such as anal sex, oral sex, and freedom to determine when to give up

[5] Ijtihad, an Arabic term means 'independent reasoning'
[6] Quran is a holy book the sacred writings of Islam revealed by God to the prophet Muhammad during his life at Mecca and Medina.

virginity, having sex before marriage are inappropriate for any programme of sex education to impart such knowledge to Muslim children (Bennett, 2007).

Islam has an in depth and structured doctrine about marriage based on the Quran verses and Prophet's traditions. In Islam, the ideal Muslim spouses are being faithful in marriage, however men are allowed to practice polygamy up to four wives. Different people will disagree about the veracity of this statement, but we know that this do not reflect the experiences of the majority of Muslims. The husband has an absolute power over the woman's rights of divorce, however marital rape is also prohibited and abortion is allowed if the mother's health is affected (Mir-Hosseini, 2007). Existing literature suggests that Islamic religious affiliation contemptuously associates with HIV when marital codes consent men to get married as many as four wives, thus escalating the number of sexual partners and increasing the risk of acquiring HIV (Stanberry and Bernstein, 2000; Wasserheit et. al., 1991 as cited in Gray, 2003). This study is in opposition to Islamic practice of polygamy, hence challenging the Muslims moral of being 'faithful' and disputing over the fair measure of equalities between men and women. Islam, on the onset, established polygamy as it is sanctioned in the Quran (See Quranic Verse 4:3) which stated:

> And if you fear that you will not deal justly with the orphan girls, then marry those that please you of [other] women, two or three or four. But if you fear that you will not be just, then [marry only] one or those your right hand possesses. That is more suitable that you may not incline [to injustice].

Noor (2007) described the reforms emerged in Malaysia based on the Egyptian's reformists' thoughts during the nineteenth century to twentieth century. The reform is seeking for gender justice in socio-legal context of Malay society. The reform also touches on the 'unfettered right' of a man to marry up to four wives (Khairuddin, 2008). She criticised that the reform of polygamy laws in Malaysia has been influenced by the Western civilisations. This argument stems from the lack of understanding and different interpretations of the Quranic verse on the rights of men. Where adultery is prohibited, allowing men to marry for a second wife is viewed as a prevention which is better than letting the men having extra-marital relationships[7].

[7] However, extra-marital relationship is a conditional necessity, for instance if a men is able to provide his wives equal treatments, in terms of nafaqah zahir (financially able to finance all his ives) and nafaqah batin (sexually fair).

There are several perspectives on the roles and consequences of polygamy. The positive roles of polygamy have been discussed by Fatah Yasin and Jani (2013), and the findings show that polygamy reduces prostitution, adultery and pregnancy outside wedlock in Malaysia. However, being righteous and fair is demanded in polygamy, which includes to be fair for all wives in providing Nafaqah Zahir (for instance, financial support) and Nafaqah Batin (for example, sexually fair) and taking turns for night stay or other things that require taking turns. The studies cited here may be sufficient to dispose the arguments which claim that Islam promotes extra marital relationships which refute the idea of being faithful, when in fact Islamic wisdom exists behind polygamy that is to avoid maksiat - adultery in a marital relationship. In defending the contrary proposition, another study also claims that Islam does not oppose polygamy nor encouraging it (Noor, 2007). Another Quranic verse shows some discouragement of such plural marriages (the Quranic verse 4:129) which states that:

> And you will never be able to be equal [in feeling] between wives, even if you should strive [to do so]. So do not incline completely [toward one] and leave another hanging.

According to Mir-Hosseini (2010), in Islam the absence of nikah (marriage) is Zina (adultery). *Zina* is the term used for unlawful or forbidden sex. Bennett (2007) defines *zina* as sexual intercourse, including acts such as kissing, embracing, holding hands, oral sex, masturbation and other acts that are form of sexual interactions. In Islam, abstaining from sexual activity and anything that leads to it is closely interlinked with being faithful to God (Rahman and Islam, 2008). According to (Koffi and Kawahara, 2008), abstinence is the best available strategy to prevent both pregnancy and sexual transmitted diseases including HIV/AIDS. Muslims abstinence means a lack of temptation and against pre-marital sex. The traditional indicators of a ‘decent woman’ or a ‘good girl’ in Islam are often described as follows: should not be sexually active or never initiate a sexual contact before marriage (Chakraborty, 2010). Similarly, some fundamental religious interpretations are also against pre-marital sex. For instance in Christianity, sex is only allowed within marriage. Hebrews reads: ‘Marriage is honourable among all, and the bed undefiled: but whoremongers and adulterers God will judge.’ (Bible,13:4). In Northern Ireland where schools are relatively conservative Christian, the students are taught more significantly about what should be avoided (Rolston *et al.*, 2005). Since a strong Christian moral was evident, sex education in

Northern Ireland schools is strongly supported by powerful ideologies. It is further elaborated by Rolston *et al.* (2005) that sexuality in Ireland plays a dominant role in generating a moral system that underlines much of the sex education in schools. The issue of homosexuality is also perceived as a dilemma in Northern Ireland (Rolston et al., 2005). Public debates in Northern Ireland remain intimidating to homosexual people. For over than a decade the Peace Process has essentially changed Northern Irish society, although socio-religious integration and ethnic mixing are high on the political agenda in Northern Ireland, the Peace Process has so far failed to address the needs of some of the most vulnerable young people including gay, lesbians and bisexual (Schubotz and O'Hara (2011).

More countries in the Europe are becoming more liberal in the recent years however, conservative and religious groups, particularly Catholic groups, regularly protest against sexuality education in schools (Cipriani, 2009). In a more Catholic Church influenced countries such as in Italy, the Vatican influences some political decisions and social policy using the Christian Democrat Party. The attitudes and opinions of people in Italy tend to be traditional and 'moralistic', and sexuality education is a very controversial subject (Parker et al., 2009). Similarly in Lithuania, sex education is strongly opposed by a small vocal group of conservative and religious organisations, who are influential in the government.

In contradiction to Islamic religion and Christianity, the Torah (Judaism holy book) does not outlaw sex, as it does many other types of sexual relationships and the child of such a union is not considered illegitimate. Nonetheless, marital sex is considered ideal, and premarital sex is traditionally not approved of[8].

There are many verses in the holy Quran regarding sexual relationships (Noibi, 1993 as cited from Tavakol et al., 2003). However, this can be argued by the realities of Muslims nowadays. For instance, Chakraborty (2010) who discusses about Muslim girls in the bustees, Kalkota India in which the society or family members are overly

[8] http://www.myjewishlearning.com/life/Sex_and_Sexuality/Premarital_Sex.shtml (online on 03rd August 2015).

protected and kept under watchful eyes and found there is evidence that some Muslim Indian girls may choose to engage in pre-marital sex.

One of the significant understandings of sex education in Islam is that it starts in a family. According to Fowler (2004), 'The fate of nation hinges on its families. And the fate of families hinges on the honour and dignity accorded to marriage'[9]. The advantage of formal marriage is strongly celebrated by religious conservatives and children in such unions are more likely to have positive relationships with their fathers than those whose parents are unwed (Young and Nathanson, 2003). The studies presented by Halstead and Reiss (2003); Al-Dien (2010), Bennett et al. provide good evidence of such commitment cause much stronger in family relationship and god's worshipping particularly religion; is not different in this respect from any religious community.

The impact of the family on the child's development, studies have investigated the role of the family in the child's sexual behavior (Kirana et al., 2007). Several researchers have reported that high levels of parental monitoring were linked with lower sexual risk-taking behavior (Kirana et al., 2007; Jacobson and Crockett, 2000; Li et al., 2000). However monitoring can only be effective, if the teens freely disclose information about their activities (Stattin and Kerr, 2000). Muslim teens are not likely to reveal their sexual activities and relationships because it is against Muslims parents' views about sex (Halstead and Reiss, 2003). As strengthened by Orgocka (2004:256), parental awareness about sexuality leads to immoral sexual activity create obstacles for young Muslim girls to obtain information about reproductive health. For the Muslim teens to do so is considered as 'sinner, implying not just 'bad mannered' but a moral transgression culturally and religiously.' Perhaps a response to this is that sex concepts are reflected in the Islamic laws and teachings that the Muslims must adhere to. Marriage and family institutions in Islamic perspectives can avoid unlawful pregnancies, inheritance rights, incest and status of the family which is highly valued in Islam.

[9] http://www.marriage.org.au/index.php?option=com_content&view=article&id=23&Itemid=3 (online on 03rd August 2015)

2.3 PERCEIVING WESTERN-BASED EDUCATION: DEFINITION OF SEX AND RELATIONSHIP EDUCATION AND ISSUES

Many countries across the globe have not implemented sex education policy within their education system because the complexity of the debates surrounding sex education. The type of sex education programs and contents are among the issues that are debated. Questions on whether abstinence-based program or comprehensive sex education is effective than the other are also explored by many studies. The debates surrounding 'sexual abstinence-only' message before marriage has not been clearly defined and in addition, there is no consensus made whether sexual abstinence is a protective health behaviour or something more inclusive (Ott et. al., 2006 as cited in Koffi and Kawahara, 2008). However, discrimination against girls (LeClair, 2006) and gender stereotypes exist in Abstinence-Only programs which potentially threaten and cause specific harms for women and girls (Kay and Jackson, 2008). The latter authors further explored the 'tangible negative effects' (Kay and Jackson, 2008:19) on the physical health and psychological of women who inexplicably endure the consequences of unprotected sex, unplanned pregnancy and STIs. These stereotypes were distinctively regarded as 'negative' which in contrast, the theologian researchers and conservative groups would view abstinence to be the best strategy to eliminate pregnancy outside wedlock and sexual health diseases (Al-Dien, 2010; Rahman and Islam, 2008). To narrow down the vast literature, in this chapter, the working definition of Sex and Relationship Education (hereafter SRE) is used and as suggested by Sex Education Forum:

> SRE is learning about emotional, social and physical aspects of growing up, relationships, sex, human sexuality and sexual health. It should equip children and young people with the information, skills and values to have safe, fulfilling and enjoyable relationships and to take responsibility for their sexual health and well-being. (Sex Education Forum, 2010:1)

In general, SRE is learning about sex, sexuality, emotions, relationships, sexual health and ourselves (National Children's Bureau, 2003a)."[10] To begin with, it is important for

[10] http://www.ncb.org.uk/media/229338/sex_and_relationships_education_framework.pdf, (online on 29th December 2014)

me to point out that the concept of "sexuality" as widely used covers the concept of total well-being, encouraging health and socio-ecological perceptions (Clark, 2001). SRE enables to develop personal and social skills and a positive attitude to sexual health and well-being (National Children's Bureau, 2003b).[11] SRE is referred as 'a comprehensive, rights-based approach to the subject that covers both the physical and biological aspects of sexuality as well as emotional and social aspects.' (Parker et al., 2009:228). There are many writers who use sex and sexuality education alternately and such terms itself create conflicts and consensus on youth's understanding on sex and sexuality whether to look at either the biological or sociological perspectives or both. School-based SRE based on reviews of international research show that SRE can have a positive impact on young people's knowledge and attitudes as they will be more likely to delay the onset of sexual initiation and reduce pregnancy rates (Family Planning Association, 2011).

In the following sections, I will discuss the current debates in this field which revealed that there are many issues that stretched from policies, parliamentary discussions, parental oppositions and pedagogical concerns of SRE and practice. It is very important for me to address that the context of the following discussions is mostly derived from the United Kingdom and United States of America. However, studies from other countries are also included here, for instance South East Asian countries.

These 4 P's issues will be discussed in the section below:

2.3.1 Parliamentary Discussions in the United Kingdom

There is extensive policy interest in teenage sexual health which often manifests itself of concerns about family planning and the risks associated with gender and responsibility for use of contraception (Brown, 2015). Several countries in South East Asia, including Thailand, Laos and Vietnam, have promoted family planning in sex education (Smith et al., 2003). In comparison to Sex and Relationship Education in the United Kingdom, SRE motivations have changed over times. Iyer and Aggleton (2015:3) examined perspectives on sex education in Health Education Journal (HEJ)

[11] http://www.ncb.org.uk/media/183641/sre_and_school_governors.pdf, (online on 29th December 2014)

which discussed the changing motivations of sex education from preventing premarital sex, to a range of focus on preventing sexually-transmitted diseases, teenage pregnancy and HIV in the 1980s, to the provision of sexual health services alongside with sex education in the 2000s. According to Biddulph (2007:2), he explained 'the motivation of SRE is driven by evolving the understanding of the importance of sexuality and important global health imperatives'.

Since British experience of youthful pregnancy appears to be a social issue (Arai, 2009), SRE in the UK has increasingly linked with sex education policies (Lewis and Knijn, 2002) which are generally considered as public policies that act as reflections of broader social and political climate (Weaver et al., 2005). Claims about the quality of SRE to contribute to social change have increased a wide range of school-based initiatives concentrating at diverse groups from varied social and cultural circumstances (Rosen et al., 2004). Furthermore, ensuring that SRE has a timetabled slot in school guarantees that no child or young person will be neglected on vital information[12] (National Children's Bureau, 2010). Most of these initiatives have focused on young people, who are seen as a main target for policies to promote social inclusion through increased educational achievement, improved health and reduced teen pregnancy, abortion and HIV/AIDS occurrence (Kirana et al., 2007 and Nobelius et al. 2010). UK Youth Parliamentary members actively engaged in SRE have suggested that:

1. SRE should be an entitlement for all children and young people and taught as part of statutory provision of PHSE.
2. No School should be able to opt out of delivering good SRE to their pupils and this includes primary schools, faith schools and academies.
3. SRE should be taught throughout a pupil's time in education.
4. Schools should employ more trained staff and specialist personnel to teach SRE, and not rely on geography, history, science teacher etc.
5. Relationship should be taught as part of SRE.
6. The implications of teenage pregnancy should be taught to all students.

[12] http://www.ncb.org.uk/media/494585/sef_doessrework_2010.pdf, (online on 29th December 2011)

7. OFSTED should inspect PSHE more effectively and take into account what pupils' experience of their SRE has been.
8. All young people should be able to access a confidential Sexual Health Service which should be clearly advertised through PSHE lessons, and be open at times convenient to young people.

   (UK Youth Parliament, 2007:8–10)

Additional to the recommendations above, both the British Youth Council and UK Youth Parliament (October 2014) urged all political parties to commit to statutory SRE including to address real life issues including relationships, consent, digital safety, internet photography and safeguarding. Due to the increase access of internet, young people need to be taught about safeguarding about the dangers of internet. The Sex Education Forum provides useful resources to help schools to improve their SRE programmes and other organisations which seek to raise standards in SRE. However, these are the limitations of SRE approach in the forum. During an adjournment debate in 2014, the guidance published by the PHSE Association, the Sex Education Forum and Brook was argued to be outdated because it does not recognise the changes in technology and the legislation since 2000 to prevent young people from online bullying, inappropriate online content, harassment and exploitation (Long, 2016). Furthermore, globalisation influences also have increased young people's exposure to different ideas and experiences including in relation to love, sex and personal freedom (Chakraborty, 2010). In Australia, parents often express their great worries that globalisation has resulted in increased rates of unprotected sex, unplanned pregnancies, abortions, and sexually transmitted infections (Manderson et al., 2002). Both the impact of media and growing global accessibility has been considered as sources of information regarding topics that are 'off-limits' (Gabler, 2011:2), for instance in India, media is seen as a battlefield for the young minds and Indian culture as foreign influences might damage traditional values.

2.3.2 Parental oppositions

The inclination that children want to learn about sex and relationships from their parents is done in a review of literature studied by Turnbull et al. (2008). The finding seems to suggest that parents are the main source for teaching youths about sexuality and moral values regarding sexual behaviour but in the study by Orgocka (2004:260), mothers reported that their parents did not talk about sex because 'parents were afraid we might end up with a boyfriend or experiment.' Nowadays, this sexual education between mothers-daughters and fathers-sons (Noibi, 1998; Orgocka, 2004) are not practiced by many Muslims parents because of the cultural and traditional upbringing (Mahdavi, 2007).The sex education curricula is generally opposed by many Muslim parents and students abroad, for instance in the United Kingdom (Halstead, 1997), Australia (Sanjakdar, 2004) and Canada (Al-Dien, 2010).

For instance in the USA, Orgocka (2004) argued that from parental points of view, liberal and comprehensive sex education sometimes mismatch with what the information their children obtain in home/religious institutions. Similarly, this is corresponding to a study made by Halstead (1997) within the context of UK. It creates question, where should information about human sexuality be taught to children and youth: at home, at school, at religious institutions, or at some combination of the above? It also creates questions of what beliefs about minority sexual orientations should be taught (Blake and Katrak, 2002). Despite the complexity of the association between religious and conservative attitudes towards sex, links between sex education, religions and multiculturalism studies are largely undocumented. This in turn has led some questions to arise, how does the current SRE practice meet the individual needs of the students that come from various cultural and religion backgrounds.

One of the main arguments presented against sexuality education or Sex and Relationship Education has always been that conversing about sex with young people will encourage them to be 'sexually experimental' (Advocates for Youth, 2006). Giving youths the tools to have 'safe' premarital sex is contrary to Islam and Muslim code of behavior. Parents perceive that SRE classes particularly challenge transmission of Islamic values to young girls by teaching them to conceptualise decision-making regarding sexual behaviour as a personal choice rather than a family matter (Orgocka, 200:256). As a result, most Muslim parents object to their children participating in sex

education classes (Halstead, 1997) because parents are given the choice to withdraw a child from SRE. However, the UK Youth Parliament (2007) argued that parents should not be able to make the decision to withdraw their child from SRE. For instance if SRE is within PSHE as a statutory subject, parents would not have the rights to opt out. School Reform Minister in the United Kingdom (December, 2014) explained that it is crucial to be more sensitive about parents who choose to withdraw their children from learning SRE and this parental rights should be maintained. Similar conclusions were reached in the World Health Organisation Standards for Sexuality Education in Europe (2010):

> Sexuality (and relationships) education becoming a mandatory curriculum is an important aspect for delivery, because – as experience in some countries have shown – the attention paid to it is likely to diminish after the mandate has been lifted. On the other hand, making it mandatory does not automatically lead to good quality and holistic education (SPICe, November 2014).

In other words, without consistent and quality, a compulsory programme does not guarantee successful impact. Based on this reason, the UK Government decided to make the subject statutory in the primary levels and compulsory in the secondary levels.

2.3.3 Pedagogical Concerns

Research released by Brook (2011), a UK based website showed that in 2011, 47% of secondary school pupils in the United Kingdom think their school's Sex and Relationships Education does not meet their needs. The insufficient of appropriate sex and relationships education in schools and at home means 81% of teenagers are getting most of their sexual health knowledge from less trusted sources, leaving them unprotected and defenceless[13] in combating what they have understood from their peers, internet or other untrusted resources with their culture and religion. Emmerson (2007) presented that the quality of SRE provision is very patchy, often mentioned too late, too little and too biological. Members of the Youth Parliament (MYPs) similarly have viewed that the SRE that they learned in school is either too little, too late, too

[13] http://www.brook.org.uk/application/brookpr/index.php?option=com_brookpr&view=article&id=91&Itemid=640, (online on 15th January 2012).

biological and does not provide adequate information on relationships (Sex Education Forum, 2008b).

It suggests that starting SRE in the primary level may not be a universal reality due to its status as a non-statutory curriculum item. Many organisations support for the call for PHSE to become a statutory subject (UK Youth Parliament, 2007 and Sex Education Forum, 2006). In 2014, the British Youth Council and leading youth organisations call for statutory sex education in all party manifestos (UK Youth Parliament, 2014). In the same year, Scottish Government was urged by the Scottish Parliament to initiate comprehensive sex and relationship education (SRE) into the Scottish Education Curriculum and make it statutory for all schools to teach. Therefore, reviews of the impact of making SRE a statutory requirement for schools were demanded. European Parliament (2013) argued that even though SRE is mandatory by law, statutory provision does not ensure quality. The quality of SRE teaching is emphasised in order to have a huge impact on the quality of the young people's experiences (National Children's Bureau, 2008b). As presented by the UK Minister of State for School Reform:

> Good Quality PSHE provides the bedrock for young people to survive in the modern Britain and to cope well with the pressures of an academic curriculum (UK Minister of State for School Reform, December 2014)

Assessment of pupils' progress in PSHE is done by evaluating changes in attitudes and the extent to which pupils are developing relevant skills (UK Youth Parliament, 2007). It has been argued that the results of an efficient education cannot always be distinctly seen. However, experts say that the indications that SRE is of a higher quality is when the level of HIV infection is lower, teenage pregnancy is rarer and gender equality is more respected (SPICe, 2014). The UK Minister of State for School Reform (2014) also stated that the 'destination' measures for instance, the destination that the young people go when they leave school. He added that it should be a good reflection of the quality of both the academic and the wider school curriculum including PSHE. Kirby (2007) described that positive results of SRE reduces risk behaviours. The evidence presented by SIECUS (2010) is a strong proof that sex education programs promote both abstinence and safe sex through condom use and reduce sexual behaviour. Similarly, comprehensive sex education has been proven effective as there

is a success at increasing use of contraception other than condom, delay onset of sexual initiation, decline in teenage pregnancy, HIV and STIs and reduce incidence of unprotected sex (Advocates for Youth, 2009). The expectations that SRE may be instrumental in achieving positive outcomes give me as a social researcher a pause. This is due to the potential contributions of SRE suggesting that SRE may have considerable potential benefits to offer (McKeon,2006)[14] nonetheless in practice few have been proven (Wells, 2009)[15] because effective SRE can only be achieved through good delivery and quality of teaching and learning (Wells, 2009; Rosen et al., 2004).

2.3.4 Practice

The possibility of adolescents to engage in risky sexual behaviours has been mentioned in many researches (Simons et al. 2009; Runeborg, 2004; Ollis and Mitchell, 2001 and Puri, 1999). Adolescents who engage in sexual behaviour at earlier ages are more likely to have lifetime sexual partners, greater risks of unwanted pregnancy and greater chances of getting HIV/AIDS and other sexually transmitted infections (Simons et al. 2009). A classic study by Cooksey et al. (1984) found no association between the probability of early sexual activity and having attended sex education courses. Similarly, several studies mentioned that students who have attended sex education classes are less likely to experience pregnancy and more likely to use contraceptives (Al-Dien, 2010, Athar, 1996).

As studied, quality practice of SRE will improve young people's attitudes towards sex and improve sexual health behaviour. In UK Survey, 40% out of 20,000 young people under the age of 18 perceived that SRE that they obtained was either poor or very poor (UK Youth Parliament, 2007). Haste (2013) addressed the problem of boredom, frustration and blame of young people when a group of young people discussed about their experience in the classroom. Over-reliance on worksheets is a common criticism of SRE and the group was comparing their primary school experiences with secondary school as the teachers were often described as distant and uncaring. The UK Government decided to add sex education to its existing statutory curriculum for

[14] http://www.advocatesforyouth.org/publications450 ,(online on 16th June 2012)
[15] http://www.famyouth.org.uk/publications/too-much-too-soon.pdf, (online on 16th June 2012)

England, in order to improve consistency and quality of provision (SPICe, November 2014). Review of PSHE Education statutory stated that:

> In October 2008, the Government announced its intention to make PSHE education statutory and launched this Independent Review to investigate the most effective way of achieving this [..] These reviews argued that PSHE education is not given sufficient priority in many schools and that making the subject statutory is the key to raising its status and improving provision. (Macdonald, 2009: 5-7)

Among the issues of SRE quality as studied by (Che, 2005) are the lacked of more trained staff and specialists to teach SRE. However, the hidden cost of training may be high and the sum of budget may not be sufficient. In 2014, the amount of 75,000 pounds was allocated for PSHE, and the Education Committee argued that the sum of money was too little for an important subject (UK Parliament, 2014). This shows that PSHE is not among the major priorities of the UK Government.

2.4 CHALLENGES OF DIVERSITY IN SEX AND RELATIONSHIP EDUCATION

Until recently, surprisingly little had been written about SRE, multi-ethnics and religions. However, a number of authors have written about sex and relationship education within a Muslim minority (See Sanjakdar 2013; Sanjakdar 2009). On a similar vein, Kay (2006) noted that there is an increase in cultural diversity in Britain which has fuelled a growing literature on the situation of minority populations highlighted by a complex notion of 'ethnicity' that is socially constructed which represents ancestry, history and culture. There is a need to address diversity in SRE to promote the interest of the minorities.

In the next section, the relationship between Sex and Relationship Education and the political ideal of selected countries are explored. In particular, different school-based SRE policy is reflected in minority groups which looking for culture and religion sensitivities.

2.4.1 Sex and Relationship within the Context of Multi-ethnicity

Factors that influence the perception of sexuality and sexual behaviour include age, class, ethnicity, levels of conservative views opposed to liberal ideas, as well as upbringing experiences (Gabler, 2011). For example, study by Al-Dien (2010)

recommends that sex education programs in Canadian schools were opposed due to its being not sensitivity to the religion and cultural differences to the diverse youth that need to obtain this information. It is acknowledged that there are some countries have several nationalities, ethnic and religious groups of people within their country. 'Immigrant nations' like Australia, Norway and Canada have usually been formed by relocating indigenous people (Al-Dien, 2010; Bakke, 2001 and Iredale and Fox, 1997). The questions of how these people are to be treated and how their needs are to be accommodated in the new states as minority groups are usually arose. These differences must be learned when we address what multiculturalism means as a political ideal (Gibson, 1984).

One of the things that need to be considered is ethnic and cultural diversity.[16] Different ethnic and cultural groups may have different attitudes towards SRE. For instance, in the Baganda family (Uganda), the role of ssenga (paternal aunt) is important, in which traditionally responsible for the discipline of all children including sex education for girls before marriage (Nobelius et al. 2010). Therefore, it is understandable that Uganda people are more likely to support educational programming that is considered necessary for the preservation of their cultural and language integrity to meet their needs (Grover, 2007:60).

Minority groups specifically those who are religiously adhering to Islam, Catholic and other religions think that comprehensive sexuality education is too liberal (Al-Dien, 2010) and information about contraception methods, sexual orientations such as homosexual and bisexual should not be taught in schools (Halstead, 1997). Muslims view pre-marital sex and pregnancy outside wedlock as *haram* (forbidden) (Al-Dien, 2010 and Sanjakdar, 2009). A study by gay, lesbian and human sexuality researchers (Røthing et al., 2010) suggest that a person's sexual orientation is not innately sinful and has a virtue of tolerance in the society. On a contrary, most religious conservatives believe that sexual behaviour is sinful and can be fixed (Bennett, 2007).

The tension between minority, multiculturalism and the need to foster a sense of ’inclusion’ across different ethnic and religion is also apparent in the SRE. In

[16] http://www.pentvalley.com/%5Cfilestore%5Cpolicies%5CSex%20%20Relationships%20Education%20Policy.pdf, (online on 15th January 2012)

countries that are more common to HIV such as South Africa has mandated to integrate curriculum policies and life skills education in schools beginning in the early childhood (Bhana, 2007). All children and young people have the rights to receive SRE regardless of their gender, sexual orientation, disability, ethnicity, culture, age, religion or belief or other life experiences, particularly HIV status and pregnancy (National Children's Bureau, 2003b). The denial or restriction of educational opportunity is a major vehicle for suppression of minorities (Grover, 2007:59). Further, there often exists segregation of SRE for minorities (as illustrated in Al-Dein, 2010). This often involves those schools providing a lesser quality of sex education to minority group of children with regard to religion and culture (Wells, 2009). Therefore, if some meaningful level of educational integration is to occur and become a factor in promoting an inclusive SRE, the issues of individual differences in beliefs, cultural values and faiths must be addressed.

More countries in the Europe becoming more liberal in the recent years however, conservative and religious groups, especially Catholic groups often protest against sexuality education in schools (Cipriani, 2009). In a more Catholic Church influenced countries such as in Italy, the Vatican influences some political decisions and social policy using the Christian Democrat Party. Attitudes and opinions of people in Italy tend to be traditional and 'moralistic', and sexuality education is a very controversial subject (Parker et al., 2009). In Lithuania, sex is strongly opposed by a small vocal group of conservative and religious organizations, who are influential in the government. A classic study by Powell and Jorgensen (1985) opposed that a church-based sex education program presents comprehensive sex education that enable examining personal values and discussing personal responsibility and controversial issues. Such setting appears to be complementary for promoting sex education within the context of religion.

In Northern Ireland, the task of the priest is to encourage a solution that will offer peace, founded real justice, his methods to nurture reason, restraint and as much good faith as possible. His function is not to take religion out of politics but to put more religion in; not sectarianism, not a divisive denominationalism, but true religion, which sees men as brothers under the Fatherhood of God (Coulter, 1969:407). It is the case in Northern Ireland where schools are relatively conservative Christianity introduces

what is taught in what manner and perhaps more significantly what is avoided (Rolston et al., 2005). In relation to sex education, it is explicitly formed by religion and rather isolated society in significant ways from many other parts of the Western European societies. Since a strong Christian moral was evident, sex education in Northern Ireland schools was strongly supported by powerful ideologies. It is further elaborated by Rolston et al. (2005) that sexuality in Ireland plays a dominant role in generating a moral system that underlines much of the sex education in schools.

Problem faced in schools are the teachers face a 'morality versus practicality' dilemma when discussing issues such as sex out of wedlock and the use of contraception methods rather than naturally. On a similar line, controversial issues such as homosexuality were perceived as a dilemma (Rolston et al., 2005). Public debates in Northern Ireland remain intimidating to homosexual people. This has been strengthened by Schubotz and O'Hara (2011), for over than a decade the Peace Process has fundamentally changed Northern Irish society although socio-religious integration and ethnic mixing are high on the political agenda in Northern Ireland. The Peace Process has so far failed to address the needs of some of the most vulnerable young people including gay, lesbians and bisexual. It is precisely these issues of inadequacies and the implications of the present sex education that most of these issues are addressed.

In 2007, in Indonesia, comprehensive sex education is not made compulsory in public schools. The subject offered in schools is biology and generally introduced in the second year of high school. Basically, the mode of teaching is book-based and no opportunity for discussion. In Indonesia, they prefer peer education model which is the most successful practice among Indonesian youth (Pangkahalia, 1997). As commented by Smith et al. (2003), most countries in the South East Asian consider about talking explicitly about sexual to primary school students because it is inappropriate and only should be discussed in the high school.

On a similar line, Islamic schools in Indonesia such as Pesantren[17] offers sex education under the rubric of religious education based on the guidance of Al-Quran and hadith. However, there is no standardised curriculum from Pesantren but a

[17]*Pesantren* is an Islamic boarding school in Indonesia, also called as Pondok. Definition from:http://en.wikipedia.org/wiki/Pesantren

positive sex approach from an Islamic perspective is taught (Bennett, 2007). The sex education within religion focuses on gendered roles, obligations in marriage, responsibility to maintain good reproductive and sexual health, and how sex is related to the act of god's sanction and worship. Islamic understandings of reproduction and sexuality are well-suited with the provision of sex education regardless of cultural sexual taboos that may be covered onto local understandings of Islam (Sanjakdar, 2009).

Most South-East Asian countries studies highlighted on the cultural barriers obstructing on discussing sex and emphasized many teachers are not ready to deliver such education due to lack of understanding (Smith et al., 2003). Most countries also reluctant to introduce primary school sex education beyond science-based knowledge (Smith et al, 2003; Kirana et al.,2007). This is a major concern especially for countries where many students do not progress to secondary school education. Therefore, there is a need to reassess the age at which sexual and reproductive health is provided to students' education (Smith et al, 2003). Cultural sensitivities is also seen as a central obstacle to the delivery of sex education in school that relate to religion, community and adults such as parents and teachers discomfort in explaining such education.

The studies above has confirmed that positive effects of a programme are more expected if it is culturally appropriate and adapted to or developed in the context of the local cultural setting (Visser et al. 2004 cited in Helleve et al., 2009:190). Consequently, to learn more about the significance of culture, we do not only need to understand the country's political perspectives but we also need to contextualise the perspectives of the various groups including religious heads, teachers and parents (Helleve et al., 2009). The information above also showed that understanding on multicultural environment proves that the needs and interests of the diverse groups are addressed (Bhatta, 2013). Furthermore, policies related to multi-cultural education stopped all types of discriminations related to gender, caste, religion, sex and culture (Bhatta, 2013:233). Deconstruction of monoculture is needed to create multiculturalism and respect for discriminations (Kailo, 2000). From the above discussion, it is obvious that provisions and recommendations for SRE accepted the multicultural and multi-ethnic situation of the country. This review of the literature

illustrates there is a lack of awareness of multicultural issues in SRE, therefore the education system has a responsibility to reflect greater forms of cultural diversity through education (Bhatta, 2013).

2.5 LITERATURE ON BRUNEI AS A STUDIED CONTEXT

Brunei is an Islamic country based on an philosophy which governs the daily life of Bruneian people which is called Melayu Islam Beraja[18]. MIB can be divided into three separate constituents: Malay, Islamic and Monarchy. Malay is the language spoken and culture of the Bruneians. Islam is the official religion and Sultan is the head of the religion. Monarchy means Brunei Darussalam is an Islamic Monarch by a ruling Sultan. Most changes in Brunei are appointed by the decree of the Sultan.

MIB is important to Bruneians people because it is a national identity that the Bruneians adhering to. With a total population of 410,000 (CIA World Factbook, Brunei, 2011), with 67% of the populations are Muslims. Brunei is a multi-ethnic and multicultural society comprising of various nationals (Government of Brunei, 2008). Apart from the 7 group of Malay ethnics, the other ethnic groups include Chinese, Indian, Iban, Dayak and Kelabit. Expatriates comprises up to 21% of the population, 9% of whom are the European nations, Australia and the USA. The remaining 12% are from Indonesia and the Philippines (Government of Brunei, 2008). These features necessitate the provision of sex and relationship education in Brunei to be appropriate to the different multi and intercultural backgrounds of the people living in Brunei, focusing not only on the local needs but also to those from other countries

[18] Melayu Islam Beraja (MIB) or better known in English, Malay Islamic Monarchy.

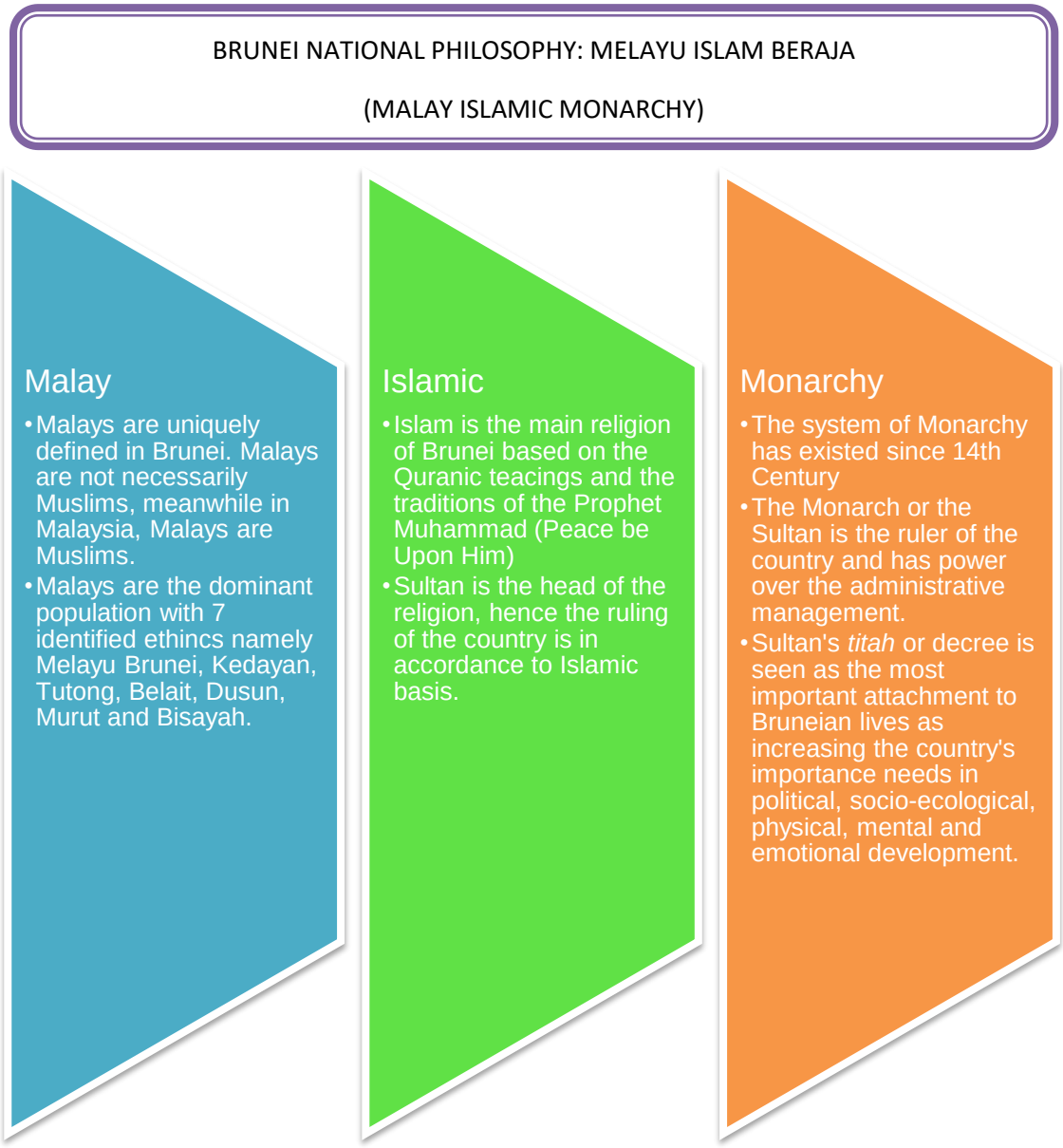

Figure 2: Brunei National Philosophy

2.5.1 Brunei as a Sharia' Compliance Country

Some media reporters interpreted Sharia' Law as an extreme and conservative interpretation of Islam[19] such as referring Brunei to enter the Dark Age following the law was written in the Quran for more than 1400 years ago. The growing debates of the new implemented of Sharia' Penal Code in Brunei has set all global eyes on the country due to its step backward against human rights (BBC News, Asia, 30th April 2014)[20]. What must have been proven excruciatingly exasperating for international right groups was their call for boycotting the Sultanate fell on deaf ears when the Sultan announced that he will not back down (The Independent UK, 30th April 2014)[21].

In spite of international condemnation and criticisms of Sharia' Law in Brunei, for instance UN critics over Sharia' Law violated the rights to be freedom of religion, voice and expression (Bloomberg, 30th April 2014)[22], a critical question was asked by the researcher whether SRE is going to survive in an Islamic environment. It has been a popular argument of different writers to argue that these conflicts of sex education often have a religious component. A few examples of such recent writing include: Al-Dien (2010) and Sanjakdar (2008). Notably in my study, it appears that most of the respondents were comfortably discussing sex within religious context and argue on the matters of SRE which are conflicting with Islam. The focus of the discussions were seemingly undertaken for religious reasons or at least accepted in the name of Islamic religion. Indeed, it was complicated to redirect the participants' attentions to place sex education out of the religious context because it inevitably involves a direct or indirect religious element.

The monarchy (Sultanate) is seen as the defender of faith based on Islamic (Sharia') law. Islam has Sharia' criminal code and this Islamic legal system are derived from the Quran and the Sunnah (the traditions) of the Prophet Muhammad. Currently, it is still undergoing revision to be fully put into effect in the nearest future and Sharia' Criminal

[19] Brunei has sought reference and assistance from Saudi Arabia who has put Sharia' Law into action for decades.
[20] http://www.bbc.co.uk/news/world-asia-27216798 (accessed on 30th September 2014)
[21] http://www.independent.co.uk/news/world/asia/international-outcry-as-brunei-introduces-sharia-law-and-takes-country-back-to-the-dark-ages-9308088.html, (accessed on 30th September 2014)
[22] http://www.bloomberg.com/news/2014-04-30/brunei-imposes-islamic-criminal-law-after-un-criticism.html (accessed on 12th October 2014)

Law Order is however, still a huge milestone for Brunei, and it will be followed by the Sharia' Criminal Procedure Code (CPC). Throughout 2011, the sultan repeatedly called for the establishment of Islamic criminal law and the monarch was critical on this because time had passed and more excuses made to postpone the Sharia' Law initiatives. Newspapers carried articles promoting Islamic law, and the State Mufti (religious head appointed by the Monarch) were also reported actively participating in emphasising the importance of ***hudud*** through his series of lectures (Brunei Times, 7th November 2014). The State Mufti also stressed that Hudud is a term of the Qur'an and it is not of cruelty or violence.

At this point, it is important to address the important features of what lies behind the lived philosophy in Brunei. For more than a century, Malay Islamic Monarchy has been a great pillar of Brunei multi-community[23] in general, despite its majority-Muslim population. The reverence of the Islamic monarchy has grown as it is moving towards the vision of becoming a 'Zikir Nation'[24]. The introduction of Sharia reflects the Monarch's piety and devotion for Islam. Consequently, Brunei has begun introducing Sharia Penal Code in gradual stages in early 2014. Brunei population is reported not too concerned because Brunei Government has gradually imposing constraints on social and civil life in the recent year, for instance the banning of karaoke boxes in arcades as a preventative measures to curb social ills (Brunei Times, 31st December 2013). Hence, in relation to this study, the imagined and idealised Bruneian Malay-Muslim person is depicted as someone who comply with Sharia Law based on Quranic teachings and the Prophet's (Peace and Blessings Upon Him) traditions, maintains honours and dignity while protecting individuals' and family's reputation despite their lived religion and Malay cultural influence.

[23] Multi community refers to a unique division of Malay race between Bruneians. Brunei has multi-Malay ethnic which is generally called as Brunei Malay but they are not necessarily a Muslim. In Malaysia, one must be Muslim to be considered as Malay.
[24] Dzikir Nation is the Monarch's desire of turning Brunei Darussalam into a pious nation.

2.5.2 Towards Realising Brunei as a *Dzikir* Nation

By the decree of the Sultan, largely efforts are made to transforming Brunei towards Dzikir nation. Islam encompasses everything. The government's vision to practice Shariah law is certainly going side-by-side with the implementation of Compulsory Religious Education (hereafter CRE). By having CRE, Brunei in defending its faith, has integrated the Islamic teachings in the education system thus to encourage Muslims in carrying out their responsibilities of living around the society in accordance with the teachings of Islam as well as achieving the Brunei's aim to become a 'Dzikir Nation' – a country that is blessed by Allah the Almighty.

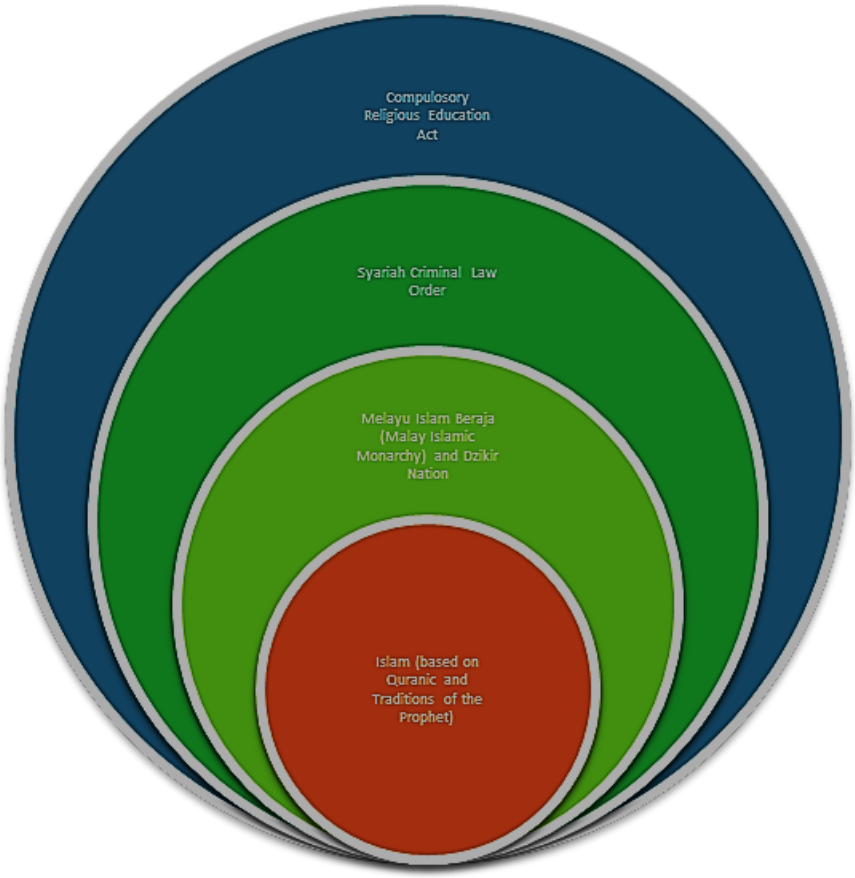

Figure 3: Linking Islamic teachings based on Qur'an and Prophet's Traditions with MIB, Sharia Law and CRE.

2.5.3 Education System based on Malay Islamic Monarchy

The Ministry of Education (MOE) required courses on Islam and the MIB in all schools that adhered to the state curriculum. Most school textbooks were illustrated to portray Islam as the norm, and often all women and girls were shown wearing the Islamic head covering. There were no depictions of other religions' practices in textbooks. The MOE prohibited the teaching of other religions and comparative religious studies. In January 2010 the Sultan decreed that religious education would be mandatory for Muslim students. As a result, private schools were required to teach Islam and made Ugama instruction mandatory on an extracurricular, after-hours basis for their Muslim students. Ugama is a six-year education course that teaches Sunni Islam according to the Shafi'i school. Schools, including private schools, could be fined or school officials imprisoned for teaching non-Islamic religious subjects.

2.5.4 Compulsory Religious Education

There have been many initiatives done by the Ministry of Religious Affairs (MoRA) in spreading and reinforcing the Islamic beliefs and practices. Recently, Compulsory Religious Education Order was passed and under the order, Religious education was made compulsory for every Muslim child born on or after January 1, 2006 in Brunei, with at least one parent holding a Bruneian citizenship or permanent resident status, which put into effect starting on January 1 this year. This year, there is a rise in numbers of pre-school students enrolment in religious schools from 6,092 last year compared to 6, 157 this year. In my opinion, this may not be the best number to reflect Bruneian Muslims parents' commitment to the new implementation of Order but it is expecting that the number will continue to rise in the following years. The Islamic Studies Department was made responsible to monitor the implementation of Compulsory Religious Education Act. In 2012, under the Compulsory Religious Education Order, parents must register their children at a religious school for a period of 7 years (pre-school to Primary 6). Failure to do so will lead to parents gets punished for committing offence that can carry a maximum fine of $5000 and/or imprisonment not exceeding a year.

There are various reasons of the implementation of the new order. Among the various reasons are to ensure that no Muslim child will be left behind from understanding the basic Islamic knowledge. The CRE is expected to meet the Sultan's expectations that there should be no one who is not able to perform prayers and recite the holy Quran. Parents have no choice but to oblige because it is already stated in the Quran that parents are responsible to ensure that their children are taught according to Islamic teaching. It is also stated in the Islamic teaching that a child who does not want to learn religious obligations is punishable by the time they reached 10 years. It is however should be understood that the punishment do not authorize to parents to act violently to their children who refuse to pray and read the Quran. Punishment is tolerable for parents to give their child a light smack (in the contexts of Islam, light smack means no face hitting, no severe hitting, it must be done with the intent to discipline the child and no verbal abuse is allowed) if they have previously resorted to other methods of disciplinary action that proved unsuccessful.

Over the last few decades, Brunei has witnessed the product of students who did not go to religious schools to get proper religious education. A number of studies by the University of Brunei Darussalam (UBD) has focused on the social problems prevalent in the Sultanate and raised concerns over the moral decline of the society. Among the findings highlighted are social problems in Brunei include juvenile crime, pre-marital sexual relationship which is condemned by Islam, having casual sex, abandoned babies, homosexuality, domestic violence and drug abuse. These studies reflect the instances of Bruneian Muslims who do not know to perform prayers, ablution, cleanliness and inability to recognise the Arabic script which is beneficial for reciting Quran. Most of these cases are originated from lack of proper religious education and practice, negligence on the part of parents, and inadequate stress on ethical and moral training in formal education system.

After the evident failure of the previous system, Compulsory Religious Education is introduced, aiming to improve the Quranic literacy and prayers and eventually improving the social problems in the country. Brunei has done a little better but *yet to see* the recovery in the country's social development. Muslims young people in Brunei have been the focus of profuse crime rates, school-dropouts and unemployment over the past five to ten years. There are many aspects that have been highlighted as the

contributing factors including education, religious fundamentalism, socialising and home. In parallel to this, the last seven years has seen an increased rate on pre-marital sex, teenage pregnancy and child abandonment. However, while the issues of why and how these are happening are receiving plenty attention, there is relatively little understood on what and how the Government devise a plan to overcome or at least, to lessen this problem in the Sultanate.

2.5.5 Sexual Health Data in Brunei

Based on the study made by Cheong (2012), Brunei's health has too much emphasis on the physical health rather than the sexual health. Between 2000s, obesity, heart diseases and high blood pressure are the top killer diseases in Brunei (Department of Health, 2011). MOE investment in Physical Education in schools is one of the ways to reach the mass population and be educated about these diseases (Cheong, 2012). The highly taboo of psychiatric issues and STIs are associated with stigma and taboo which was reported in *Majlis Ilmu* 2012.

The sexual health concern in the country has been increasing over the years. The average number of pregnancies per 10,000 adolescent girls who attended the Maternal and Child Health (MCH) clinic from 2004 to 2008 was 1 in 78. In 2007, there were 7 totals of birth cases below 15 years old, 4 reported cases in 2008 and 6 reported cases in 2009. In records between 2000 until 2006, there are 2,176 teenagers including married teenagers gave birth. According to Ministry of Health's statistical data which was published in a local newspaper, the youngest mothers in Brunei Darussalam are two youths aged 11 to 12 reported to give birth in 2009. In the same year, 266 teenagers conceived their first child, with 141 of them aged 17 to 18. In addition, 51 pregnancies were out of wedlock when they first recorded at maternity and children's clinics. Age of young mothers aged 15 to 19, has shown an increase of births for the past 5 years (Borneo Bulletin, 08th April 2010).

The data from Ministry of Health (2010) also revealed that the number of Sexually Transmitted Infection (STI) cases per 10,000 adolescents has increased 12-fold between 2000 and 2008. In 2000, the incidence rate (new cases) was 1.65 per 10,000 adolescents, while in 2008 it was 12.66 per 10,000 adolescents. There is a rise in STI cases such as gonorrhoea, syphilis and chlamydia, with 363 cases reported in 2010

alone, and 57 of the cases are among youth under 20 years. The highest cases of STI in 2010 are Gonorrhoea infections with 312 cases and there is a growing trend of Gonorrhoea infections until 2009. The second highest cases in 2010 are Chlamydia Infection with 29 cases, Syphilis (all forms) comes as the third highest cases with 7 cases and HIV (local only) is the fourth highest cases with 5 cases.

It is further recorded that 57 local cases are reported living with HIV from 1995 until 2010. Of the 57 cases, 11 cases are reported in 2009 and 5 cases are reported in 2010. Among the cases, 36 percent are youths aged between 20 until 29 years old. The commonest mode of transmission of HIV reported from 1986 until 2010 is through sexual activities. It revealed 87 percent cases are involved. In the past 6 years (2005-2010), 97 percent cases are transmitted through sexual activities, of which 71 percent from heterosexual, 23 percent from homosexual and 3 percent from bisexual. In 2001, there were also 2 cases reported from mother to child transmission. Most of the cases diagnosed are between the ages of 20 – 29. The age diagnosis of HIV between 1987 until 2010 shows that there is no teenagers aged between 10 until 19 are diagnosed with HIV.

According to the report, there is an ongoing increase of STIs such as gonorrhoea and Chlamydia in Brunei Darussalam and these are commonly affecting those in 20 – 29 years age and those among the 10 – 19 years age group. Positively, HIV remains low in Brunei but it is not exceptionally increasing over the years (Brunei Int Med, 2012:285).This is corresponding to a study by Panchaud et al. (2000) which stated that young people appeared to be disproportionately affected by STIs, which reported that 14 developed countries finding up to 50% of gonorrhoea cases and over 50% of Chlamydia diagnosis occurred among 15 – 24 years old. Similarly, young people in the UK continue to be the most affected group by STIs, with about 63% of new diagnoses in women and half in men occurring amongst 15 – 24 years olds (Department of Health Brunei Darussalam, 2014; Brown, 2015).

Even though the data shown here are comparatively small but we should not be too complacent about this given that Brunei is known for its small populations and this information act as significant information for my study. Apart from this, cases of STIs continue to be high including in teenagers. The presence of STIs increases the risk of

HIV infection (See Health Information Booklet 2010, Ministry of Health Brunei Darussalam)[25]. In 2010, the total number of cases of people with Cervical Cancer in Brunei Darussalam is 182 cases. This is the third most common cause of death in Brunei (Mohsin, 2011).

This considerable evidence has indicated that sexual health and youth sexual risky behaviours exist in the country. Still there is inadequate support at all levels especially in supporting the needs of students to be educated about SRE. The nature of difficulties associated with SRE can make inclusion of students who are deep-rooted with religion and cultural backgrounds a great challenge.

2.6 RESEARCH GAP

Brunei is culturally and ethnically very diverse despite its small geographical size. Therefore, it is worthy to note that very little study has been involved these areas of interest specifically to explore the ideas and experiences of the Muslims in SRE. This is not to suggest that the non-Muslims have not been included in the studies; however this study is set purposely exploring the conjoining of Muslims in a majority Muslim country and their perceptions of sex education which are relatively few in the literature. Most literature focuses on the attitudes and perceptions of Muslim minority in the Western world towards sex education. However, findings produced from these investigations will be made as suggestions on the potentially unique curriculum of sex education in a Muslim country. Current studies conducted in Brunei and internationally related to the topic of this study identify:

1. Sociological studies of Sex and Relationship Education (hereafter, SRE) and religion have overwhelmingly concentrated on the experience of Muslim minorities (Sanjakdar, 2008 and Al-Dien, 2010) and Christian denominations (Rolston et al., 2005) in obtaining SRE knowledge.

2. The research gap highlights the underdeveloped perspectives of linkages between SRE in Brunei and readiness concept.

[25] http://www.moh.gov.bn/satisticshealthguidelines/download/HIB_2010.pdf, online on 10th November 2011.

2.7 CHAPTER SUMMARY

This chapter reflects some of the selected practice in the field which suggests the current practice in SRE relates to less 'sensitivities' to cultural differences and religion. The studies imply that failure to recognize religious and culture dimensions creates conflicts between parents and schools, values, religious teachings and peer knowledge and values. If considerations of cultural differences and religions are taken into considerations in teaching sex education, it is possible that sex is no longer seen as taboo because the explicit contents of sex and sexuality will be focused in the pervasive influence of culture, beliefs, and religion in defining one self. Also, from the studies, the complicating factors between countries vary widely in politics, the role of the policy makers and the role of religion in education matters in discussing SRE policies. In addition, this chapter has selected countries' sex education models in teaching sex education to different culture, ethnicity and religiosity. The issues face the minority group was also discussed. Clearly, the messages of religions about pre-marital sex are similar that is forbidden. Therefore, from religion perspectives, SRE could be contravening with its teachings and beliefs.

There have been no reported studies conducted locally to investigate the perceptions of parents and students on their understanding of the need to employ SRE in the education system. Bruneian teachers will only be successful in educating SRE if they are addressing the needs of Bruneian students. The number of teen pregnancies in Brunei is increasing and is anticipated to continue increasing. It is necessary for the policy makers in Brunei (Ministry of Education, Ministry of Health and Ministry of Religious Affairs) and the school administrators to be prepared to meet the challenging needs of the Bruneian young people if they include SRE in the country. It is hoped that the results of the study would highlight the specific areas of cultural and religious needs for the policy makers to further think about the teaching and learning of SRE with young people in Brunei. From this literature review it is clear that SRE can become a controversial subject for students who are adhering to their values, cultures and religions as there are differences among cultures and Islamic beliefs regarding sex and relationship. This can exacerbate the efforts to design a curriculum that can be

implemented in Brunei without serious political controversies and consequences (Dhiri, 1999; Tavakol et al., 2003).

CHAPTER 3
CONCEPTUAL FRAMEWORK

3.0 CHAPTER OVERVIEW

The previous chapter provided a background of the literature linking the characteristics of sex in Islam based on the Quranic scriptures and Brunei as a studied context. In the following sections, the framework of chaos or complexity and the key concepts employed in this study are introduced. In the second part of this section, a theoretical discussion of the various perspectives of readiness concept is presented, positioning the perspective of this thesis.

3.1 POSITIONING THE PERSPECTIVE OF THIS THESIS

The purpose of positioning the context and perspective of this study is to see the results that are almost similar to reality. The results also should bring us closer to understand the complexity of Brunei's readiness for effective SRE improvements. The framework of the study is conceptualising several components linked to the concept of readiness. In order to conceptualise, the following perspectives are considered.

3.1.1 COMPLEXITY THEORY PERSPECTIVE

Originally, Complexity Theory has been used in the fields of mathematics and computer science (Baofu, 2007 and Byrne, 1998). Complexity Theory is known as a theory of change, development and adaptation (Keith, 2006). The ideas represent by complexity theory have implications for the way we think, understand and engage with the world (Byrne, 1998). By applying this theory in my study, it will enable readers to appreciate the contributions which complexity theory can make to the crucial issues of 'preparedness' or 'readiness' state of the organisation, group or individual. The study uses Complexity Theory to argue that in complex organisations such as governmental ministries that provide public services, their readiness can be encouraged for effective SRE improvements. Some authors explored the possible usefulness of Complexity Theory in an education context. For example, Keith (2006:3) stated that 'different organisations and educational systems, institutions and practices exhibit many

features of complex adaptive systems. The features include, being dynamical and emergent, sometimes unpredictable, non-linear organisations operating in unpredictable and changing external environments'. Within the framework of education, Keith (2006:6) also describes the complexity theory can 're-awakening of several educational topics which have been relatively silent in climates of high control of education, heavy prescription and mandated contents, reinforced by high-stakes assessment systems and constant surveillance of an individual's performance against predicted targets'. According to researchers, Complexity Theory clarifies a system's sensitivity to the initial conditions and describes how order emerges from lower level of behavioural complexity to higher levels of complexity through the influence of feedback, readaptation and self-organising (Kauffman, 1995; Stacey, 2000; Morrison, 2002; Richardson, 2005). This is corresponding to Waldrop's study (1992: 294) that highlighted the 'Complex adaptive systems' that scan and sense the external environment and later make internal adjustments and evolutions in order to adapt in those changing external environments. The processes involved to such developments are 'self-organisation' and 'autocatalysis'. Self-organisation is characterised by adaptability, open systems, learning, feedback, communication and emergence (Cohen and Stewart, 1995; Prigogine and Stengers, 1985).

One of the challenges of complexity theory is when the usefulness of complexity theory is questioned. According to Baofu (2007:4), a natural question to ask is 'what are the promises and their pitfalls in this enticing fad about studying complex phenomena?' For instance, even though complexity theory provides explanation for change and development in specific conditions, it can be regarded as a post hoc explanation, with limited prospective or predictive utility (Keith, 2006: 7). Another challenging question asked by Baofu (2007:5) is whether or not the study of complex phenomena can identify recognisable pattern to enhance our understanding of reality, especially when it is embedded within the messy web of complexity. Many practitioners commented that Complexity Theory may be conceptually interesting but it seems like it is difficult to apply in practice (Tosey, 2002).

3.1.2 CONCEPTUAL OVERVIEW OF READINESS

There remain many issues surrounding the concept of readiness (UNICEF, 2012). The aim of this section is to trace the relevant evidence and literature of this concept. Readiness as defined by Dalton and Gottlieb (2003) is associated with change. The definition and the understanding of the readiness concept have been taken from several perspectives. Readiness has been described by Armenakis et al. (1993) as 'cognitive precursor' to the attitudes of either resisting or supporting improvement. There is consensus among researchers that readiness is a multi-level construct (Rafferty et al. 2013 and Weiner, 2009). The multi-level aspect of readiness refers to 'individual, group and organisational readiness' which may share the similar perspectives or distinguished perspectives (Weiner, 2009). Both Kwahk and Lee (2008) emphasise the importance of readiness attitude, which is often used as an indicator for change in implementation. Some studies indicated that a main factor for failure was the resistance of the user to change (Lapointe and Rivard, 2005).

For this study, readiness concept is defined as a multilevel construct which can be polarised into positive or negative attitudes, influenced by the desired climatic influences for improvement. This study argues that the barriers identified from multilevel dimensions of respondents are most likely to bring about a negative culture for effective improvements. As studied in a classic study by Thurstone (1928), he asserts that attitudes can be measured and has become one of the most important concepts in social psychology. For example, attitude assessment is widely used in employee surveys used in organisations (Gawronski and LeBel, 2008). However, in this thesis, patterns of attitudes are studied in order to understand the desired climatic factors that influence SRE development in Brunei. Following the findings from the above literature, the concept of readiness for SRE improvement has not received much attention. The key areas of the research gaps identified from the literature lead to the focus area of this study.

The concept of readiness can be viewed from the multilevel of readiness. Several researches have acknowledged that change involves multilevel of readiness (Weiner, 2009). Individual readiness is defined as the individual's beliefs, attitudes and intentions relating to the extent which changes are required (Armenakis et al., 1993).

For instance, individuals with strong organisational commitment should be more willing to accept organisational change if it does not change basic values and goals and is seen as advantageous; they are also then willing to expend more effort on behalf of the organisation. This suggests that individuals' commitment to the organisation has varying effects on their readiness for change (Kwahk and Lee, 2008:475). As a result of communication that takes place among workgroups, organisational level of improvement is shifted from individual perspective to a group perspective (Whelan-Barry et al., 2013; George and Jones, 2001). For example, Gupta and Michailova's (2004) research found that knowledge is shared among departments within the same organisation. Furthermore, both authors recognised that an organisation is not a single entity but as a collection of departments working together.

In my research, I intend to identify a significant correlation between the respondents' readiness attitudes and th-e organisational climatic factors that could influence the respondents' readiness for developing SRE in Bruneian schools. The following section will propose a conceptual framework based on the discussions above.

3.2 DEVELOPMENT OF A READINESS FRAMEWORK

A conceptual framework for this study is developed based from the above components to fill the research gaps. The framework aims to identify the essential barriers that influence climatic factors that can affect multilevel of readiness in a complex organisation. Figure 4 below shows the proposed conceptual framework that is used to guide this study.

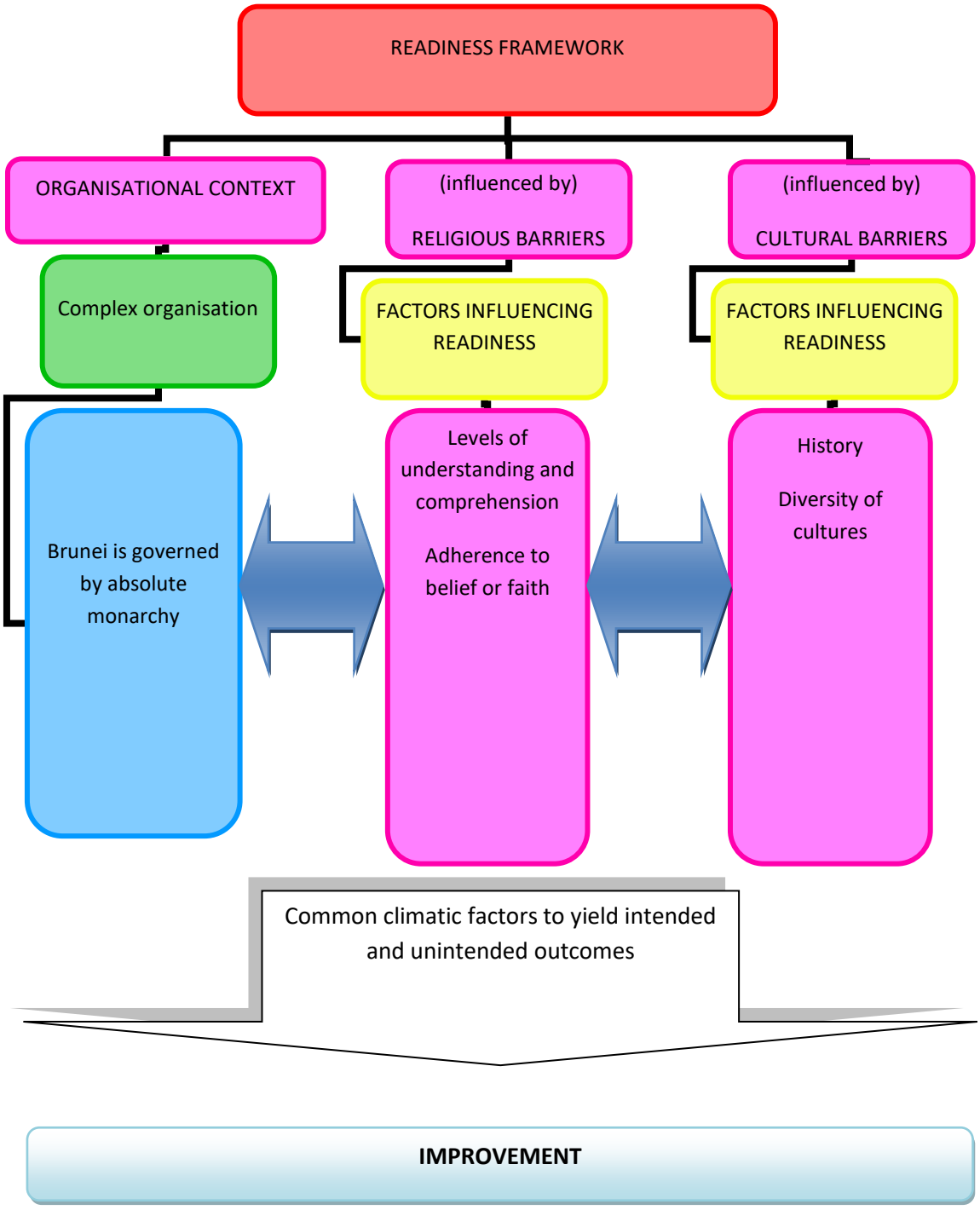

Figure 4 Conceptual framework of readiness and its relationship with climatic factors and improvement

3.3 CHAPTER SUMMARY

This chapter highlighted a number of key findings from the literature that led to the development of the conceptual framework. The chapter also emphasised the positioning of the perspectives that seek to fill the research gaps. The proposed conceptual framework draws together the relevant components, which will be used as a ground to guide this research. The next chapter will discuss the research methodology, approaches and strategies used in this study.

CHAPTER 4
METHODOLOGY AND RESEARCH DESIGN

4.0 CHAPTER OVERVIEW

A research design was carefully planned in order to answer the main research question. Specifically, this chapter intends to demonstrate the research process and discusses the methodology used in this study. The following sections will discuss these aspects which lead to the choice of appropriate research methods. The research design is outlined in Figure 5 below.

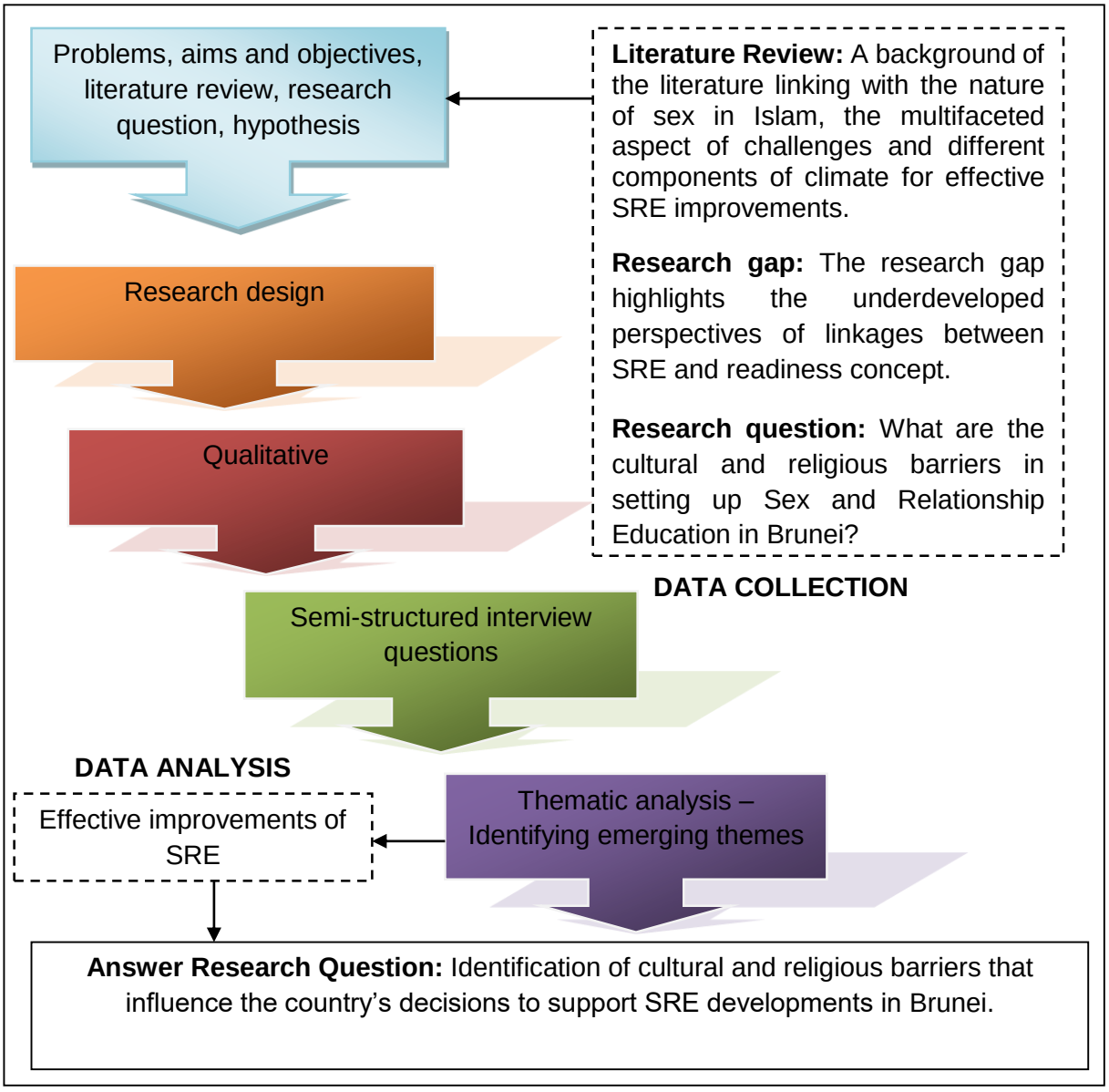

Figure 5: Research Design Process

4.1 CHAPTER INTRODUCTION

This chapter provides an overview of the research design and methods. This chapter begins by investigating the epistemological position which primarily underpins the research design. For that reason, this chapter will also inform the choice of research method and decision to conduct semi-structured interviews with professionals whose specific occupation is related to supporting children and youth, directly or indirectly. Additionally, young people were also interviewed and the detailed approach and limitations will be discussed in the following sections. An examination of how the respondents were sampled and accessed will also be presented in this chapter. Further discussions are made of how the interviews were conducted, followed by an investigation of the process of data analysis precedes an examination of the ethical considerations of the study. This chapter finishes with a summary of the key points.

4.2 EPISTEMOLOGICAL POSITION UNDERPINNING THE STUDY

This section is devoted to exploring the philosophical stance of the research. The section will begin by examining the definitions and applications of interpretivism. It will then discuss the debates in this field and how the limitations and challenges are justified within the study. Knowledge is created in social interaction between researcher and the respondents where the "results" or "findings" are literally created as the investigation proceeds (Denzin and Lincoln, 1994). Given the variety of epistemological positioning, it is essential to begin by making clear how the term qualitative will be used within this study. Before discussing the process of analysing qualitative data, it is necessary to establish the epistemological position of the research. There are views that ontology and epistemology are the foundations on which a researcher must build his research as ‘they shape the approach to theory and the methods’ (Marsh and Furlong, 2002).

The paradigm that underpins this study is by a social interpretivist epistemology. Interpretive researchers study what is meaningful or what is relevant to the people being studied, or how individuals experience daily life (Neuman, 2006:88). Interpretive researchers study social action in which people attach subjective meaning (Neuman, 2006). Interpretivism as a philosophical standpoint can be traced to German

Sociologist Max Weber (1864 – 1920) and German philosopher Wilhem Dilthey (1833 – 1911). This standpoint has created much to the existing literature and continues to be studied and applied across different disciplines to study human meaningful social actions. In Brunei, the teen pregnancy rates had been published in the newspapers, but the qualitative justification of that claim has never been made. The epistemological position invites a response in terms of reflecting on the very presuppositions of knowledge and the identity of facts (Hughes and Sharrock, 1990). This section is purposely designed to defend my claims of my research, so as to protect the knowledge derived from the study against persistent sceptical doubt that can raise arguments (Hughes and Sharrock, 1990).

Unstructured interview is one of the interpretivists favoured methods (Livesey, 2006) as it can provide a greater breadth of data compared to other types of qualitative data gathering method (Denzin and Lincoln, 2003). As my research is intended to extract meanings and interpretations of the Bruneian Muslims people, unstructured interview may provide in-depth qualitative data by allowing interviewees to talk about the topic within their own frames of reference (May, 2011:136). This is advantageous for my research as I was looking for Muslim respondents who can be open and share their thoughts on sex and relationships which allow them to do it on their own flow. However, the nature of unstructured interview can be 'informal', 'unstandardized' or 'unstructured' interview (May, 2011:136). Subsequently, this will only cost me time on transcribing and translating the interviews into language of publication. Moreover, I am concerned with exploring how interpretations of meanings are learned by the lived of many Bruneian Muslims in natural settings which the context is represented by the norms and practice and additionally, the social, cultural and religious and political aspects of Brunei (Neuman, 2006).

Much of the debates of interpretivism is in its nature of complexities and of data analysis and the researcher has to live with the uncertainty that ambiguity patterns may emerge (Raddon, 2010). The status of generalisation of interpretive sociology was also challenged (Williams, 2000), whether it can or not generalise the findings. In his study, he found out that generalisation in Interpretivist study is impossible. This has been argued by Williams (2000) in support to a study by Denzin (2000), that individual consciousness is free to attach different meanings to the same actions or

circumstances. Consequently, my focus is on capturing the quality of people's interpretations, definitions, perceptions, meanings and understandings (Livesey, 2006).

4.3 CHOOSING THE RESEARCH METHOD

The methodology that is employed throughout this research is qualitative. Qualitative research tends to be unconvinced on the scientific methods such as statistic analysis for the study of human beings (Bloor and Wood, 2006; Banda, 2008). The nature of this study seems to suit this approach as it offers me, as a researcher 'documenting the process by which social reality is constructed, managed and sustained' (Holstein and Gubrium, 2008:173). Qualitative research has a long tradition in social research (Lee-Treweek and Linkogle, 2000). A quantitative research usually measures reliability, validity and generalisation compared to qualitative research, whereby there has been less concerned with the 'traditional application of these measures' (Bloor and Wood, 2006:148). The reliability and validity of my research, however, will be achieved from qualitative perspectives. In response to qualitative critiques, Denzin argues that (1989 as cited in Bloor and Wood, 2006:148), 'validity reflects a need to provide an improved understanding of the research subject rather than improved accuracy'. Therefore, the qualitative perspective emphasises on the 'depth of the understanding' rather than generalizing claims concerning subjects (Agar, 1980 as cited in Lee-Treweek and Linkogle, 2000).

Qualitative research methodology places my research in a good position because I want to gain meaning and understanding of policymakers, parents, young people and teachers' experience. This methodology is better than quantitative in investigating how this knowledge can be used to enhance the use of Sex and Relationship Education in teaching Muslims young people to be aware of their sexual health apart from incorporating culture and religious awareness. It is important for me to address, at this point, that there were 31 respondents in my qualitative research study. This is to build the understanding that the qualitative research provides an opportunity for the researcher to study one aspect of the problem in some depth (Darlington and Scott, 2002; Bell, 2005). Eventually, semi-structured interviews were selected as the research method for this study. May (2011:135) states that 'a semi-structured interview represents an opening up of an interview method to an understanding of how

interviewees generate and deploy meaning in social life'. She further commented that semi-structured interviews allow people to respond more on their own requisites than the standardised interview, but still present a greater structure for comparability over that of the focused or unstructured interview. As a result, an interview schedule was designed prior the field work (See Interview Schedule, Appendix E).

The one-on-one or individual interviews were carried out with all samples. The individual interviews were semi-structured and conducted as means of collecting more data and clarifications (Banda, 2008) because the questions were designed for an answer in detailed description (Willig, 2001). Interviews with key informants were conducted with 2 senior government officials, 2 government officials, 10 school teachers, 3 senior health officers and 3 representatives from Brunei Darussalam AIDS Council, 1 religious head and 10 students. Therefore there are 31 interviews conducted, each lasting approximately 30 minutes to 80 minutes.

4.4 SAMPLING, ACCESS AND THE PROCEDURES OF RESPONDENTS SELECTION

4.4.1 The Selection of Respondents for Interviews

It was suggested by a classic study by Morton-Williams (1993) that the interviewer should be familiar with the definitions of the different categories of respondents. The definitions that had been applied in establishing eligibility for interview in this research include any of the following:

- **Key Informants**: in a sample of key informants are of the stakeholders, person, policy makers or organisation with an interest or concern in the issues related to young people, teen pregnancy, sexual-health and services, and digression of Bruneian Muslims' morality.

- **Young People**: in a sample of young people are of a person who is usually 14 to 17 years of age which is legally defined in Brunei as children. However, a young person in this research was extended to the age of no more than 25 years old who are interested to articulate his or her ideas, perception and opinions on sex and relationship.

- **Teachers**: A sample of teachers across different disciplines, primary, secondary or pre-university level teachers with an interest to share their opinions and experiences of teaching or dealing with young people in schools.

4.4.2 Location of the Study

The study was undertaken in Brunei Muara District, situated in Bandar Seri Begawan, the capital city of Brunei Darussalam. Given that the study focused on the densely populated area, there could not have any better place to conduct my study other than Brunei Muara District, where the government headquarters (ministries buildings) are located, so to put. Approvals in the form of written permissions were obtained from respective Directors to do research in selected ministries.

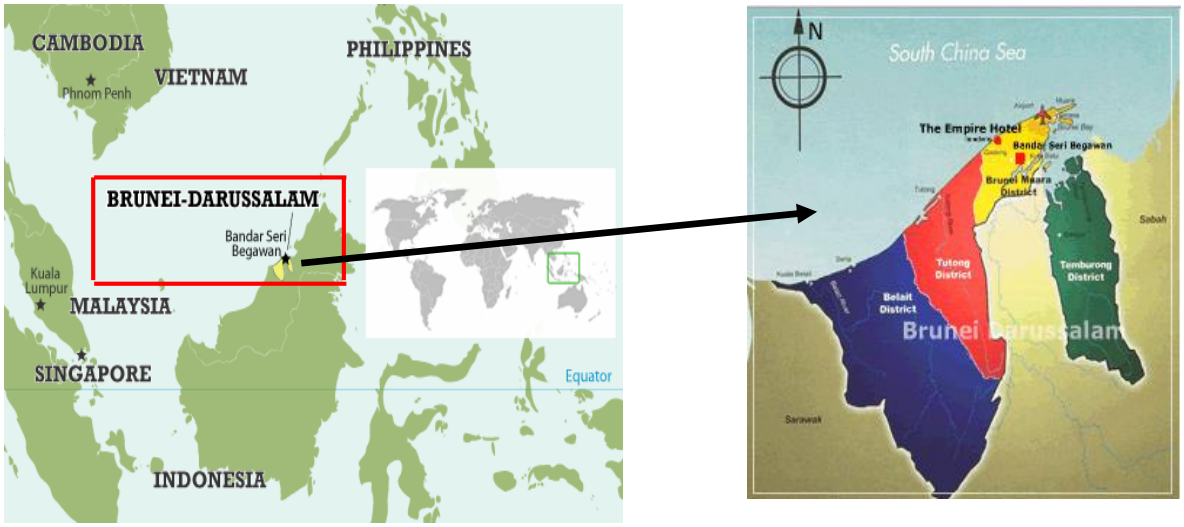

Figure 6: Map of Brunei Darussalam

4.4.3 Demographic Data of the Respondents

This section presents the spread of the respondents accessed for this research. Primarily, 31 respondents were interviewed. Demographic details were attained to categorise the distributions of the respondents' backgrounds. Three tables are presented below, which map the most significant aspects of the respondents' demographic data based on factors such as sex, religion and occupation. The results are summarised in the following sections.

Table 2: Spread of Respondents by Gender

Gender of Respondent	Sample Number	Percentage %
Female	19	61%
Male	12	39%

Table 2 shows the spread of the respondents relative to the study by gender. Out of the 31 participants, 39% were males and 61% were females. Furthermore, it shows that the female respondents in the study were dominant. It indicates that female researcher is more likely to interview female respondents more than men. This is corresponding to Buckman (2011) stated that gender has influence in sexuality interviews (See Chapter 3.11 for further discussions on gender and power imbalance). This may be a further reflection of the data collected from female respondents show that there are opportunities that allow for women to contribute positively in this study.

Table 3: Spread of Respondents by Occupation and Gender

Occupation and Gender of Professionals' Respondents	Number	Percentage %
Female Official Head	2	7%
Male Official Head	1	3%
Female Teacher	7	23%
Male Teacher	3	10%
Female Medical Officer	2	6%
Male Medical Officer	1	3%
Female Student	6	19%
Male Student	4	13%
Female Volunteer	1	3%
Male Volunteer	2	7%
Female Welfare Officer	1	3%
Male School Counsellor	1	3%

Table 3 presents the spread of the respondents by occupation and gender. It reveals how a range of respondents with different roles were accessed. Out of the 31 participants, 18 respondents were working under the Government sector, whereas 3 participants were volunteers in a non-government organisation and 10 participants were students. Out of 17 female respondents, 12 respondents were working under the Government sector. This shows that Brunei provides continuous supports for gender equality. In employment, the participation rate of women has increased to 59% from 20% in the 1970s, where 30.7% of Division One positions in the civil service are occupied by female (Brunei Times, 7th March 2015). Meanwhile, out of 10 students, 6 participants were female. Female students' participations in education provide impacts in the literacy rates. Literacy rates of female students have increased from 73.3% in 1981 to 96.3% in 2013 (Brunei Times, 10th March, 2015). Out of 3 volunteers, 2 participants are male volunteers. The dominant status here identifies males as dominant in volunteering (Wilson, 2001). However, gender difference among volunteers depends on the kind of event or organisation (Taniguchi, 2006), for instance in a sports event, males volunteers will be more likely dominant (Skirstad and Hanstad, 2013). Generally, women are more likely to participate in all forms of volunteering compared with men who are more likely to engage in formal volunteering (Mundle et al., 2012).

Table 4: Spread of Respondents by Occupation and Religion

Occupation and Religion of Professionals' Respondents	Number	Percentage %
Female Muslim Official Head	2	7%
Male Muslim Official head	1	3%
Female Muslim Teacher	7	23%
Male Muslim Teacher	2	6%
Male Non-Muslim Teacher	1	3%
Female Muslim Medical Officer	2	6%
Male Muslim Medical Officer	1	3%
Female Muslim Student	6	19%
Male Muslim Student	4	13%
Female Muslim Volunteer	1	3%
Male Muslim Volunteer	2	6%
Female Muslim Welfare Officer	1	3%
Male Muslim School Counsellor	1	3%

Table 4 presents the spread of the respondents by occupation and religious affiliations. Out of 31 participants, 30 participants are Muslims. With 28 participants are born Muslims and 1 participant is a non-Muslim, whereas 2 participants are reverts to Islam. Brunei is a Muslim-majority country which constitutes 70% Muslims of its population. The Muslim population in this study is primarily the Malays namely Melayu Brunei and Melayu Kedayan. Brunei, Malaysia and Singapore share many cultural similarities (Richmond and Harper, 2006). However, it is very important to note that Malay populations in Brunei are distinctive from Malays in Malaysia, even though there exists a strong expressions towards the institution of Malay monarchy and the Malay people (Seng Piew Loo, 2009). According to the Constitution 1959, Malays in Brunei refers to the 7 class of Malay ethnics: Melayu ***Brunei***, Melayu ***Kedayan***, Melayu ***Tutong***, Melayu ***Dusun***, Melayu ***Murut***, Melayu ***Bisaya*** and Melayu ***Belait***. In Brunei, not all Malays are Muslims, however in Malaysia all Malays are Bumiputera-Malay Muslims (Mason and Omar, 2003).

4.5 CARRYING OUT THE INTERVIEWS

The original aim was to carry out 35 interviews and 2 focus groups with a split between key informants, students and teachers. The sample was constructed to represent key players who could give valuable opinions and suggestions of each of the interview. As understanding of the processes involved in each interview increased, the list of the potential interviewees was broadened to fit the purpose of the study. For the study, it became clear that both welfare officers and school counsellors with key roles in developing youth and social community could not be omitted from the study. Even though 35 interviews were intended, ultimately, there were only 31 interviews in total (Refer to Appendix F: Demographic Chart).

Thirty-one interviews with different group of respondents were carried out at intervals over a period of ten months between October 2012 and July 2013. Prior entering the field, interview schedules for different groups were constructed to design the interviews and align the questions with the main research question. The schedules consisted of series of semi-structured questions which are open-ended. Semi-

structured interview is a method of data collection which is compatible with several methods of data analysis for example grounded analysis (Willig, 2001). These one-on-one semi-structured interviews were conducted as means of collecting more data and clarifications (Banda, 2008) because the questions are designed for an answer in detailed description (Willig, 2001). They were taped-recorded with the consent of the interviewees and fully transcribed. The discussions typically took between 25 to 80 minutes depending on the interest and participation of the interviewees. The interviews were semi-structured and explored respondents' views about the sexual health of young people in Brunei Darussalam highlighting individual perceptions, views and attitudes towards sex, relationship and experiences.

The detailed discussions were not only designed to promote a reflective account of Brunei's milestones to having Reproductive Health Education, but also aimed to promote the interviewees' deeper state of engagement with the issues being raised. At the end of interview, respondents were asked if there were issues that were important and had not been covered to ensure that their final summarisation of the topic was taken into account as well. The data will be produced by open-ended answers. The respondents answered more than 10 open-ended questions about sex, relationship, sex and religion and culture. These questions dealt with the Bruneian people's perceptions and attitudes towards sex and relationship, the possible design of curriculum of sex and relationship education in Brunei and some apparent social issues. These open-ended questions had the benefits of eliciting the non-salient information, thus reducing the 'conversation with purpose' (Buckman, 2011) and repetitive patterns of answers from the respondents.

Disagreement does exist over the kind of insights that open ended answers can yield about people's opinions (Geer, 1991). It has been argued that open ended questions cast doubt in the ability to measure the public attitudes accurately (Geer, 1991). However, open ended questions are preferable for my study, as it provides the aptitude to provide better ideas about the Bruneian people's attitudes on sex and relationship. Open – ended questions was used to maximize response validity (Aberbach and Rockman, 2002). While open-ended questions offer an increase in

validity of responses and in-depth understanding, however it may challenge data analysis.

The participation was completely voluntary giving the rights to respondents to withdraw from the research at any point. It is vital for the interviewer to have a good grasp of the study's objectives, and of the information that is to be collected. Consequently, at each of the interview I would begin by reinstating to the respondents what kind of data and what I wanted to achieve out of the data. The respondents would probably have read this from the project information sheet but as part of the process, I have reminded them about it again. This will enable 'probing' to elicit the right data required, and ensure all relevant issues are covered. Furthermore, some respondents may ask why a particular question was included in an interview, and it may be necessary for the interviewer to be able to 'justify' particular questions.

As such, further discussion on attempts to access respondents for interview, subsections explore how gatekeepers expressed concerns about granting access. These include concerns about conducting research on young people and apparently the problematic nature of informed consent and parental consent forms. This chapter continues to discuss access issues and the importance of being sensitive particularly when researching about taboo topics. It is very important to note that there were several groups of respondents recruited in this study. In what follows, discussions on approaching different group of people in this study will be made beginning with interviewing young people. The following section closes with a discussion of the challenges faced when researching young people.

4.5.1 Carrying Out the Interviews with Young People

It would be difficult to gain an in-depth understanding of the perceptions and attitudes of young people towards Sex and Relationship Education without engaging them in the discussions or interviews. Initially, the reason young people aged 15 to 16 were chosen because I believed that the young people are already able to express a perspective of sex, culture and religion and they are able to understand this subject apart from what they learned from their environment, parents and the public. However, due to the complexity of recruiting young people under the age of consent, I had

enlarged the scope to researching young people of not more than 25 years old. This had proven to improve the limiting pool of students eligible to participate in my study. In early 2014, I had recruited three Brunei young people who studied in university of Leeds. Much of this study has concentrated on sexuality-related information among Muslims youth in Brunei, whereas other minorities (i.e. Non-Muslim Malays) in Brunei have not shared their outlooks on this subject.

The individual interviews were done according to a time table which was negotiated among the gatekeepers and respondents in advanced. Some respondents themselves were not required to travel at this point. The researcher had travelled to the respective schools where the young people and teachers were and the interviews were carried out in a quiet corner or room. Other respondents preferred to be interviewed outside the school hours.

4.5.2 Access to Young People and Working with Gatekeepers

In the United Kingdom and Wales, people under the age of 18 are legally referred as children. The literature seeks information with these keywords 'researching children' and 'researching young people'. With the term 'children', it encompasses the rights and the protection of rights of children and young people. This is clearly declared in European Convention on Human Rights which now incorporated in the Human Rights Act 1988 which allows children to have the same rights that are guaranteed to adults (Lewis and Lindsay, 2000).

Accessing young people in Brunei had to go through the Department of Schools, Ministry of Education Brunei Darussalam. It is required for the researcher to make a formal letter for the intended schools. An approval letter will then be issued for the implementation of research study. This took me about a month to get the approval.

4.5.3 Approaches to Researching 'Children' and 'Youth'

Initially, a broad sample of students from different sites was constructed prior to data collection. Secondary schools were the targeted site to explore the young people attitudes and perception towards their sex education experiences in school, in which

The World Health Organisation (2006) has emphasised school as an ideal place for health information and skills. Four schools were initially chosen for this research project. Among different public schools and different religious schools, there is a distinction of ethos (Petre, 2005). However, only one school responded to me.

4.5.4 What are the threats for the respondents?

As anticipated, the threats for the respondents are obtaining parental consent. The issue of seeking parental consent in relation to research focusing on sensitive issues such as drug use and sexual behaviour is particularly problematic (Allen, 2002; Valentine et al., 2001). Most young people aged between 15-16 years old did not return their consent form because they did not get consent from their parents in which they need to obtain beforehand. Some schools, even after I had explained the nature of the study were still reluctant to allow me to do my research there. In relation to this, Barrett and Cason (2010) explains about the kind of collected information might be sensitive because it concerns subjects that people uncomfortable talking about such as sex and relationship, sexuality and religion.

The nature of the sex and relationship education is already heavily sensitive for Malay Muslims. I have inevitably asked myself a vital question: if the participants involved in discussing sensitive issues that may arise, is it better for me to record or not? Barrett and Cason (2010) explained that no researcher should tape record without the permission of the interviewee. Therefore, this should be clearly reflected in the consent form which stated clearly that children will be asked to be involved in sensitive discussions and they will be taped recorded. However, the sensitivity of this study does not only lie in the nature of the study but additionally on the issues that may arise within the study itself such as disclosing sexual violence (either victim or abuser), sexual behaviours, illegal abortion which are termed as criminal activities. Therefore, there should be distinction between sexual crime that should be reported and sexual crime that should be kept confidential. Sex outside marriage may not be considered as a

crime in the United Kingdom, but Islamic legal tradition treats any sexual contact outside a legal marriage as a crime[26] (Mir Hosseini, 2010).

As a researcher in a sensitive topic, it is very important for me to take note if there was any disclosure of criminal acts which involves risk of significant harm to the young person or to others (i.e. sexual abuse, rape and so on). I would make a report to the police such as the Crime Investigation: Women and Child Abuse Unit. However, if it was concerning the sexual behaviours of young people (i.e. sex outside marriage), I would not make report on it as that is private business and not about risk or harm.

4.5.5 What are the threats for the researcher?

In most literature suggested that access to potential respondents could be difficult. In response to these findings, I ensured that it would be fine as long as I carefully studied the requirement of the gatekeeper and explained the aims of the study clearly and its significant purposes for the country. My predictions were incorrect and my attempts to begin accessing potential gatekeepers and respondents at the year 2012 – 2013 were complex.

Consequently, to learn more about the significance of culture, we do not only need to understand the country's political perspectives but we also need to contextualise the perspectives of the various groups including religious heads, teachers and parents (Helleve et al., 2009). Before the commencement of the interviews, a broad model of the potential candidates for interview was drawn up, reflecting my target population in which I was interested to hear from. Drawing a respondent model was useful (LaForest, 2009) because it downsized my options since my target population were generally dispersed. Proper planning and listing the potential respondents will determine who will be relevant for the study and are more likely to respond and participate in the study (Public Works and Government Services Canada, 2007).

[26] In Islam, sexual activities outside marriage are called Zina (adultery), either in pre-marital or extra-marital relationships. Zina is a crime.

4.5.6 Gaining Access

Gaining access was a threat more than conducting the research which accounts for a pre-interview with the school administrators about the study. This challenges my position as a researcher, especially when I was asked about the direction and significance of my research for Bruneian young people and the country. As explained by Lee (1993), there is a potential threat of stigma contagion for the researcher, particularly when taboo subjects are explored which relate to sexuality.

For this research, the stigma contagion had already occurred as I was identified with a study to address the sexual topics and issues among the young people before the actual research project began. It will be argued that even if my identification with the study indicated my *insider* status to potential research respondents, however I did not gain easy access to my ex-school in sensitive research. It can be a very daunting task to get access through different schools after a school has declined to open the gate for me. This is a fall back position for any researcher but it would be unethical to continue my research. This was negotiated and I fully understood this, since the research was looking at what is being apparent as worrying trends in Brunei. As a result, I have changed the group age of the young people from 15 to 16 years old to between 15 to 25 years old. This allowed me to ensure that participations were not limited to young people under the age of consent only.

For some school administrators, negotiating parents in obtaining parental consent would only generate unnecessary interest, fear and worrisome. I understood the school administrators wanted to lend me a hand in gaining students' participation without creating more 'fuss' but there is a likelihood that more problems would be prompted if parents found out later and they were not consulted beforehand. Involvement of parents for students below 18 years old should not be overlooked even if the gatekeepers have opened the door for you. Anecdotally, due to the sensitivity appending to issues related to sex, sexuality and sexual health, it may be acceptable that permission to conduct research was not granted by most school principals. It is learned that researchers often are not able to approach potential participants directly but have to negotiate access through a range of gatekeepers (Wiles et al., 2005). My position as a researcher needs to understand this when accessing to gatekeepers

(school) because the gatekeeper has the power over the opportunities for children to choose whether to participate in my research or not (Lewis and Lindsay, 2000).

Before I conducted the interviews, some young people have stated that he or she had never involved in a sexual relationship before and I ensured that the students understood that this project did not intend to find respondents who had sexual relationship experiences in order for these to be offered as evidence to start having sex education in the country. As Platzer and James (1997:627) pointed that they do not wish to sample people who enclose 'horror' stories only but the research findings would be palatable to this audience who had enough descriptive research pointing out their weaknesses to last a lifetime. In my study, the young respondents are a small group of young people who are primarily students who can articulate their ideas on sexuality and relationships.

It is interesting to note that some respondents who were hesitant as they had nothing much to contribute actually offered affluent account of data. Others see this as a platform to speak out and often had their own agenda. In the event, it was quite hard to find willing respondents who were not scared of being judged while talking about sex openly. The respondents are also more likely to be exposed to harm for example disclosure of illegal activities such as pre-marital sex, pregnancy outside wedlock, abortion, baby abandonment and unsafe sexual activities. This research can be threatening to teenagers or respondents in general, and they can be placed in a situation which their personal safety is jeopardised (Lee-Treweek and Linkogle, 2000). However, the research was framed in terms of finding out about the young people's experiences of sex education formally or informally whether it was already good, requires some flexibility or changes.

4.5.7 Ethical Considerations in Researching Young People

This was a sensitive research project involving different group of respondents which had various ethical and practical considerations. This process had helped me significantly think through each sample and ethical issues and I hoped the study details were explained in more detail.

In Brunei, there is no form of ethical procedures or guidelines that are relevant to academia researchers; however there is a standard requirement that has to be met in order to researching official organizations. I represented ethical procedures from the University of Leeds as evidence, but I also followed the Code of Ethics and Standards of Practice for Registered Nurses and Midwives in Brunei Darussalam which have been developed for the nursing and midwifery profession registered with the Nursing Board for Brunei, Ministry of Health. It is relevant to all levels of nurses and midwives and areas of practice including those encompassing clinical, management, education and research domains. This code outlines the ethical standards expected and required of nurses and midwifes practicing in the unique multi-cultural context of Brunei. Since my research is involving young people under the age of consent, the study was designed carefully with each respondent had to complete parental and self-informed consent. This is to ensure that the young people can withdraw themselves from the study. Consent for young people was an ongoing process to make sure that participation is completely voluntary and they have the right to withdraw from the research at any point without affecting their position.

4.5.8 Discussions on Consent

Much of the debate on the ethics of social research has been concerned with the relationship between 'researcher and researched.' (Jupp, 2006: 97). The complexity of my research was enrooted in the subject that is being explored in relation to research focusing on culturally and religiously sensitive issues such as sexual behaviours among Muslims. The 'openness' of the respondents were often limited as some of them do not want to expose the hidden area of themselves; their responses were indirect, and most respondents were using sugar-coated languages that requires me to ask them to clarify on it. This was particularly problematic in order to recruit young people.

Not only that, this was particularly problematic (Allen, 2002; Valentine et al., 2001) in seeking parental consent. The issues with interviewing children is about who can give the informed consent[27]. The complexity of the problem and the lack of specific ethic guidelines are particularly apparent when research involves youth (Leadbeater et al.,

[27] http://eprints.ncrm.ac.uk/85/1/MethodsReviewPaperNCRM-001.pdf, accessed online on 29th May 2012.

2006). In Brunei, the age at which youth are considered legally competent to give informed consent is 18 years old. Therefore, young people at the age of 15-16 have to ask parental consent. Parental consent is usually a requirement to the recruitment of children. However, parental consent comprises only half of the consent process[28]. The second element of informed consent is obtaining and documenting assent from children (IRB Guideline 1).

Although the parents have given their children the consent to participate in the research, it is equally important to ask individual consent from the young people (Stanley and Sieber, 1992). And the complexity of written consent form is further explained by Heath et al. (2004:13):

> "A second strong theme underpinning debates concerning informed consent and childhood/youth research pertains to notions of 'process consent'. Process consent is a term often used to describe the idea of consent as an ongoing concern within the research process, rather than a once and for all achievement at the beginning of a researcher's contact with a child or young person. It is an acknowledgement that research respondents have the right to withdraw at any time and that consent given today may not mean that it is given tomorrow, although it may well mean that it will be given the day after tomorrow: in other words, consent should be negotiated as an ongoing concern, and should not be assumed on the basis of initial consent only."

Consequently, there were three different consent forms designed for:

1) key informants participating in the research, 2) young people participating in the research, and 3) parents of young people under the age of consent.

[28] http://www.research.psu.edu/policies/research-protections/irb/documents/guide1.pdf, accessed on 29th May 2012.

4.6 CARRYING OUT THE INTERVIEWS WITH OFFICIALS WITH HONORIFIC TITLES

4.6.1 Senior Key Informants in Brunei Darussalam

In Brunei Darussalam, hierarchy is respected, particularly in Malay culture, the use of titles and honorific are still widely used. In my study, government officials with honorific titles were involved and all of them obtained their titles based on the recognition of good merit in their achievement and service for the country. Hence, their titles are not inherent. These titles can be as complex as 20 words including their name, such as “Yang Berhormat Pehin” or with numerous different words following it. Similarly, “Dato” for male and “Datin” for female indicate that the person is rewarded by the Sultan for their honorary contributions. When speaking, it is however acceptable to address them by their titles alone without mentioning the whole title followed by names. However, full address of the title is required in formal letter and email. The word ‘I’ may not be the best to represent yourself when interviewing them, and should be changed to “Kaola” as an official communication style and reverent. It is considered as a breach of etiquette if not done in a proper language.

Information on approaching and recruiting government officials with honorific titles in Brunei is largely undocumented. Approaching this group poses a unique type of challenges. It is a cultural norm that initial contact with the government officials has to be done face-to-face. This however did not necessarily guaranteed me to succeed in gaining an interview. It was crucial that on the first meeting to make a good impression and be ready with the project’s information as it was expected for them to question about my study. Initial contact had to go through the permanent secretary and personal assistant and a formal letter was addressed to them (Aberbach and Rockman, 2002). Attached to the letter was the project information sheet, consent form and my contact details should they have further enquiries. It took the permanent secretary or personal assistant to respond more than 2 weeks. A follow up was later made with phone call by the personal assistance or clerk and a respond letter would follow.

4.6.2 Anonymisation of the Honorific Government Official

Honorific government officials hold highly valuable insights into organizations and therefore it is important that researchers adopt appropriate methods to engage with this group (Harvey, 2010). I intended to interview senior government officials who are working with the policymakers. Respondents' personal details were kept confidential: The Data Protection Act gives the rights to respondents to access stored data that is related to them. A pseudonym for each participant was given to ensure confidentiality and anonymity. This was to ensure that the respondents' privacy was protected and remained anonymous (BERA, 2004, para 25-26). They will be initialized as government officials. I had explained this carefully to the ministers if they choose to withdraw at any point of my research, even if they choose not to publish the transcripts. This was negotiated and understood by the respondents.

In a study by Carusi and Jirotka (2009), ethical considerations have become focused on privacy and confidentiality. As a researcher, it is my responsibility to keep the respondents anonymised particularly due to sensitive data. However, research respondents do not always want to be anonymised because some may want to be identified (Wiles et al., 2008) particularly the ministers because of their valuable insights in the study. Ethical guidelines and methods have limited discussion on how identities can be disguised beyond the use of pseudonyms and the implications anonymisation might have on the data (Wiles, 2008:422). If the ministers (or any participant) choose to be identified, it is up to them to arrive at a decision regarding to be anonymised and this will be negotiated. However, I will emphasise first that their identity is not necessarily identified and I will try as best as I can to maintain confidentiality of the data especially with respect to the information of the people involved in the research.

4.6.3 Sampling and Access

Senior government officials were interviewed in their work places. For the ministers who were always busy with their work, the researcher made an appointment before conducting a research. Therefore, research was conducted at convenient times and discussed in a way that seeks to minimise interruption to schedules and burdens` on

respondents (see BERA, 2004, para 19). This was mutually negotiated and understood by the government officials as they may be busy during the day.

4.7 CARRYING OUT THE INTERVIEWS WITH A NON-GOVERNMENT ORGANISATION

Brunei Darussalam HIV/AIDS Centre is a Non-Government Organisation where its main objective is to raise awareness on HIV and AIDS in Brunei Darussalam. It aims to educate the public on related issues, the likes of Sexually Transmitted Infection, Teenage Pregnancy and Social Issues. The Council uses multiple approaches in reaching its objectives; youth work and trainings, youth and community participation, outreach programmes, voluntary work, media coverage, collaboration with other agencies. I had interviewed 3 representatives from the council and the interviews were done separately.

4.8 RISK, SAFETY AND RESEARCHER

Health and safety of the researcher and the respondents were ensured and emergency exits at the study sites were studied carefully prior the research to ensure safety of all should there be any inconvenience caused. I also ensured that staffs from schools were consulted regularly about the process of my research.

I was aware that the issues of trust between the researcher and the researched will perhaps not occur in individual interviews with young people if there is another party in existence. Hence, another assistant or teacher was not needed as the school will be a public environment. Schools were informed about the research activity/schedule in the school should there be any health and safety concerns.

There was quite significant number of risks from this study. This is a sensitive topic being explored in a particular cultural context across generations. Brunei is announced safe under the FCO's advice as *there is no* travel restrictions in travel advice for Brunei (FCO Website, accessed in 2012). *There is* no threat of terrorists and political unrest such as Muslims radical groups that would be against the research. However, the information that I was collecting is very sensitive because it concerns subjects people

feel uncomfortable talking about such as religion and sexuality or the disclosure could harm the informant for example disclosure of illegal sexual activities.

I have confronted sensitivity dilemmas. For instance, there were oppositions from Muslim administrators and teachers who were against the idea of having a contemporary Sex and Relationship Education in the country and refused to participate or give consent to their children to involve in the research. Muslims may disagree about at what age sex education should be taught, some may not even want to discuss the subject at all (French et al., 2005; Halstead, 1997). The moral and religious aspects of sexuality were incorporated in the study so parents would not be misled. Therefore, briefing and sending advance letters explaining the importance of participants to be involved in this sensitive topic was one way that was used to convince parents and young people to participate, together with information about what Sex and Relationship Education is and the aims of the research and how long the interview was likely to take place.

As the result, I had to change the research framework as a consequence of the sensitivity of the issues being investigated. I framed the research on issues of sexual health problems rather than on 'sex' education, contraception and safe sex. The participants needed to be explained clearly about the broader part of the investigation. I began by discussing the challenges of the Brunei young people, the parents/teacher must be adequately informed about sex education can be taught in a way that informed young people about sexuality in scientific and moral terms.

Part of the discussions with young people covered was: the trend of teen pregnancy and sexual relationships among young people. Also, in an age where sexual activity in many countries begins at an early age so that Muslim adolescents must be informed to better enable them to deal with peer pressure. This had been carefully reflected on the project information sheets.

4.8.1 Project Information Sheets

Project Information Sheet which included the aims of the study and all the necessary steps were submitted to the respondents, on which they responded to appreciatively.

There were different groups of people and I needed more than one information sheets. I had developed four different information sheets for different groups of participants: 1) participating key informants, 2) young people and 3) parents of young people, so that each group would understand clearly what they were asked to do in the research.

4.8.2 Confidentiality

As a social researcher, there is a requirement to have commitment on to confidentiality in interviewing process (May, 2011). The Data Protection Act gives the rights to respondents to access stored data that is related to them. This was to ensure that the respondents' privacy was protected and remained anonymous (BERA, 2004, para 25-26). To advocate this commitment, key identifying features within the transcript interviews were changed wherever possible. The confidentiality such as the respondents' names were changed into pen name, the geographical locations, schools and the organisation names are removed from the interview transcripts.

4.8.3 Securing the Data

The data was kept securely in a storage with no one can access to it except those who were directly related to the study. To ensure the safety of the data, it was transferred to a University of Leeds server, for example using M drive, as soon as I arrived back in Leeds. This was an optional backup saving, not just merely kept the data on laptops or flash drives.

4.8.4 Incentives

Incentives are generally taken to be an ethically unproblematic approach to achieving public policy objectives (Grant and Sugarman, 2004). Prizes such as small toys, decorated pen, t-shirts and so on will be given for young people who are willing to participate as this has proven to promote attendance, sense of belonging in a group and to strengthen participants' commitment in the research (Collins et al., 2008). I was aware that the use of incentives can either increase participation or has no significant effect on refusal (Hansen, 2006). Tzamourani and Lynn (2000) have found that

respondents may have felt more obliged to answer the less sensitive questions while refusing to answer the sensitive ones (as cited in Simmons and Wilmot, 2004). However, the use of incentives in my study may attract participants to reveal information on some sensitive issues who perhaps may not participate without the presence of incentives.

I did not inform about the incentives, however there was flexibility since there was lack of voluntary participation. This should be understood because this study is involving sensitive issues in the country and parents and teachers might oppose due to: 1) the sensitivity of the topic (about sexuality, teen pregnancy and etc) and, 2) it involves their time such as child's school hours. Participations can be maintained by making incentives promising since the process of recruiting and retaining participants is made more complicated when the research is socially sensitive and the populations of interest are considered vulnerable (Kavanaugh et al., 2006).

4.9 KEY CHALLENGES IN RESEARCH

The main challenges encountered in this research will be divided into two sections. Firstly, the main challenges encountered during the 'approaching and recruiting participants' process will be discussed. The second part will explore the challenges encountered during the 'process of data analysis' including language issues.

4.9.1 Challenges to Recruiting Muslim Respondents

This section examines how access to respondents was negotiated within the study. It explores the difficulties in accessing Muslims respondents which has been echoed by many researchers (Buckman, 2011) in conducting research with Muslim respondents. The section also examines how access to Muslim respondents required flexible approach, where strategies are needed to be developed and adapted in response to the requirement of both gatekeepers and the respondents. Participant recruitment is the most important part of a research process and the strategies to employ individuals will depend on the nature of the study (Mohammadi et al., 2008). Recruitment may be more challenging when the study involves people from a majority Muslims country where the sexuality and pre-marital relationship topics are hardly discussed in an open manner. The challenges are addressed in my research and will be discussed.

In my research, multiple recruitment strategies were adopted including snowballing technique and having 'insider' contact with the key people. Despite the use of multiple strategies, recruitment of respondents was difficult and it affected the researcher's aim to obtain rich data. My research was reviewed by the Ethics Board in June 2012, and one of the things the Ethical Board highlighted was the need to revisit the potential issues when researching Muslim people. It builds up the understanding that recruiting Muslim respondents from a Muslim majority population or country involves potential sensitive issues have to be thought considerably even if the country is the researcher's origin.

Engagement of gatekeepers was hard to be preserved due to the nature of the study and the potential respondents seemed to have voted to opt out of the study after they

knew the topic and they were going to be interviewed. The immediate point of this is the most obvious important realities are often the one that are the hardest to discuss especially when it is involving sex and Muslim teenagers and society at large. Some of the Muslims respondents were reluctant to voice out their opinions regarding this subject and they seemed to only respond based on what their religion and culture has told them to do. This was clearly explained by researches that the recruitment and retention of research respondents always brings challenges to researchers (Kavanaugh et al., 2006) and it is more complex when the research is socially sensitive and the populations of interest are considered vulnerable (Kavanaugh et al., 2006).

4.9.2 Cross-Cultural Interviews

The purpose of this section is to examine how language influenced the process of recruiting and access to potential respondents. Cross-cultural interviews are very context specific as acts of communication, involving data collection in different national, cultural and linguistic environments (Ryan, 2002). Most Bruneian public schools adopt bilingual language, Malay and English language as the medium. In studies drawing on cross-cultural interviews, language difficulties keep re-emerging throughout the entire data gathering process beginning from difficulty in understanding the information sheet and consent form in English language which was considered by the gatekeepers too descriptive, to the challenges of translating the transcribed interviews from Malay language to English language. The researcher's ability to be flexible with the needs of the respondents is of the utmost importance for collecting and analysing data (Ryan, 2002). Even though I was collecting data in a country that is not a stranger to my mother's tongue, it equally can pose challenges of those researchers who have a different mother tongue. And this is obviously visible to non-English speaking interviewees in which research was conducted in English and contributed to English-based field of study (Marschan-Piekkari and Welch, 2004).

Language can become one of the main reasons, the interviewees were not confident and some may choose to withdraw even before the interview began. I was fully aware that even though access through the potential respondents and the nature of the relationship may be influenced by the shared language between the researchers and

the interviewees (Marshan-Piekkari and Welch, 2004), however in terms of the nature of my study, the first challenge was to seek respondents who actually can articulate or contribute their views or opinions despite the common ground we have that is Malay language.

All qualitative researchers share a common goal in wanting to obtain the best sufficient data from the respondents. International researchers are now facing cross cultural challenges in how they recruit, manage and develop a multi-cultural study. Undoubtedly, there are many barriers to ensuring participant's understanding in research. One area of note where I found difficulties was in recruiting and transcribing the interviews. However, when cross cultural misunderstandings occur in transcribing, this may hamper the process of obtaining the best response of the study. There are evidently language differences in interviewees' responses which can be seen in the transcriptions. It is somewhat challenging to not allow cross cultural misperceptions to hinder judgement in order to get the best out of the data. I have understood the responses but had difficulties particularly in understanding idiomatic expressions and translation from Brunei accents to English language. This is echoed by Marschan-Piekkari and Welch (2004) findings which at the very final stage of the research project, cross-cultural interviews data need to be carefully transcribed into the language of publication. This is argued by LaFraniere et al. (2000) that language and cross-cultural differences are among the more daunting difficulties. Some languages lack certain words and many cultures cannot readily conceptualize important ideas.

I also acknowledge that a number of factors other than language affect my research project, including age, gender, social class and the researcher's institutional affiliations (Marschan-Piekkari and Welch, 2004). The respondents were aware that my study is a Western-based origin and they were concerned that the data obtained from the respondents may be interpreted in a different way (following the Western ideas) without taking considerations of the determinants of Malay Muslim culture and identity. The process of returning back the transcriptions back to the respondents may control the language differences as they may be able to check and clarify their points. As a result, 11 out of 31 transcriptions were returned back in between October 2013 to December 2013 (Darlington and Scott, 2002). None of those who retuned back the transcripts want to make any change.

4.9.3 Difficulties in Transcribing and Translating from Malay Language to English Language

For my current research into Sex and Relationship Education in a Muslim country, audio recording was used as a primary method of collecting qualitative data. There are so many literatures about the process of interviews, getting consents and ethical issues of interviewing but so little on the problems of transcribing the interviews (Bayliss, 2007) and translating interviews from the spoken word to the written language of publication. Difficulties of transcribing and translating were concerned with language issues due to the nature of the interviews were conducted mainly in dual language, both Malay language and English language. The study revealed that majority of the respondents answered the interviews in Malay language.

One of the most important processes in interviews is returning back the transcripts back to the respondents before it can be published (Darlington and Scott, 2002). This process of transcripts verification is often overlooked and made ignored by the interviewer (Bayliss, 2007). Additionally, would the respondents willingly verify English transcripts which are different from the original spoken audio recordings? It should be understood that the respondents have the rights to withdraw from the study at any point of the research even after the transcripts were returned back to the respondents for verification. This had been made clear before the interviews were carried out.

4.9.4 Transcription Biased

This section is discussed because there is less attention that had been given to the methodological aspects of transcription (Holstein and Gubrium, 2008). Is transcript validation necessary as part of ethical reasons? Transcription to language of publication cannot be separated from translation and interpretation of the data. It is a great deal more in the sense that any transcription also reveals the particular stance of the transcriber – their theoretical ‘home’, the purposes of the transcription, their ideological position and so on: ‘transcription procedure is responsive to cultural biases and itself biases readings and inferences’ (Ochs 1979: 44). Therefore, it can be argued that the validity of the data can be influenced by the researcher’s interest. Accuracy in data cannot be achieved if the data is interpreted in the interviewer’s advantage.

However, it can help the interviewer to take note of the data which can answer the research questions.

Transcribing spoken language interviews into language of publication involved the complexities of first transcribing the spoken language which typically take total of 7 hours or more on each recording. It requires attentions and breaks in between. It could take even longer because sometimes the spoken language used slangs, metaphoric and similes which cannot be interpreted or translated in English language. This was echoed by Sperberg (2004: S124):

> "Translation is the most common method of preparing instruments for cross-cultural research and has pitfalls that threaten validity. Some of these problems are difficult to detect and may have a detrimental effect on the study results. Identification and correction of problems can enhance research quality and validity. A method for translation and validation is presented in detail. However, the specific validation method adopted is less important than the recognition that the translation process must be appropriate and the validation process rigorous".

In such circumstances, I had to exclude several words, or phrases from the transcriptions. The final transcript should be in the language of publication which in this study, translated to English language and should be agreed by the respondents. Transcribing and translating can be equally exhausting and demands a lot of time. However, it is optional to hire external transcribers and translator to help the researcher but I had decided to do it myself. The benefit of transcribing an interview by my own self is that I become thoroughly familiar with the intricacies and the fine details of the data (Bayliss, 2007). This will definitely challenge a researcher with validity and reliability of the data due to biasness. How is biased reduced in this research? There is no guarantee to avoid biasness in the data transcription, however biased can be reduced by validating the transcripts and asking the respondents to check the transcripts before returning it back to the interviewer.

4.9.5 How to Validate e-transcripts

The interviews were transcribed in the United Kingdom. The respondents were informed beforehand that they were required to download and view the transcripts sent via the email. The transcript was in Microsoft Word Document format. The complex thing about sending the transcripts via email is the respondents did not get back to me or delay in returning back the transcripts because they did not check their email

regularly, they may have changed their email address or they have written a wrong email address. Additionally, it is important the researcher confirm the correct email address for easy transmission of the transcripts. The respondents were required to validate the transcripts by sending the email that was either secured by digital signature to signify their agreement for thesis publication or they can write an email stating that they have agreed that all the transcripts were correct and can be used for publications.

4.10 DATA ANALYSIS

Semi structured interviews were posed to the respondents and interviews were recorded using a digital tape recorder and later transcribed. Transcripts were analysed using thematic analysis, a qualitative method used for 'identifying, analysing and reporting patterns (themes) within data' (Braun and Clarke, 2006). This thesis is structured according to the main themes which surfaced from the interviews. The literature review of thematic analysis was undertaken to investigate the surfacing issues relating to the problems encountered in the study.

Finding themes are often abstract that researchers identify in three courses of time that is before, during and after data collection (Denzin and Lincoln, 2003). During the course of 31 interviews, the respondents described their reactions to the declining of Brunei Muslims familial values, realities of social issues in the country and possibilities and challenges of devising a sex and relationship education curriculum for Muslims young people. They discussed the challenges involved in dealing with teaching sex education, the erosion of a sense of identity and moral values among Bruneian Muslims young people. They gave their views on how sex and relationship means to them.

Notably, almost all respondents gave their views on sex but not on relationship even though both can inter-relate to one another. Some respondents view education about sex, sexuality and sexual health as being particularly damaging for Muslim young people who have not yet established a concrete understanding of what is permissible and what is forbidden in Islamic teaching regarding sex. Those who became sexually

active at a young age are seen as uniformly negative (Smerecnik et al., 2010). While some respondents acknowledge there is no possibility for an improvement of standard of living for young teenage parents who quit school early due to early incidences of marriage due to school exclusion policy. The following sections outline the main themes and subthemes emerging from analysis of the transcribed interviews.

There is more than one method to induce themes. In my research, the data had been produced from semi-structured interviews with open-ended answers. The process that I used was firstly to read the transcripts as many times as I could usually 6 to 9 times. This is suggested by Grounded theorists to make a scrutiny examination of the transcripts by reading line-by-line carefully while looking for processes, actions, assumptions and consequences (Denzin and Lincoln, 2003: 275). This subsequently has allowed me to see certain scripts which share something in common such as themes, statements about the same emotions and similar word or phrase (Denscombe, 1998). Then, the process involved reviewing and 'splitting and dissecting these transcripts into meaningful interpretations, which were reduced to quotations' (Banda, 2008:170). According to Braun and Clarke (2006:79), thematic analysis is 'a method for identifying, analysing and reporting patterns within data.' Thematic analysis is conducted through 6 phases to create patterns. These phases include: familiarizing with data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing the final report. Finding themes are often abstract that researchers identify in three courses of time that is before, during and after data collection (Denzin and Lincoln, 2008). Table 5 below demonstrates the themes collected 'during' and 'after' data collection the processes:

METHOD/ RESEARCH QUESTION	THEMES **DURING** DATA COLLECTION	THEMES **AFTER** DATA COLLECTION
Literature Review (Subsidiary) What do we understand about SRE and the nature of sex in Islam?	SRE as a Western pedagogy that contravenes with the teaching of Islam.	Holistic and inclusive approach to aid multi-ethnic approach to SRE.
Literature Review/Qualitative **(Main)** What are the cultural barriers to setting up Sex and Relationship Education in a Muslim country?	Erosion of sense of identity and moral values among Bruneian Muslims young people.	Cultural and Taboo stigma surrounding teenage pregnancy and HIV/AIDS.
Literature Review/Qualitative **(Main)** What are the religious barriers to setting up Sex and Relationship Education in a Muslim country?	Realities of social issues in the country such as declining of Brunei Muslims familial values.	Ideological and religious resistance to SRE.
Literature Review/Qualitative **(Subsidiary)** How can SRE be effectively stimulated to support the reduction of teenage pregnancy and STIs in a complex Bruneian context?	Possibilities and challenges of devising a SRE curriculum for Muslims young people.	Cultural and religious appropriate curriculum by taking into considerations of multi-ethnicity to create a holistic and inclusive approach of SRE.

Table 5: Process of Analysing Themes 'During' and 'After' Data Collection

Most transcriptions data generated from semi-structured interviews with open-ended questions are typically 30 minutes to 80 minutes in length. Transcripts for these data collection activities may range from 10 to 15 pages per individual. The analytic strategy was devised to bring order of the rich and volumised data to become an organised set of data. I have used concept-mapping as an aid to identify themes in which these themes became good starters for analysing data. Themes were collected through the entire research process as I gradually picked up the themes and patterns of the data during the interviews. Correlation of research questions and the themes are examined and room is also given for the 'anomalous themes' that emerged within the data (Buckman, 2011). A thematic approach has been utilised to account for these findings. Main and sub-themes have been produced from the data collected using mind-mapping. A number of reasons for not implementing SRE were raised during the data collection. The following were not only widely given by many respondents but were also frequently mentioned in the interviews. The themes and sub-themes used seem to fall into the following areas:

1. The perceived gap between school exclusion policy and teenage pregnancy and parenthood **(Chapter 5)**
2. The perceived barriers to SRE goals **(Chapter 6 and Chapter 7)**
3. Attitudes towards SRE and other barriers to SRE **(Chapter 6, 7 and 8)**
4. Desired climatic influences for SRE design curriculum in Brunei **(Chapter 9)**

In order to be focused in the presentation, discussion and analysis, the findings have been presented under the above main and sub-themes. These themes are in line with the main and sub-research questions that have guided this research. In some cases, findings cover more than one research question. Furthermore, some responses may overlap the themes and have been discussed under other themes as well, though from a different perspective.

4.10.1 LIMITATIONS OF THEMATIC ANALYSIS

This section discusses the limitations of Thematic Analysis that I encounter in my study. According to Braun and Clarke (2006: 82), 'A theme captures something important about the data in relation to the research question and represents some level of patterned response or meaning within the data set.' Thematic analysis was performed on 31 interview transcriptions and various themes emerged from the data. The process of achieving themes was very complex and it was further complicated as there is insufficient literature that outlines the pragmatic process of thematic analysis (Aronson, 1995).

Braun and Clarke (2006) provide guidance to the 6 phases of conducting thematic analysis; becoming familiar with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes and producing the report. Although the guidance was presented in a step-by-step procedure, my research analysis was an iterative and reflexive process. My analysis proceeded in three stages. First, I limit my analysis to themes that are related to the research question. Therefore, thematic analysis in my research was motivated by the main research question. Second, the codes were grouped into themes based on the data reduction. As asserted by (Carroll et al, 2011), 'This method is interpretive and reductive; the first stage is data reduction that is to reduce statements, comments, quotations or findings to a single theme, which captures or reflects those data.' This process is reflected in my research where thematic analysis generated a numerous number of primary and sub-themes. This process resulted in messiness because in order for me to achieve the themes, I had to recognise 'good codes' from the rich data prior to a process of data interpretation. A "good code" is one that captures the qualitative richness of the phenomenon (Boyatzis, 1998: 1). Third, I then used themes obtained from thematic analysis to build my data chapters.

In conclusion, the data in this study could be improved if attention was paid to the transparency in justification of analysis conduct Thematic analysis also can be improved by greater robustness in the choice of data where more detailed justification of the choice of data is needed and closer adherence to the scope of the study problem.

4.11 BEING A REFLEXIVE RESEARCHER

Being reflexive is perceived as an integral process in qualitative research whereby the researcher reflects continuously on how their own actions, values and perceptions impact upon the research setting and can affect data collection and analysis (Gerrish and Lacey, 2006). Embedding reflexivity in my research is an important task as in my research, I studied different perspectives of groups: young people, key informants such as government officials, senior health officers, teachers and non-government representatives to enable them to have their 'voices' in developing appropriate SRE policy and curriculum in Brunei.

From a social researcher's perspective, being reflexive involves of integrating all the respondents' views, beliefs and experiences while considering how these might affect research through any political and social identities that one may hold (Parker, 1999 as cited in Lambert et al., 2010). The reflexive process is reflected in my study as the assumptions that have been made about the study are constantly viewed while undertaking the research, where questions were asked to assist data exploration and how these data can be further explored based on the respondents' experiences.

4.11.1 Reflections on Research: Emotion, Cross-Cultural Research and Power Imbalance

As this chapter has demonstrated, access to the Muslim participants in this research was proven complex at times. Muslims respondents were hard to reach due to the sensitive issues that are being explored in the study. Buckman (2011) acknowledged how access to Muslim participants can be difficult especially when researching on sexuality. As a consequence of this, I found undertaking fieldwork with Muslims was a daunting task and emotionally challenging. This was because, I was researching my own people whom I thought would be undemanding to approach. On a contrary, I found myself in trepidation of the reactions that the gatekeepers and potential respondents showed towards the research. This was owing to the fact that, the study was considered religiously and culturally sensitive in a Muslim country.

Furthermore, my research experiences revealed a number of issues and sensitivities that are present cross-culturally including language barriers and knowledge of the culture and religion. For example, the participants were aware that I am studying a Western-based education research and they were concerned about their responses were made deterrent. For some cases, this type of research was used to obtain answers but consequently, it left me feel guilty because there were respondents who were responding out of their religious and cultural values. For instance, the respondent who was a health officer described how he was aware of his role because he understood that teen pregnancy and HIV/AIDS cases are on the rise in Brunei Darussalam. He suggested to starting the promotion of condom use among young Bruneian people. I was aware that the more respondents I talked to, the more they revealed about the experiences they have heard or experienced in their surroundings. In this instance, a young girl had disclosed about her unhealthy habit of entering sex chat room for fun.

In this chapter, I discussed some of the ethical problems inherent in carrying out research with children under the age of consent. It presents a discussion of the impact that we have as researchers on the challenges of doing sensitive research as I need to investigate a wide range of topics to enhance my understanding of the many issues that affect the sexual health and well-being in today's Bruneian youth. This research has recognised that undertaking qualitative research on sensitive topics can pose many difficulties for researchers. Part of the discussions covered in the interviews was: the trend of teen pregnancy and sexual crime (zina) in the country, explaining anatomy and the changes one's body experiences during puberty. Therefore, the potential of disclosure in discussing sensitive research is often associated with uncomfortableness that may exist for both sides, either to the researcher or the researched (Fleming and Boeck, 2012). For example, in my study of involving 3 high school boys, they showed their enthusiasm in discussing about 'pleasure' and their personal experiences in sex. This challenged my position as a researcher as I was embarrassed upon hearing their responses and I had to welcome their 'honest' responses without being judgemental.

Researchers are also increasingly aware that gender has a significant factor in the experience of researching others (Merriam, 2009; Buckman, 2011). Due to the nature of this research, some have argued that gender power translates into power imbalances in interactions. For instance, a study by Langen (2005) has shown that gender power imbalance affects women's ability to suggest condom use to their partners. Similarly, this example is related to my particular concern of interviewing male respondents on sexuality. Age difference was also a form of power imbalance that was present between interviewer-interviewee relationships in my research particularly in hierarchical societies such as those found in Brunei culture. Here, the older people expect and usually obtain respect from young people regardless of their employment ranks and education levels. Seniority is of considerable importance in Brunei social life. This resulted in inequalities which made it difficult for me as a female researcher to discuss sexual matters with the older male respondents rather than the younger respondents.

4.11.2 Choosing the 'voice' to respond

I found that choosing the 'right' voice could be challenging as it occurred to most of the respondents throughout the entire interviews. When I started interviewing, the respondents had interest in their position that was attached to the role of the respondent. For example, some female respondents among the teachers choose to speak from their profession but at times may change to voice their opinions as mothers or sisters. I should not be surprised because I was incorporating respondents with different range of roles so as not to characterize the views of different professional groups, but with the assumptions that those with different roles and experiences will have different insights into the subjects that are being explored in the study (Campbell et al., 2007). Therefore, the respondents not only had given answers in their own voice but incorporating the justification of other experiences as well.

4.12 CHAPTER SUMMARY

This chapter has described the adopted research methodologies for this study, commencing from the epistemological stance underpinning this study. It first considered some of the key debate areas of Interpretivism. This was explored in relation to how aspects of the methodology influenced me in adopting approaches to the study. Additionally, research approach and strategy were also presented in order to achieve the objectives and answer the main research question. A detailed description of the appropriate data collection methods adopted for this study was also discussed. This chapter also presents a reflexive account of the research process. A brief discussion of my personal experience of research conduct was also provided. This is to an attempt to locate me within the context of study and how my experiences brought certain perspectives on some mentioned issues. This proceeded to the discussion of my gender as a female researcher which may have impacted on my experiences in this study. The next chapter will present the findings of the data as the result of the analysis, indicating the social and taboo stigma surrounding teenage pregnancy and people living with HIV/AIDS.

CHAPTER 5

KEY INFORMANTS' AND YOUNG PEOPLE'S PERCEPTIONS ON TABOO AND STIGMA SURROUNDING TEENAGE PREGNANCY AND HIV/AIDS

5.0 CHAPTER OVERVIEW

It is the first four data chapter that explores the sub-research question which is originally proposed in Chapter 1. The aim of this chapter is to identify the dominant and essential factors that are capable of influencing the country's readiness to support improvements in reducing teenage pregnancy, STIs and HIV/AIDS cases. Chapter 5 distinguishes a shift of focus from the research design of this study, to the data collected from 21 interviews with the key informants from various professions and a further 10 interviews with young people. As such, the 'respondents' or 'participants' in this chapter refers to both groups.

5.1 CHAPTER INTRODUCTION

Much of the existing literature has mapped the ways in which Muslims minority in Australia, Canada and some parts of the European countries often face barriers to access SRE, health and social services in regard to teenage pregnancy and prevention of HIV/AIDS (as illustrated in studies by Sanjakdar, 2009; Al-Dien, 2010). This chapter begins with investigating the respondents' opinions on teenage pregnancy which includes school exclusion policy, teen parenthood and the status of children born outside wedlock. One of the emerging themes in this study is cultural taboo because the researched topic involves in examining a sensitive topic. According to Noland (2012), sensitive research topics may cause great discomfort for the participants to discuss which include taboo topics, topics associated with shame and guilt, topics that commonly present in the private part of our lives. In my study, some of the issues are addressed and discussed by the respondents.

In the following sections, the social stigma and discrimination based on teenage pregnancy, abortion and STIs including HIV/AIDS cases will be highlighted which are much more pronounced in Muslim cultures (Hasnain, 2005). Discussions, teaching and learning about sex, sexuality and sexual health, are not taboo or opposed in Islam.

In fact, as studied by Sanjakdar (2009), sexuality has a prominent place in the teachings from the Quran, the Hadith and the sirah (life history) of Prophet Muhammad, given the centrality of sexuality in human affairs, both in public and private spheres.

The themes from the analysis are divided into three sections. The first section explores the respondents' perceptions of teenage pregnancy. It provides important context to the second section, which explores how the respondents in the study often perceive teenage pregnancy as a personal 'social problem' rather than an issue that requires special attention and solutions on a national level. The debates of customary practice of school exclusion policy are also presented here. This chapter is further divided into two sub-themes, which examine the cultural taboo on the status of children outside wedlock and people living with HIV/AIDS.

5.2 INVESTIGATING THE RESPONDENTS' OPINIONS ON THE SOCIAL CONSEQUENCES OF PRE-MARITAL SEX

In the last decade, teenage pregnancy and birth rates among young people in Brunei have increased among the group age of 15 – 19 years old (Ministry of Health, 2012). Nationally, by 2014 (the most recent year for which data is available), teenage pregnancy rate among girls aged 15 – 19 has declined after reaching its highest incidence of teenage pregnancy in 2009 (Brunei Times, 29th January 2015). The decline of teenage pregnancy and birth rates in Brunei for the past 5 years can be speculated due to three reasons: young people remain abstinent due to the introduction of Sharia Law as Illegal Zina (pre-marital sex or adultery) is forbidden and penalised by law with harsh punishments (e.g flogging and stoning), the increase use of contraception as a safe sex precaution, and finally teenage pregnancy and illegal abortion that are underreported or not reported.

The recent 'improvement' could suggest that there has been a significant increase in the use of contraceptives particularly condoms (Solomon-Fears, 2015). Secondly, punishment for Zina (pre-marital sex or promiscuity) offenders has been legally enforced in Brunei (Brunei Times, 15th December 2014; BBC UK, 30th April 2014). Under the Sharia' Law, it forbids Muslims to commit pre-marital sexual relationships (Bennett, 2007). Thirdly, the reasons of abortions and baby abandonment occurrence

stem from social stigma attached to pre-marital sex and its social consequences; many resorted to abortion or baby abandonment (Wong, 2012). As reported by Jamaludin et al. (2013), unwanted pregnancy in Malaysia has direct connection with baby abandonment cases. Between 2009 and 2012, there was an average of 5 reported cases of baby abandonment in Brunei (Brunei Times, 18th December 2013). Even though the number of cases is not alarming, but there are claims that the unreported cases of illegitimate pregnancy may increase the number of actual cases (Borneo Bulletin, 8th April 2010). A total of 3,405 teen pregnancy cases are recorded in 10 years, including an 11-year old girl as the youngest mother in Brunei (Brunei Times, 19th April 2015).

In order to explore the respondents' perceptions on teenage pregnancy, I asked them about the current social issues on pre-marital sex and early incidences of marriage among youths in Brunei. This broad question aims to decipher the extent to which the respondents consider how teenage pregnancy can inform Brunei cultural and religious identities. Sometimes, this question had to be prompted by presenting the average number of teen pregnancies in Brunei to allow for broader discussions. Using a semi-structured interview, 21 respondents among different professions and 10 students were interviewed to explore their views on teenage pregnancy and the issues surrounding it. In issues relating to religion, morality and cultural concept of teenage pregnancy in regard to Malay-Muslims, the discussions are engaged in three main themes: (a) failure or lack of Muslim parents acceptance in Sex and Relationship Education; (b) lack of knowledge in contraceptives leads to a bad decision; and (c) deprived of love and attention. Unmasking the issues traced how some of the respondents perceive the social ills (i.e teenage pregnancy, abortion, pre-marital sex) as multi-causal deficiencies that exist in personal spheres of a person which is beyond the control of the government agencies. Accounts of these perceptions are examined in the following sections and framed within the conceptual theme of cultural and religious taboo.

5.2.1 Failure or Lack of Muslim Parents Acceptance in Sex and Relationship Education

Throughout the Malay Muslims world, there is a growing trend of young people engaging in pre-marital sexual activities (Wong, 2012). Brunei is a predominantly Muslim community with strict adherences to religious moral values, including its national philosophy: Malay Islamic Monarchy (Brunei Resource, 2005). The Bruneian community, like in most Malay Muslim societies, encourages unmarried population to abstain from pre-marital sexual activity (Wong, 2012). Even though a sharp controversy over acceptable premarital sex standards is developing (Sprecher et al., 2013; Guttmacher Institute, 2009; Kirkendall,1956), the role of religion in preventing teenage pregnancy has put new political and policy interest to support faith-based answers to social problems (Whitehead et al., 2000). Moreover, there are inevitable debates when religion is engaged in teenage pregnancy discourse.

Some of the literatures discussed on how religious leaders are persistently facing challenges as they are involved in the prevention of teenage pregnancy (Center for Mental Health in Schools at UCLA, 2008; World Youth Report, 2003; Advocates for Youth, 1998). As Abdullahi and Umar (2013:11) stated: 'It is very easy to talk about abstaining sex until marriage within daily preach and religious talks but it is difficult to enforce such values because of the multi-ethnic and social nature of the environment.' In engaging religious faith within the dialogue of sexuality, Yip et al. (2011) suggest religious institutions to find an approach to offer 'non-judgemental' guidance including religious way in dealing with the contentious issue of sexuality within an inter-faith context. As multi-ethnic approach can encourage better understanding about sexuality, it inspires researchers to study this trend (Yip et al., 2011; French et al., 2005). For instance, one major success of SRE within multi-ethnic environment was studied by Weaver et al. (2005), in which different nationalities in Norway adopt SRE and yet the people still conserve their culture and religious traditions.

As Wight et al. (2006) observe, the reasons behind young people's engagement in sexual activities is usually linked with various 'social contexts' and 'familial factors' which are complex and diverse. Conversely, Jamaluddin et al. (2013:374) provide an illuminating discussions of several family problems such as 'family conflict, family disruption, irresponsible parents, poverty, broken or divorced family,' that can affect a

person's sexual behaviours. Shamma (2009) supports role modelling as the most effective way of teaching Muslims with prophetic models. In a similar vein, a gynaecologist argues that Islamic parenting has to include faith and piety as taught by our Prophet:

> Parenting has to include 'Iman' to moral of the children. If you do not direct them [children], how can you educate them about Reproductive Health, it would be useless without *Iman* and *Taqwa*. **(Respondent DRR, Female, Gynaecologist)**.

She continues by stating that parenting has to be done in Islamic way which includes 'Iman' or faith and 'Taqwa' or piety. Several researchers have reported that high levels of parental monitoring were linked with lower sexual risk-taking behavior (Kirana et al., 2007; Jacobson and Crockett, 2000). However monitoring can only be effective, if the teens are freely disclosing information about their activities (Stattin and Kerr, 2000). Muslim teens are not likely to reveal their sexual activities and relationships because it is contravening with Muslims parents' views about sex (Halstead and Reiss, 2003). A representative from a non-government organisation has an understanding that sex is a taboo topic as parents choose not to talk about it. He explained:

> Definitely, sex is something taboo. It is very difficult for us to talk about it, even with our parents we don't talk about it [sex]. But somehow, maybe because of our upbringing culturally, sex is very discreet and very difficult to say, even to mention the 'sex' word **(Respondent BJ, Male, Representative from HIV/AIDS Centre)**

Many parents or families are hesitant to talk about sex with their children or family members (Sex Education Forum, 1998). This makes it harder for parents to approach their children and become their sexuality educators because parents generally are more conservative in conveying talk about sexuality (UNESCO, 2009; DfEE, 2000). For instance, they will be more aware of maintaining strong religious beliefs particularly in education and social development (French et al., 2005). While parents may think that conversations about sex with their children will increase sexual risk behaviour (Allen, 2010), it is argued that there is the unlikelihood of young people to engage in sexual risk behaviours if they discuss sex with their parents (Donnenberg, 2004).

Based on the findings above, it can be argued that our culture is discreet about sex because the parents are not exposed to sex education before. This is explained by Walker (2001) that, in most cases, sex education is provided by parents and it is often

affected by their own past experience of sex education. The complexity of SRE as a subject that involves parent-child discussion is demonstrated in my interview. A male student finds it difficult to involve his parents on the discourse of sex because he prefers to talk about it with his friends or he can seek the information himself:

> I don't think talking to your parents is a good idea. It's kind of impolite to ask your parents where I come from and how it all happened. I turned to my friends and books to learn about it. **(Respondent LN, Male, 15 years old)**.

Encouraging parental involvement in SRE has been mentioned in many guidelines for the curriculum (Scottish Government, 2014; UNESCO, 2009; DfEE, 2000). The finding above reveals that sexual taboo may be stemmed from embarrassed parents or uneducated parents about SRE. For instance, Ingham and Carrera (1998) studied on the parents' knowledge of SRE which is taught in their children's schools. The finding indicates that majority of the parents know little knowledge of sex education. British Muslims for Secular Democracy (BMSD, 2010) provides a brief guidance for treating Muslim parental apprehension including SRE. It is stated that cultural inhibitions and parental embarrassment or social stigma should not impede discussions on sexual matters. However, on the brighter side, identifying these parental obstacles can be the first step to overcome them. Working with Muslim parents can become one of the greatest challenges in shaping sex education policy for Muslims (Mitchell, 2010; Halstead, 1997). A Social Study teacher who teaches in an all-girls' school reported that obstacles may come from parents who choose not to discuss about sex with their children because they consider it as taboo and an embarrassing subject:

> Correspondingly, another teacher expressed her idea of the possible obstacles that might be faced by the teachers come from religious or conservative parents: 'If there's a religious parent who is too conservative, that could be an obstacle because they will not allow their children to learn SRE.' **(Respondent L, Female, Teacher)**.

According to the respondents, perceiving sex as a taboo subject is stemming from home particularly parents' exposure to sexuality. Giving youths the tools to have 'safe' premarital sex is contrary to Islam and Muslims code of behaviour (Bennett, 2007; Muslim Welfare House Trust, 2004). The finding suggests that the issues that concern Muslim parents are linked with the contents of the curriculum and delivery methods (Muslim Welfare House Trust, 2004). Parents perceive that SRE classes are

particularly challenging in the transmission of Islamic values to young people. Therefore, the Scottish Government (2014) put emphasis on giving the parents' rights to withdraw their children from SRE. This is also corresponding to recommendations made by the UK Parliament (February, 2015)[29] that parents should be involved in making decisions to withdraw their children from sex education classes and the schools should consult parents on the contents of the lessons.

Another respondent explains that parental objections towards teenagers participating in sexual relationships demonstrate on how taboo sex is. She stated:

> When we [senior policy maker and team] started talking about young people participating in sexual relationships years ago, teenage pregnancy and incest, it created reactions like objections and anger because they [parents] don't want this subject to be raised. To them, Brunei is an ideal country and nothing is happening.' **(Respondent DA, Female, Government Officer)**.

A teacher explores the challenges of teaching SRE in schools. She commented that there will be controversy and concerns arise particularly from the parents:

> If we do it without the parent's consent, there will be another problem arise. When this becomes an issue, it will get bigger where parents will sue the school and teachers or parents suing the Ministry of Health, including the policy-makers who dealt with it. **(Respondent AZR, Male, Teacher)**

Based on the findings above, parents will be more likely to disagree to allow their children to learn sex education. The respondents understood that there will be natural resistance from parents because they may think that their children's involvement will pose religious and cultural issues. This is corresponding to the studies made by Al-Dien (2010), Sanjakdar (2009) and Halstead and Reiss (2003) which noted for parental objections and the need to withdraw their children from SRE classes. Explaining this further, a Social Science teacher shared her opinion, commenting that parental resistance is caused by their lack of understandings on the current status of teenage pregnancy among youth in Brunei, including the social consequences of their sexual behaviours:

> I think the obstacles would come from parents who do not want to co-operate or do not understand the situation and do not understand that it is important to make their children to understand about the wrongs of

[29] UK Parliament (February, 2015) discussed the statutory status of SRE policy.

> these [pre-marital sex/sexual risky behaviours]. The obstacles will be more from the parents' side than the teaching and learning side because I faced this before, even on small matters such as bullying. Some parents just don't want to talk about it. **(Respondent ZA, Female, Teacher)**

In contrast, a female government officer who supports for youth 'empowerment' believes that education can be advantageous for Bruneian young people:

> Because empowerment means 'the ability to make decision'. Education is one of the very good, strong way to get empowerment. So young person who has education is empowered. They have choice in their lives. They can work wherever they want, they can choose you know and they have income for their living. That's sort of insured already. **(Respondent DA, Female, Government Officer).**

In order to lessen any potential controversy, Respondent ND suggested that religious bodies can be employed in developing SRE curriculum:

> SRE has to involve the advice of Religious Affairs so that they can merge both sex education and Islamic Science together. So Bruneians can inter-relate it [both]. **(Respondent ND, Male, Teacher)**

Seeing an example from Malaysia who shares similar religion and culture as Brunei, a respondent suggested to follow Malaysia's footsteps in developing sex education:

> I see they [the Malaysian] deliver a lot of religious background messages such as instilling the Islamic values in sex education. [..] However, I'm not sure if this module is thoroughly accepted in Malaysia. They're [probably] facing the same issues like Brunei. People are not accepting it due to cultural barriers. **(Respondent DRR, Female, Gynaecologist)**

The effect of both respondents' suggestions is not only to create a doctrine of interpretations of sex within Islam, but also fundamentally would affect the way Muslim parents conceptualised and understood their own religious traditions. In doing so, the parents will rely on an Islamic text-orientated approach and these will at least relieve the parents.

In this study, it was very interesting to note that some of the young respondents were not comfortable with using precise terminology and correct names when referring to sexual activity, sexual body organs such as penile and vaginal parts of human body including their functions. For instance, a student who is currently studying abroad referred sex as the 'S' word: 'It is common for us in Bruneian household not to mention the 'S' word. Parents will instantly shush us if we say it. But the exposure is different when we are outside the house.' **(Respondent FH, Male, 26 years old)**. This finding

also illustrates that the use of direct language is considered to be 'rude' and 'blunt' as explained by Kavanagh (2005). This creates a scenario, where Bruneian students are not exposed to sexuality because in their cultural traditions, parents never talk to their children about sex (Wong, 2012). Sex is also considered to be taboo until a person is married (Boonstra, 2007; Molla et al., 2008). Corresponding to this, a young boy commented: 'My mom gives me an advice not to ever have sex unless I'm already married.' **(Respondent LN, Male, 15 years old)**. When the respondents were asked about teenage pregnancy, majority of them tend to relate pregnancy with Islamic perspectives of pre-marital sex (Zina or adultery). According to most of the respondents, it is sinful to practice sexual relations outside marriage. As explained by a female university student:

> Sex outside marriage is Zina. I remember a Quranic verse, 'Do not get close to Zina'. By this verse, it means Zina is not only seen as a sexual act, but anything that goes with it too. For instance, meeting up your partner can lead to Zina as well. **(Respondent VV, Female, 21 years old)**.

A young boy who disagreed on sexual relationships among young couples said: 'They have no shame! What if people found out? I advised them [his friends] to stop doing sex [before marriage] and ask them to repent to God.' **(Respondent M, Male, 15 years old)**. Committing adultery is prohibited in Islam and Al-Lahim (1995) described the act of worship signifies obedience to Allah by adhering to His commands and refraining from His prohibitions. As illustrated by a policy maker: 'SRE should be fully taught within the framework of Islam, this subject should be at level with our country's philosophy Malay Islamic Monarchy (MIB) and not contravening with the country's vision to become a pious nation.' **(Respondent K, Male, Government Officer)**. Another respondent explained that: 'We are living in a Malay Islamic Monarchy, therefore in whatever we do, we must instil the values.' **(Respondent B, Female, Social Welfare Officer)**. Both respondents demonstrated the importance of adhering to Malay Islamic Monarchy as an underlying basis for SRE in Brunei. Majority of the respondents explained that they are adhering to the national philosophy: Malay Islamic Monarchy.

Taking into account of various religious, cultural and social backgrounds' of an individual is important (Sanjakdar, 2009) as it helps the respondents to develop their own 'understandings' of why an event happens in such a way. For instance, if young

people are involved in pre-marital sex and teenage pregnancy, lack of religion practice by the child's parents has always been pointed as the main cause. However, this is argued by Horwath et. al. (2008), that parental religious beliefs can be less influential in passing on their faith to their children, even if their children originally acquire the religious beliefs from their parents. As discussed by Richardson and Cranston (1981:549), 'the ability of parents to control the sexual behaviour of their children is often one cultural marker of success at child rearing and by extension a distinguishing mark of group status.' A male teacher viewed that the influence of religious beliefs on parenting is important to shield his offspring from sinful acts which in this case refers to sexual behaviours outside matrimony. He explained:

> If we want to reduce or eliminate all social consequences of pre-marital sex, it must be difficult because the root of the problem is parents who provide lack of religious education to their children. If parents put religion first, with strong faith it is easy for the young people to protect themselves from sinful acts.' **(Respondent Z, Male, Teacher)**

Since there is no SRE in Bruneian schools, Respondent EV argued that the root of the problem is in fact lies on the lack of parental involvement at home on educating about sex: 'The biggest problem is the parents, because we can't really blame anyone when pregnancy happened, because currently we're not teaching sex education in schools.' **(Respondent EV, Female, Teacher)**. Transforming our understanding to this response can be quite tricky. Truthfully, very few people can always respond to young people's social issues in a textbook way. However, one event or cause may lead to another, even though the relationship of events in social sexual consequences may not be necessary at some point. This altogether complicates the whole process of understanding the cause and effect of teen pregnancy, school exclusion and early incidence of marriage among Bruneian young people as generalisation may not be reliable.

This finding may suggest that a good role model in the family particularly parents is more likely to have positive impact on the child's development. To the majority of the respondents in this study, good role models may be able to bring positive influences to the young people. However, cultural barriers may hamper this, as sex is perceived to be a sensitive topic. The following sections will continue to elaborate on the cultural barriers that seem to provide explanation why teenage pregnancy is stigmatised in Bruneian society.

5.2.2 Lack of Knowledge in Self-Protection Leads to Bad Decisions

Sexual Health is defined by World Health Organisation (2006) as free from disease or negative experiences concerning sexuality. As identified by Collins et al. (2002), there are surveys that constantly present which the public requests schools to convey strong abstinence messages combined with information about self-protection for young people. Unfortunately, critiques have argued that abstinence-only programs in the U.S.A do not reduce the number of teenage pregnancy cases (Caldwell, 2015; Boonstra, 2011; Stanger and Hall, 2011). There is a general consensus among the key informants in this study that the proportion of teenagers who engaged in behaviours that put them at risk of pregnancy, HIV and other STIs are significantly escalating over the years. A male respondent presented the average cases of live births among young people between the age of 13 to 19 in Brunei: 'The average number of recorded births due to teenage pregnancy is 388 cases every year.' **(Respondent AW, Male, Representative from HIV/AIDS Centre)**. Correspondingly, Respondent DA presented the cases of live births of teenage pregnancy from 2008 to 2011. She is particularly concerned about the decrease of live births and perceives that illegal abortion could take place which suggests the inaccuracy of data:

> The highest occurrence was in 2008 and 2009. In 2010, it was slowly decreasing as there were 363 cases. But in 2011, it slowly rose up back to 581 cases. And live birth of teenage pregnancy is actually decreasing. But, I always question if this figure is real or our kids are getting abortion elsewhere. Because abortion is illegal in this country except the mother is in danger but I think our young people, they know where to go for abortion. I don't know whether this is a correct figure. **(Respondent DA, Female, Government Officer).**

The statistic presented by the respondents indicated that for the period of four years from 2008 to 2011, more than 300 babies were conceived outside wedlock every year (Brunei Times, 2011). These responses have opened a broader discussion about young Muslims in Brunei that are engaging in pre-marital sex and those who enter marriage life at a very young age. In order to understand the mainstream constructions of teen mothers and fathers, we must first understand the emergence of teenage pregnancy as an urgent social issue. As presented by Jimenez (2012), 'teenage pregnancy crisis' has emerged due to misinformation, moral panic and the demonisation of the poor. In drawing attention to the social construction of teenage pregnancy, the study above intends to provide evidence that supports the theoretical

framework: teenage pregnancy can be seen as a socially constructed problem. Arai (2009:110) also presented the reason of this tradition of ‘problemisation’ usually impacts on young people who are often pictured as behaving in socially challenging ways or having troublesome attributes. This conceptual framework enhances an understanding of the complexity surrounding teenage pregnancy and distinguishing it between a social issue and health issue. In a study made by Bonell (2004), he studied the perception of teenage pregnancy as a social problem in the UK and the USA, after the falling of teenage pregnancy rates as it was peaking in the 1960’s and 1970’s. He argued that, why is teenage pregnancy conceptualised as a problem and in what sense is it seen as a ‘social’ one? (Bonell, 2004: 255). There is a commonsense assumption that 'teenage pregnancy' constitutes some sort of a social problem (Murcott, 2008). In Brazilian press, Heilborn and colleagues (2007) have described the emergence of teenage pregnancy as a problem since 1990s. Akella and Jordan (2015:41) studied that the U.S rates of teenage pregnancy and birth rates have dramatically decreased over the past 20 years but the rate of teen parenthood still remain higher in the USA than other countries in the world. In relation to my study, the rates of teenage pregnancy and HIV/AIDS cases have declined and far lower than in other comparable countries in the world.

The finding also reports that the onset of sex among Bruneian youth could occur at an early age, even though sex is perceived as a taboo subject as young people are more likely to engage in pre-marital sex in the early age. As Koffi and Kawahara (2008), ideally put it, given that there is an increasing social pressure to delay the onset of sexual initiation, and to avoid teenage pregnancy or sexual health related diseases, however Bruneian youths may be expected to underreport their sexual or sexual-related activities. Richter and Mlambo (2005) revealed that teenage pregnancy seems to be encouraged by lack of access to sex education. Mothiba and Maputle (2012) noticed this as an ignorance aggravated by cultural taboos to be open about sex with adults, particularly parents. As a consequence of globalisation, the Muslims’ youth trend towards their engagement to risky sex is largely mistreated (Hasnain, 2005).For instance, Muslims in Brunei are not properly exposed to condom-use. Perhaps, showing a condom without a proper explanation is not considered as an effective education. Condom was more like a show and tell experience for a young student in a non-co-ed school. He explained:

> Our teacher introduced about condom to us based on a textbook picture. She showed the picture to us but she didn't explain to us how to wear it. It's like she said, 'this is a condom and that's it'. **(Respondent FF, Male, 15 years old)**.

Similarly, a respondent commented that: 'Condom is the most common contraceptive method to avoid pregnancy. In high school, we learned it but rarely talked about this.' **(Respondent VV, Female, 21 years old)**. Teachers as exhibited in the responses here did not demonstrate how to put a condom on correctly. The complexities surrounding sex education, culture and religion may hamper an effective sex education for Bruneian youth. Another female respondent shared her first experience of asking her parents following her discovery of condom:

> When I was at my teen age; I travelled to China with my parents. In the hotel, they provided condom, which at that time I didn't know it was called that way. When my parents were out, I started exploring this rubber-like material. When my parents got back, I asked them, 'what is this?' My parents instantly asked me to put it back in the drawer, and they started scolding me and asked me not to touch it. I thought it was a rubber band [laugh] I can blow it like a balloon [laugh] I only figured it was a condom after many years when a friend showed me one and I said, 'Oh, I've seen this before.' **(Respondent AY, Female, 21 years old)**.

This finding may suggest that the students believe that the lesson they received is somewhat relevant to their lives when the information is used at the right time (married). A male representative from HIV/AIDS Centre, whose post is influential in the organisation, argued that sex should not be taboo and there should be no cultural barrier towards implementing SRE:

> Bruneian people, in its simplest sense, perceive sex as taboo. But [I think] it's not considered as a cultural barrier, it is more on how we work around the system. It is how to make sex nice and acceptable to them. **(Respondent AW, Male, Representative from HIV/AIDS Centre)**.

It can be argued that, cultural and religious taboo surrounding sexuality education place young people in Brunei or Muslims generally at an increased risk of infection of sexual health related diseases and potential for unplanned pregnancy (Wamoyi et. al., 2010; Gray 2003). This finding altogether suggests that the ignorant attitudes that are shown by the Bruneians are simply because there is disorganisation on the part of multi-agencies in Brunei to work on this issue.

5.2.3 Deprived of Love and Attention

Jamaluddin et al. (2013) stated that deprived of love and attention can lead adolescents to engage in premarital sex and promiscuity. Religious values on relationship as illustrated in some Muslim scholars' studies somehow close a door for discussion on heterosexual relationship (Yip et al, 2011; Al-Dien, 2010, Islam and Rahman, 2008; Mabud, 1998; Athar, 1995). This is due to the fact that, Islam views heterosexual relationship within matrimony only (Islam and Rahman, 2008). For instance, coupling is not mentioned in the Quran and in a more extreme Muslim states, it is a religious taboo to have a boyfriend or girlfriend (Bennett, 2007). Being a Muslim state, it is not implausible to recognise the Islamic taboo on pre-marital relationship as perceived in Islamic perspective in Brunei. Understanding the nature of Brunei as a Muslim country, a non-Muslim biology teacher shared his view on this:

> Since this is a Muslim country, according to the Islamic law I understand that they shouldn't have any sexual relationship outside marriage. So, accordingly, they shouldn't be. They should understand the consequences of having sexual relationships that lead to unwanted pregnancy in which the cases are rising every year. **(Respondent ND, Male, Teacher)**

However, the respondents in Brunei perceived such relationship in a less restricted way. Instead of explaining relationship in an Islamic way, most of the respondents commented on how healthy relationship should be like. As viewed by a young boy: 'I think young people want love out of a relationship.' **(M, Male, 15 years old)**. He did not further explain nor justify his stance on this. This suggested that he may perceive the need for love is the broadest common reason to have in a relationship. Associating love with sex is perceived to be the main reason of the rise of teenage pregnancy as a female policy maker noted that girls are more likely to fall for the 'love' part:

> Young people associate sex and relationship with love. They feel that they are being loved especially girls. They like to be loved you know. **(Respondent DA, Female, Government Officer)**.

Similarly, a teacher also pointed out that young people, especially girls usually associate sex with love:

> Don't link sex with love. Sex is not necessarily love. The people who are taking part in sex, when I asked them why did they do it? They replied,

> because at least at that time somebody loves them. That's what they are going for. The love part. The girls are especially sentimental, they want to be loved all the time. **(Respondent ZA, Female, Teacher)**.

Both respondents have provided negative accounts of perceiving sex as seeking for love and attention from someone. This finding is corresponding to a study by Spear and Lock (2002:403) that reported the young people that engaged in consensual sex with their boyfriends talked about being in love and they have sex to keep their boyfriends. The responses above seem to suggest that Bruneian youth are having problems in the area of sexuality (Kavanagh, 2005). However a respondent argued: 'Love can be shown in many ways, not just physically but love can be shown in a caring and protective way.' **(Respondent T, Male, 15 years old).**

This also suggests that these conflicts can be barriers to learning SRE, and more importantly prevention to teenage pregnancy is not eligible because there are a mix of cultural and religious messages that have been learned. These messages can also be conflicting with the human needs, for instance, the sense of being loved. Furthermore, the conflicting expectations between boys and girls seemed to affect their interaction. For instance, according to a female student who showed her concern on her friend's pregnancy commented:

> I have a friend who had to drop out when I was in form 4 because she got pregnant. She said she actually did not want to do it, but the boyfriend kept pressuring her and eventually she agreed to do it. **(Respondent G, Female, 21 years old)**.

This is corresponding to a study by Chikavore et. al. (2013) found that boys were inclined to use violence against girls, and in return girls usually have no idea or preparation to deal with the violence. Based on the response above, there is a pressing need to address relationship harassment and violence among young people, which may have a significant impact on an individual's life either emotionally, socially, mentally and physically. Based on a Surveillance Study in the United States of America, nationwide 7.4 percent of students were physically forced to have sex when they refused to (Kaba, 2010)[30]. A female student has put emphasis on teaching the young people to be assertive in decision-making. She commented: 'SRE should teach

[30] http://www.rogersparkywat.org/wp-content/uploads/2010/09/DATING-VIOLENCE-AND-FORCED-SEX-AMONG-TEENAGERS-YRBSS-2009-BRIEF.pdf (Access online on 11th August 2014)

student about how to be assertive rather than only focusing on the scientific part of the sexual relationship.' **(Respondent Q, Female, 21 years old)**.

Most of the respondents in this section provide accounts of associating relationship with love. It implies that supplying adequate information about relationship should be important. The teenagers exemplified in the discussions show misunderstanding and false assumptions surrounding a healthy relationship. The findings also indicate that a healthy relationship should prevent teenagers from engaging in sexual intercourse. This may also be a factor contribute to the increased risk of teenage pregnancy.

5.3 EXPLORING THE RESPONDENTS' VIEWS ON EDUCATION ATTAINMENT OF TEENAGE PARENTS

The previous sections explored on how the respondents generally presented accounts of issues surrounding teenage pregnancy. Negative encounters were perceived as being the result of religious deficiency in self or parents rather than the disorganisation of the multiple government agencies in Brunei. However, in this section, cultural and religious taboo seems to provide explanation as to why there is limitation on the national intervention of teenage pregnancy. Furthermore, respondents reported that there were a circular relationship between lack of knowledge in sex education, early incidences of marriage and low educational attainment in Brunei.

As explained by Solomon-Fears (2015), preventing teenage pregnancy is treated as a priority by the policymakers and the public due to its high economic, social and health costs for teenage parents and their families. The UK is commonly cited as having the highest live births rate among young people age between 15 – 19 year old in Europe (United Nations Population Division, 2002; Goodman et al., 2004; Harden et al., 2006; Trivedi et al., 2007). However some critiques argue that teenage parenthood in the UK is more likely to be associated with adverse social and health outcomes than pregnancies or parenting at a later age (McLeod, 2001; Harden et al., 2006). Lemos (2009) stated that teenage pregnancy is generally common among young people who have low educational attainment. Additionally, he added that being pregnant and parenting at a young age often leads to education being hampered. Trivedi et al. (2007) recognised that teenage pregnancy strategy has identified some of the risk factors that increases the likelihood of teenage pregnancy which include risky sexual behaviours,

low educational attainment and family background. Existing policies in Brunei, with their focus on school exclusion have fundamentally transcended by Islamic and traditional views of teenage pregnancy and teenage motherhood. A Social Science teacher shared her opinion on this: 'Following our religion, the girl is now entering motherhood and has become a woman. As a mother, the first priority is to look after the child, right?' **(Respondent ZA, Teacher, Female)**. School exclusion typically results in a 'rough patch' for Bruneian female pregnant who attend school all across the level: primary, secondary and tertiary levels. This is illustrated in the following response which proves a customary practice of exclusion policy on pregnant students:

> Normally, once the pregnant young people have their children, they will have to look after them. They will quit school and start looking for jobs. They will not come back to school. But some may try to do private study. It happened before where a girl went back to school after some years to collect her leaving certificate. We asked what it was for and she said it was for job-seeking purposes or trying to do private exams. That's the normal case in Brunei. **(Respondent AZR, Teacher, Male).**

Those who are governmentally funded to study abroad are also not exceptional to be excluded from their sponsorship, if they are found to be pregnant. This case was shared by a female Government Officer:

> A bright student who was awarded scholarship [by Brunei Government] and she went overseas to study. The sponsor learned her pregnancy and she was immediately asked to return back to Brunei. They took back her scholarship. That's it you know. That's her future all gone. **(Respondent DA, Female, Government Officer)**.

The case above reveals that it is a challenging task to positively intervene in the lives of young parents (Harden et al., 2006). The US Department of Education (2013:3) reported that before young people become parents, they had performed well in school and they also believed that they will be able to graduate and had stayed in school. Both cases are not unique in Brunei. The same problem and rights of young mothers and fathers to return back to education raise questions if this issue is being addressed by the policy makers. It shows that even if Bruneian is surrounded by cultural and religious values, the same unique school exclusion is practiced where young parents has to endure the risks of not being supported, having low level of education attainment and unemployment due to teenage pregnancy. The prominent problems of these are its long term effects on individuals, families and the community (Katoanga, 2001).

5.3.1 Policy Context on Social Exclusion of Teenage Pregnancy and Teenage Parenthood

The previous section has discussed the education attainment of teenage parents which may hamper them from attaining a higher level of education. The following discussions will be focusing on the unique school exclusion policy which is a mandatory practice in Brunei. The policy context will unmask the cultural and religious taboo stigma surrounding teenage pregnancy. Teenage pregnancy and motherhood has been a main focus of the UK Government's policies to combat social exclusion and health discriminations (McDermontt et al., 2004). A UK strategy was constructed to prevent unwanted pregnancies and improve the outcomes of teenage parenthoods (Wellings et al., 2005). Harden et al. (2006:66) reported the findings from a systematic review of the research evidence concerning teenage pregnancy, parenting and social exclusion. They stated that early interventions and youth development programmes that promote healthy relationships and engaging with ambition and learning can reduce teenage pregnancy rates by 39 percent. Swann et al. (2003) explained that social exclusion is a social consequence of teenage pregnancy and parenthood.

In Brunei culture, teenage pregnancy is perceived as a 'bad news', which should not be disclosed directly in front of public. Schools and health professionals usually induce culturally sensitive ways of disclosing this 'bad news'. For instance, when a school or an institution learns that a girl is pregnant, school will privately connect to parents who will discuss the problem and the consequences of keeping pregnancy while schooling. After receiving the 'bad news', the teenage girl's education will be immediately terminated. For instance, the discovery of a teenager's pregnancy has brought immediate reaction to an individual and her family. A student shared how discontent her friend's parents were over her unplanned pregnancy:

> Her pregnancy was quite hard for her at first, considering Brunei's conservative nature and also her parents were very disappointed with her at first but in the end they came to terms with it. **(Respondent Q, Female, 21 years old).**

A gynaecologist whose work is relevant to Reproductive Sexual Health, highlighted teenage pregnancy as an issue in Brunei that needs to be flagged up. She expressed her feelings towards a particular incident which saddened her due to a school mandatory practice that, consequently, expelled a young girl out of school:

> When I see children who got pregnant, teenagers and they sacked out of school, it saddened me. Because at 13 or 14 they got out of school, what is left in their life? And to me, in my heart we need to do something about it. I had a particular case. I was given a letter from the Sharia' Court about a girl or it was some education-related investigations if I am not mistaken. A letter to confirm that a girl had given birth. I cannot lie because we have a record of the event. She had given birth at XX Hospital so we have evidence that it happened. In order to answer the question to Ministry of Education I had to call the family here to tell them that I had been asked to write a letter, they should know too. That was my saddest point. So I replied to Ministry of Education, saying it was true. There was a proof, but I said can we change our policy and help her to have night classes, extra classes somewhere else because she had a lot of years left to learn. **(Respondent DRR, Female, Gynaecologist)**

This finding reports the common mandatory practice, the exclusion of pregnant students in Bruneian schools. Included in this report is a vignette of a girl who unrevealed her pregnancy so she could avoid from getting excluded from school. This girl become one of the many girls who have either given birth or are pregnant before they complete education, leading to social exclusion from school. This is a practice that has a legal mandate, which is a regular solution to young girls who are still attending secondary schools. The opportunity for teenage mothers to enrol in a new school after they have a child will also be hampered and, consequently, they will either refuse to continue their education or they have no choice but to continue education in private schools. The male identified as the impregnator equally will also be expelled from school.

This finding however, reveals there is some discrimination against many pregnant girls like the above case. This also created a scenario where if the boyfriends do not want to accept the pregnancy of their girlfriends, his life may carry on free of interruption and their education will not be hampered which leads to unfair treatment of young girls. Based on the evidence above, it seems that currently the status is not known for the revision of policy, with specific attention being paid to the educational policies for pregnant young girls. In relation to the literature reviewed (See Chapter 2), these findings argue that the protection of the young girl and the right to equal education must be defended. However, these evidences seem to imply that 'abstinence' is encouraged in all schools because Bruneian Government schools do not provide support to teenage parents to reduce the long term effects of social exclusion through education.

In Brunei, teenage pregnancy is seen as a violation to school rules. Hence, being expelled from school is a practice that seems to suggest that teenage pregnancy is more like a personal deficiency and must be handled by the affected persons. These findings further indicate that there are no standard practices for schools in dealing with the reality of pregnant or parenting teens. In connection to Brunei school policy, a teacher disagreed on excluding pregnant girl from continuing their education once they are impregnated, she commented that:

> I have done research at XX Centre before and I have seen female teenagers with different kinds of problems. I disagree, after a girl is impregnated, she is labelled as someone who breaks the school discipline. That's not even connected. Will expelling them even help? If they are not educated, they will become a burden. And they may present the same cycle to their offspring **(Respondent CGA, Female, Teacher)**

Similarly, a teacher views that when teenage parents are too young to assume responsibilities without any guidance, they will be more likely to repeat the same cycle to their children. As she explained: 'Teenage parents here are directionless. How can they guide their children? We will have more problems, as a result. This will be a burden to the country and there will be more social problems.' **(Respondent ND, Male, Teacher)**. The negative consequences of teenage parenthood have been discussed by many studies. Among the studies, DfEs (2006) found that children born out of teenage pregnancy are more likely to become teenage parents themselves. Similarly, Lemos (2009) discussed the negative consequences of teenage pregnancy. He presented a logic sequence or cycle of teenage pregnancy which explains that teenage pregnancy is most common for those who have low attainment of education. He further noted that: 'As a result of low educational achievement, inadequate employment training, poor childcare provision and a lack of support, teenage mothers suffer a considerable disadvantage in the labour market and can be highly reliant on welfare benefits and subsidised housing, sometimes following a period of homelessness or temporary housing. They may also be forced to lean on relatives' (Lemos, 2009:5).

In the US, home schooling and supports for teenage parents are present to reduce the long term effects of school exclusion. The rights for teenage parents are clearly defended under Title IX of the Education Act 1972 which 'prohibits the discrimination in educational institutions based on gender, pregnancy or parenting status' (Wolf,

1999). Perhaps, in Brunei the least that the Government can do is through the social services which can provide alternative supports for pregnant teenagers. A female teacher commented: 'If she [pregnant teenager] still wants to continue schooling, perhaps she will be schooled in an organisation called XX Centre. It is up to the person really.' **(Respondent ZA, Female, Teacher)**. Moreover, a Welfare Officer further described the process of schooling these female teenagers in an organisation: 'Some parents would refer the teenage girl to social services where she can meet peers who similarly involved in risky sexual behaviours or similar experience as hers.' **(Respondent B, Female, Social Welfare Officer)**. However, it can be argued that the reality of teenage pregnancy is outside the Centre where child-bearing is costing her a lifetime care physically, emotionally and financially. The findings thus further imply that discrimination due to pregnancy and maternity is greatly felt by the female because she is the real 'victim' who endures most of the consequences, for instance, facing the shame of unwanted pregnancy, informing her parents about the pregnancy, agony of labour pains and raising the child outside wedlock (Fatah Yasin and Jani, 2013:75). Additionally, some critiques have argued that the health outcomes of young mothers and her baby during and after pregnancy will be harmful (Lemos, 2009).

According to Swan et al. (2003), there is very little research which investigates teenage fathers. Joseph Rowntree Foundation (JRF, 1995) based on a longitudinal data from the National Child Development Study found that young fathers were most likely to come from low income families and have left school at a young age. Duncan (2005) clarified that similarly like young mothers, most of teenage fathers are 'socially disadvantaged' and many had poor relationships with parents. However, like most teenage mothers, teenage fathers also express positive feelings about the child and want to be good fathers (Quinton et al., 2002).On the side of teenage fathers, a student shared his experience of knowing his cousins' friend who had to quit school at an early age:

> This happened to my cousins' friend. He was around fifteen. He had to quit school early and get married. He also had to earn a job so he can bring something on the table for his wife and his unborn child.' **(AY, Male, 15 years old)**.

To some respondents, early teen marriage due to pregnancy means assuming responsibilities by force regardless the young people are ready mentally, physically or

emotionally and even financially. In the following section, the status of children born outside wedlock is discussed.

5.4 THE STATUS OF CHILDREN BORN OUTSIDE WEDLOCK

This section investigates the social stigma surrounding the children born outside wedlock. As the consequence of teenage pregnancy outside wedlock, the children may be born fatherless. The stigma is magnified when the child is born with a single mother. The accounts will be investigated in the following sections. The first section will discuss on the status of children outside wedlock as 'stateless' which present the cultural conflict and stigma may be impossible to avoided in such case. The second section will discuss on abortion which is illegal in Brunei and considered as a 'private' choice and personal sin. The status of Muslim children born outside wedlock has been discussed by Jamaludin et al. (2013), as they define a child who was born out-of-wedlock or as a result of fornication is defined as illegitimate child in legal term.

In addition to this, the stigma attached to unwed teenage pregnancies is not easily shed (Katoanga, 2001:155) as illustrated in this study. There is an association of an acceptance of early motherhood with social deprivation (Turner, 2004). A social art teacher in this research argued that children born outside wedlock are more likely to receive negative experiences:

> The controversy of children outside wedlock cannot be avoided. They [children outside wedlock] will feel socially awkward. We won't usually know he or she is a child out of wedlock, unless we know the father's name. We don't want to offend those individuals, so we should not be hateful towards them. We need to put ourselves in their shoes and imagine how they would feel like if they know. **(Respondent ZA, Female, Teacher)**

A conflict presented in the quote above has shed light on discussions on the discussions of if this is Muslim customary practice. In Brunei, there was no legal abortion as a way of resolving teenage pregnancy, which gives limited research for study in discovering decisions to keep the infant according to varied class and race as explored by Spear and Lock (2003). Also notably, the decrease in live births of teenage pregnancy is associated with abortion among female youths. Another respondent

however was more concerned with uniting the young teenagers in a marriage rather than having an employment and a career. A female teacher explained:

> If a girl is impregnated, the parents have no choice but to unite them in marriage. Some pregnant girls will take a bad solution by abortion. Part of it is sin **(Respondent CGA, Female, Teacher)**.

In the event of teen pregnancy and teenage sexual risky behaviours, a government officer explained that 'abortion' was the contents that parents were most likely to exclude from sex education. This is corresponding to a study by Rolston et. al. (2005) which found that abortion topic is implausible to be incorporated in school-based sex education. Additionally, she stated that abortion may not be reported because it is illegal in Brunei: 'Young people may have done early stage abortion and I am not surprised if the actual figure is doubled from the registered live births.' **(Respondent DRR, Female, Gynaecologist)**.

5.5 SOCIAL STIGMA SURROUNDING HIV/AIDS

This section investigates the social stigma surrounding HIV/AIDS. In some of parts of the worlds, it was culturally taboo to discuss about sex and sexual matters (Ipke, 2004). Fershtman et al. (2011:142) explained that some taboos are prohibited under the law, and transgressions may lead to severe punishment. When Muslims countries do not advocate sex education due to cultural and religious taboo stigma, it may pose potential threat to Muslim countries, the spread of STDs, HIV prevalence and teenage pregnancy (Gray, 2003). This may not only affect Muslim individuals, but also to non-Muslim minority groups in a Muslim country. The social stigma related to HIV/AIDS and teenage pregnancy is much more pronounced in Muslim cultures (Hasnain, 2005). For instance, a senior policy-maker explained that during HIV/AIDS campaign, an exhibition was held showing the audience the images of sexual diseases: '[S]ome of them were shocked but still some of them don't like it, it's too sensitive for them.' **(Respondent D A, Female, Government Officer).** This was further explained by a gynaecologist that sexual health related problems may not be discussed because: [P]eople are not accepting it due to cultural barriers. **(Respondent DRR, Female, Gynaecologist)**. A female representative from HIV/AIDS Centre illustrates that this stigma prevents those at risk to become the 'façade' for conveying appropriate motivational talks and counselling as a support system for others at risk:

> We are a little bit unfortunate that we don't work with people who are HIV Positive here in Brunei. Because it is very confidential and plus there is only a small amount of cases and they might don't want to work with us because Brunei is a small country. It's like we know each other. They might don't want to be the face and labelled as a HIV Positive person. Even though it is meant well to inspire other HIV infected people, you can't just change the perceptions of the Bruneian minds that have the mentality of judging other people's mistakes and sins. **(Respondent DN, Female, Representative HIV/AIDS Centre)**

Brown (2015:313) discusses the label can often be attached irrespective of behaviour and once given it is very difficult to lose, with consequent negative effects on identity. This finding similarly reflected the criticality of Bruneian communities, such as the area where everyone is known to each other. The focus of low self-esteem of ex-drug addict or people live with HIV/AIDS has removed them from attending social contexts. Additionally, she shared her experience of being trained by a male HIV Positive who was an ex-drug addict:

> Back in 2004, an organisation called KASIH [organisation name has been changed] which is quite similar like the centre that we run right now, but it's based in Malaysia. The program was called Levelled Training. They sent an HIV positive man and few others from KASIH to train us. It was good because they got to share their experiences. We later adapted their program for Bruneian youth. **(Respondent DN, Female, Representative HIV/AIDS Centre)**

Another, representative from HIV/AIDS Centre similarly pointed out that the Bruneian's ignorant attitude towards HIV/AIDS has caused this subject not to surface:

> Yeah, in a way they [Bruneian] are being ignorant because in Brunei it is not that common. It is not like breast cancer, autism or anything. It's like 'AIDS, who cares?' those kind of things. In Brunei right now, social issues are quite spreading and it is very common, so things could happen and the number of teenage pregnancy is getting high. So, in a way it is related to AIDS, because we are not only concerned about AIDS, we also concerned about that. **(Respondent BJ, Male, Representative HIV/AIDS Centre).**

Access to SRE knowledge of Brunei government services was reported to be particularly difficult for some of the respondents in the study. Representatives from HIV/AIDS Centre show more supportive attitudes towards people with HIV/AIDS and teen pregnancy. According to Respondent AW, accepting rather than judging is important and in the eyes of Allah it is wrong to be the judge of someone's sin:

> As a Muslim myself, and believing Malay Islamic Monarchy and Negara Zikir, I still accept them as a person, but I do not accept their behaviours. Say if someone is gay, HIV positive or pregnant, should I be the judge to that person and say he or she has done a wrong thing? Each event has a silver lining. Believe that there is Qada[31] and Qadar[32]. Allah knows more than we know. My job is not to judge them; my job is to control further damages. **(Respondent AW, Male, Representative HIV/AIDS Centre).**

The findings above explore the perceptions that the respondents presented about the supportive nature of a non-government organisation towards people living with HIV/AIDS, however some of the participants also presented accounts of the practical ways that they were supported by the organisation to which they belonged. For example, a male respondent volunteers for HIV/AIDS Centre. He described how he the people in the Centre is more accepting: He continues by informing his homosexuality has been accepted by the people in the Centre:

> I like it here, I am no longer hidden behind the rainbow. I actually can bring myself forward by being one of the volunteers here [HIV Centre]. **(Respondent BJ, Male, Representative HIVÁIDS Centre).**

Similarly, another representative from the organisation continues to describe about how homosexuality should be addressed in Brunei without damaging the cultural and religious interests in the country:

> For instance, we want to talk about gays, HIVs and homosexuals, at the same time, we want to pull it in a way that it is actually not damaging to any sides [Brunei Muslims and Bruneian homosexuals]. What is the locally adaptable context in Brunei? We haven't found that yet. **(Respondent AW, Male, Representative HIV/AIDS Centre)**

One of the reasons why HIVÁIDS interventions are not implemented in Brunei is because it is not one of the top killer diseases, and the number of the occurrence for both teenage pregnancy and HIVÁIDS are relatively low, but significant to the Bruneians, as the number of population is Brunei is small. One of the respondents raised on the issue why SRE has not been introduced in Brunei as HIV/AIDS is not among the top killer diseases in Brunei:

> All praise to Allah because in Brunei, we have a very good support system on HIV/AIDS. The Ministry of Health provides basic health needs

[31] Qada' is certain belief that everything happens in this world is by the decree of Allah.
[32] Qadar means everything happens is under the decree of Allah and according to His great knowledge which shows His wisdom.

> for those people living with HIV. As you know, our medical care is free and it is quite up to the standard. But HIV is not one of our main agendas in national health. Even the top 10 killer diseases in Brunei is not HIV and our priority is mostly on Non-Communicable Diseases. Yet, at the same time we're not complacent with it. **(Respondent DRF, Male, Senior Health Officer)**

This finding suggests that one of the main barriers to assessing SRE for Bruneian young people has been the fact that the national education policies and plans have not addressed this issue. The Brunei Government provides free health care and education for all Bruneian citizens (Ministry of Health, 2012). If SRE is going to be introduced in Brunei, the cost will be expensive for both health and education sectors, adding up more burdens to the country. UNESCO (2011:8) outlined three difficulties that policy-makers world-wide will be facing when making decisions on sexuality education programmes. Firstly, costs of developing sexuality programmes. Secondly, the costs of implementing and scaling them up and finally, the programs give value for money. Even though the data shown of HIV/AIDS cases are relatively small but we should not be too complacent about it, given that Brunei is known for its small population (Ministry of Health Brunei Darussalam, 2010). In this way, the findings here echo the arguments presented in Chapter 2, in which the literature suggested that a sense of religious identity was upheld and maintained by resisting negative perceptions and stereotypes about Brunei Malay Muslims society.

5.6 CHAPTER SUMMARY

The present study shows that, clearly some taboos are also regulated by customary and religious practices. These taboos and their consequences seem to cover a wider range of social, moral and cleanliness principles of Muslims people. Since matrimony is the accepted ground for expression and practicing sexuality, discussing sex outside marriage and yet alone engaging to pre-marital sex, is perceived to be taboo by majority of the respondents. The arguments in this section assumes 'symbolic intention' that the people want to represent ideas that Brunei is a Malay Islamic Monarchy Country and declaims certain cultural problems backwards away from the solutions. The discussions above seem to suggest that when the problems are approached, the face of the Bruneians will be jeopardised. Teen pregnancy is generalised mostly as 'women's shame' when in fact this is addressed primarily as a

consequence of what both ‘men’ and ‘women’ do. Perhaps a response to this is that sex concepts are reflected in the Islamic laws and teachings that the Muslims must adhere to. Marriage and family institutions in Islamic perspectives can avoid unlawful pregnancies, inheritance rights, incest and status of the family which is highly valued in Islam. Without isolating the parents in SRE policy and practice, it will avoid an internal and natural resistance from the parents to the unwelcome change of status – either from abstinence program to contemporary sex education program, having a separate curriculum of sex other than science related-curricula or integrating sex education in other biological science curriculum.

To conclude, the empirical analysis suggests a direct link between education, culture of the young people and the occurrence of teenage pregnancies. The respondents constructed the idea that teenage pregnancy is not acceptable in the society. Furthermore, the emergence of teen pregnancy as a social issue was understood as an issue particular to ‘personal problem’. Few of the respondents belonged to broken home and had mothers who themselves had been teen moms. The focus on teenage pregnancy as an issue, thus constructed young mothers as school dropouts, uneducated and can be social burdens to the government.

CHAPTER 6

ATTITUDES AND PERCEPTIONS OF THE KEY INFORMANTS TOWARDS SEX AND RELATIONSHIP EDUCATION

6.0 CHAPTER OVERVIEW

This chapter reports the result of data analysis and findings of 21 interviews with the key informants. The main aim of this chapter is to identify the range of essential positive attitudes and perceptions that the key informants perceive that may influence their supports for SRE in the country. The respondents' positive attitudes and perceptions towards SRE represent only half of the equation with respect to decision-making in implementing SRE in Brunei. The outcome of this chapter, however, will result in the recognition of specific climatic factors which can be utilised to further develop SRE which is appropriate for Brunei's settings.

6.1 INTRODUCTION

One of SRE aims is 'to equip children and young people with the information, skills and values that they need to have safe, fulfilling and enjoyable relationships and to take responsibility for their sexual health and well-being' (NCB, 2010:1). In the U.K, Ipgrave (2010) observed the concern and controversies of young English Muslims' education as it has been recurring in the media for the past twenty years and continue to be highlighted in the education world. The particular needs of Muslim students in obtaining SRE are not being fully met within non-majority Muslim schools (as illustrated by Sanjakdar, 2008; Sanjakdar, 2013).

The chapter begins with exploring the key informants' positive attitudes and perceptions of SRE. In the following sub-sections, three main points will be discussed. Firstly, SRE as a source of knowledge that can arm young people; secondly, SRE can become a tool that protect the young people from sex, particularly sex abuse and finally, SRE can teach about gender equality and responsibility in relationships. Intervention for HIV/AIDS is also considered in this chapter where it explores the roles of a non-government agency which has distinctive approaches in the management of education and access to HIV/AIDS information, which alternately linked with SRE.

6.2 EXPLORING KEY INFORMANTS' POSITIVE ATTITUDES AND PERCEPTIONS OF SEX AND RELATIONSHIP EDUCATION

This section investigates the key informants' attitudes and perceptions towards SRE which are among important factors in influencing the respondents' positive feelings towards the curriculum. According to Iyer and Aggleton (2015), the UK has a long history of SRE. SRE Guidance was first published in 2000 by the UK Department for Education and Employment (DfEE, 2000). As part of supplementary to the guidance, an extension was further developed which the advantages of being educated in SRE are presented (Brook, the PHSE Association and the Sex Education Forum, 2014). There are growing debates around the issue of whether the curriculum should be made compulsory or not (Sex Education Forum, 2006). The statutory status has aggravated objections from UK Parliamentary members because they believe that SRE should be made compulsory (UK Youth Parliament, 2007). Additionally, both British Youth Council and UK Youth Parliament (October 2014) also put stress on the importance of SRE in dealing with real life issues such as relationships and internet use. In relation to Muslim societies, Bennett (2007) has focused on the rights of Muslim youth to receive comprehensive sex education that is religiously appropriate.

In Malaysia, Makol-Abdul et al. (2009) argue that the application of SRE in elementary education is debatable among the Muslims societies. The authors further suggest that SRE needs to be assessed in the context of Muslim majority countries. The most common debate among Muslims is whether parents should allow their children to obtain sex education at school which may contradict with the value system practiced in Muslim societies (Sanjakdar, 2009). Following this point, it is very important to note that strong resistance towards SRE is not collective by all Muslims (Halstead, 1997). This altogether shows that there is no distinction between non-Muslim and majority Muslim countries in taking considerations to implement SRE because both contexts equally pose challenges to sex education.

6.2.1 Knowledge as a Weapon to Arm the Young People

SRE also aims 'to contribute to behaviour change, including reducing unprotected and unwanted sex, and reducing harmful behaviour, including sexual offences such as assault and abuse.' (Sex Education Forum, 2010:1). As part of providing protection for young people, United Nations Educational, Scientific and Cultural Organisations (UNESCO, 2009) has issued voluntary sex education guidelines to assist young people to defend themselves against unintended pregnancies, HIV and against abuse. The guidance advocates for developing and developed countries to ensure all children and young people to learn about HIV, contraception, human sexuality and relationships (Sex Education Forum, 2010a). Drawing on the notion of 'education as a social vaccine', knowledge has been identified as an important weapon to protect youth from risky sexual behaviour (Oduro and Arnot, 2010:1). However, research in the UK has identified that there is no consistency in SRE policy that ensure all children and young people will get a basic knowledge about sex, relationships, the law and safety from sexual abuse (Sex Education Forum, 2010b:2). Even though it is argued that there is no consistency in SRE programme, a number of studies have indicated that positive attitudes towards sex facilitate positive changes of sexuality and behaviours (Kanku and Mash, 2010; Andrade et al., 2009). Accordingly, balanced SRE programs will encourage students to delay the onset of sex and practice safer-sex when they choose to be sexually active (Planned Parenthood Federation of America, 2013).

When asked about their perceptions of SRE, majority of the key informants reported that they believe that SRE can teach young people not only the biological aspects of sex, but also on other matters encompassing this subject such as moral and social concerns. Realising the importance of education, a secondary school teacher suggests to implement SRE for school teenagers as this group is more likely to contribute to teenage pregnancy rates, school dropouts and unemployment statistics: 'The social problems [such as pre-marital sex, teenage pregnancy and early incidences of marriage among teenagers] are usually caused by the young people. To decrease the rate of social problems, we need to start from the education system.' **(Respondent Z, Male, Teacher).** An active member of a HIV/AIDS organisation, who is also a teacher, noticed that pre-marital sex and teenage pregnancy among Bruneian

youth is on the rise and commented to include SRE curriculum in the education system as there is only little awareness about the social consequences of sex: '[W]e cannot stop it [social consequences of sex] because the awareness is going really slow, and it has to be in the book. It's not to encourage those [young people] but they really have to know.' **(Respondent ND, Male, Teacher)**. Similarly, a senior policy maker who has been involved with social welfare issues in the country for more than 20 years has demonstrated this importance by describing the significance of equipping young people with sex education:

> If they [young people] are educated in sex education, they will understand the implications of sex. [..] If they have sex education maybe they can be made more aware of the implications, not just wanting to have fun for a few minutes but the consequences is a lifetime of bearing a child. **(Respondent DA, Female, Government Officer from Ministry of Youth, Culture and Sports)**

The findings reveal that some of the respondents agree that SRE should be taught to young people in a formal school setting. The respondents' quotes above seem to suggest that if young people are educated with sex education, they will be made aware of the social consequences of sex such as teenage pregnancy, teenage parenthood and the long term effects of social exclusion such as lack of opportunity to return back to education and unemployment. Questioning the respondents on their perceptions of SRE also revealed the inextricable link between sexual health and the social aspects of sex. However, it can be argued that sex education does not necessarily focusing on giving youth the knowledge to protect them from untimely pregnancy, but 'even without bearing a child, chances are they will be at risk of sexual transmitted diseases.' **(Respondent DA, Female, Government Officer from Ministry of Youth, Culture and Sports)**. Therefore, the knowledge can be used as a shield to protect them against unwanted pregnancy and sexual transmitted diseases as a respondent reminded that 'prevention is better than cure.' **(Respondent DN, Female, Representative from an HIV/AIDS Centre)**. According to a teacher, if schools are to employ sex education, 'it is to help the young people to reduce the social consequences [of sex]. In a way, we are stopping them from making it even worst.' **(Respondent W, Female, Teacher)**. Equally, knowledge about prevention of HIV/AIDS can be increased among youth by passing on the sexual health information as another respondent viewed:

> Positively, I would say it'll definitely increase the awareness. It means that we are passing on the knowledge. So, children or youth will know how to prevent themselves from getting STDs including HIV. **(Respondent BJ, Male, Representatives from an HIV/AIDS Centre)**

The vast majority of papers which have been published on the question of the respective merits of SRE in school have concentrated on the positive outcomes that are linked to a range of social skills during adolescence and in the later life course (NCB, 2008). The responses above recognised SRE as knowledge or information that can help young people to protect themselves. This is one of the positive aspects of SRE which can contribute to the desired climatic influences for SRE development in Brunei.

This study also presented a striking example of low-level of awareness among Bruneian youth, which is clearly illustrated by a descriptive account from a teacher. Following this event, the teacher was left feeling disconcerted about a young girl's curiosity over contraception methods in a school talk:

> There was a talk in school given by the government authorities involving the police, narcotics bureau and people from the Ministry of Health about teenagers' social problems nowadays. After the talk, there was a question and answer session. A young girl came up and asked a question that shocked the crowd, "How do we prevent ourselves from conceiving?" This was actually asked in the hall in front of many people with government authorities invited. [..] Most of the children inside the hall went like, "what was she thinking?" **(Respondent Z A, Female, Teacher)**

In the above case, the 'Q and A' session was used as an avenue for the young girl to seek information from the government authorities as she thought that the authorities had the capacity to respond to her curiosity. According to the teacher above, it was more than a little jarring to hear the young girl making a shocking question, not least the young girl's attempt to gain a clear explanation about contraception methods from the government officers. The teacher thought that the 'unexpected' question from the young girl demonstrated that she may have limited knowledge on sexuality or sexual health related problems. This finding seems to imply that teachers would encourage questioning in most schools but some teachers would not expect to deal with more extreme questions especially on something taboo. This finding also suggests that acquiring knowledge is important, in order to prepare the young people to deal with the natural sexual desires as their body hits puberty. According to Athar (1996), it is

ironic that such knowledge is discussed in great details in the Quran and Hadith (Prophet's traditions) but sex topics seemed to be closed from discussions in most Islamic countries (as illustrated in Wahba and Roudi-Fahimi, 2012).

The finding above is contradicting with the Prophet's traditions whereby the first Muslim was not shy to ask about bodily functions and sexual related matters (Bennett, 2007). As stated in a Hadith: 'How splendid were the women of the Ansar; shame did not prevent them from becoming learned in the faith.' (as cited by Lindsay, 2005).

In other part of this study, the respondents admit that sex is perhaps too limited within the discussion of anatomy of reproduction and sex in marriage (as discussed in Chapter 6 and 7). Seeing that Bruneian youth lack of SRE, a respondent commented that in Brunei, '[S]ex education is not on the book or also largely ignored and constrained from taking further interventions.' **(Respondent ND, Male, Teacher)**. A school counsellor was frustrated because no intervention can be done: '[Y]ou know, but you close your eyes because it is not your problem. You care, but you don't know how to step in.' **(Respondent IZ, Female, School Counsellor)**. Another respondent who is an active member of an organisation shows supportive attitude towards sex education, but he admits that sometimes it is frustrating to make a change in Brunei due to its complex nature of system:

> It is sometimes frustrating when you are in an unstoppable force. You want this [SRE] to happen in Brunei but the big barrier is knowing that we will not be able to move in Brunei. **(Respondent AW, Male, Representative from an HIV/AIDS Centre)**

The health officer believed that SRE should reach a new place of centrality within the school curriculum and must be taught to all tiers in schools. He explained:

> Because we get the notifications for STD's cases which involve teenagers and teenage pregnancy as well. We have the actual data to back it up and it is an issue. At the moment, it is like a ticking-time bomb, it can explode all of a sudden. [..] Sex education should be done in all schools not just in school with lower level of education but I think it should be done in all secondary schools because anybody can be at risk. **(Respondent AF, Male, Senior Medical Officer)**

Another gynaecologist, whose work is relevant to reproductive sexual health, highlights teenage pregnancy as an issue in Brunei that needs to be flagged up. Additionally, she expressed her sad feelings towards a particular incident which

saddened her due to a school mandatory practice that, consequently, expelled a young girl out of school. This was demonstrated earlier in this study (See page 121). This finding reports the common mandatory practice, the exclusion of pregnant students in Bruneian schools. Included in this report is a story of a girl who kept her pregnancy undisclosed so she could avoid from being expelled. Expelling pregnant girls is a practice that has a legitimate mandate, which is a regular solution to young girls who are still attending schools. The opportunity for young mothers to enrol in a new school after they have a child will also be hampered and, consequently, they will either refuse to continue their education or they have no choice but to continue education in private schools. This finding however, reveals there is some discrimination against pregnant girls like the above case. This also create a scenario where if the boyfriends do not want to accept the pregnancy of their girlfriends, he may carry on with his life and their education will not be hampered which leads to unfair treatment of young girls.

Based on the evidence above, it seems that currently the status is not known for the revision of policy, with specific attention being paid to the educational policies for pregnant young girls. In relation to the literature reviewed, these findings argue that the protection of the young girl and the right to equal education must be defended. However, this situation implies that 'abstinence' is encouraged in all schools because Bruneian Government schools do not provide educational support for teenage parents to reduce the long term effects of social exclusion. The senior policy maker also believed that young people should be educated about the social consequences of teen pregnancy such as school expulsion and the hardship of returning back to education after giving birth. It can be stated that a good investment in teaching young people to make wise decisions in life is better than dealing with the long term effects of social exclusion (TPS, 2006) Additionally, the same respondent stated that educating young people means to 'empower' themselves in order to make wise decisions. As a senior policymaker who is responsible for the welfare and well-being of young people, she has a strong belief that young people should be empowered:

> We [senior policy maker and the team] believe in empowerment of the young people through education because empowerment means 'the ability to make decision.' So a young person who has education is empowered. They have choices in their lives. (**Respondent D A, Female, Government Officer from Ministry of Youth, Culture and Sports)**

However, another respondent reminded that even though individuals are given the option to choose abstinence or not, 'schools cannot give the young people some support or exposure of images that exceeds the limits.' **(Respondent EV, Female, Teacher)**. This suggests that the respondent may support SRE implementation in the country but she may be aware of the teaching approaches that should be appropriate for Muslims students. Another respondent also pointed out that parents may also oppose this idea. Referring to parents, she comments:

> They [young people] would know the concept of sex, they know what will happen and in the end, it's the individual choice. And if there is a student who happened to be experimental and curious to try and later the parents found out. Who do you think the parents will blame? It would be schools definitely. **(Respondent W, Female, Teacher)**

The findings suggest that there are some government acceptances particularly those who are dealing with youth, those working in the health sectors and social welfare. Similarly, a non-government acceptance from an HIV/AIDS organisation also shows full support of SRE in Brunei especially to prevent and reduce teenage pregnancy and decrease rates of sexual related problems. It may not be surprising that health officers are among the respondents who show more positive attitudes towards sex education in Brunei Darussalam because they are handling first-hand cases of teenage pregnancy, STD's and HIV/AIDS.

6.2.2 Knowledge for Self-Protection from Abuse

As the literature continues to alert us with the increasing rates of sexual abuse among children around the world, an important question was inquired by Phasha (2012) regarding sexual abuse of teenagers with intellectual disability in South Africa. Her study focuses on the marginalised population which altogether brings an important reflection on educating public about the existing rise of sexual abuse and gender-based violence cases on children and teenagers. Yip et al. (2011) identified that there are restrictions on the discourses of sexual abuse due to the societal norms and values. By such normative restrictions, it has placed significant victims of sexual abuse in a jeopardised position. Goldman (2005:81) asserted that: 'Child sexual intervention is one of the teaching strategies to prevent child sexual abuse.' He reported that prevention programmes are designed to ensure children have appropriate knowledge,

attitudes and skills about it, including knowing how to react to it by informing a responsible citizen, usually their school teacher. In doing so, Kirkendall (1956:46) argued that, it would be better to concentrate on improving behaviours that can improve the quality of human interrelationships. Allen (2009) explained that the challenge lies in conducting prevention programmes in a highly gendered discourse in which men are potentially becoming sexual perpetrators and women as their victims. Similarly, Senn et al. (2011) noted that majority of rape and attempted rape cases are committed by men and most of these men know their victims (Statistics Canada, 2006). Traditionally in the UK, the focus of sex education has been on girls only as boys may perceive sex education has less significance to them (Department for Education and Employment, 2000). In cases where a peer is usually involved, the perpetrator is usually a male (Cambridge and Mellan, 2000 as cited in Schaafsma et al., 2015) which altogether put women at a particular risk (Senn et al., 2011).

Emerging evidence from this study indicates that there is a strong sense among some key informants that they need to protect Bruneian children from what they see as the negative practices associated with sex and relationship. This has been expressed by a respondent who stated that ignoring sex education would result in young people being at risk to unhealthy practice of sex:

> My children should be educated, what if one day my daughters get married and their husbands love to have sex outside *'Tabii'* [the norm; such as anal sex, masochistic sex], they also need the knowledge if they are abused. **(Respondent L, Female, Teacher)**

In support of the respondent's claim, a Muslim scholar has argued that within some Islamic communities and societies, 'the correct attitude' towards marital relations should be practiced (Abdullahi and Umar, 2013). Moderation in sexual intercourse has been emphasised by many Muslim scholars (Muhammad Zaeeruddin, 2009· Syed Mutawalli al-Darsh, 2003; Maududi, 1972;) that should keep the sexual in marriage minimal enough to assuage sexual urges so that they do not lead to sinful acts or destabilisation of the marriage, or to enable reproduction (Azam, 2013).

Some of the key informants agree that SRE for Bruneian young people in schools is important for self-protection from sexual abuse in the country. A female teacher also commented that young people should be exposed on how to protect themselves against sexual abuse:

> I think the young people should be exposed on how to protect them from sexual abuse maybe it can even happen in schools. **(Respondent W, Female, Teacher)**

According to the respondents above, young people should be taught to recognise and understand the links between sexual activity and other risk-taking sexual behaviours, and in cases of experiencing *sexual abuse* at home or elsewhere, either in a marital relationship or not. The rape cases among young victims resulted in unintended pregnancy among the young people. For instance in Malaysia, there is evident increased number of abandoned baby cases over the years resulting from unwanted pregnancies (Wong, 2012). A school counsellor who dealt with a suspected sexual abuse case had given a detailed account of her experience:

> I have experienced a pre-school child who was molested by her own uncle. A pre-school teacher found this child always flipping her skirts [school uniform] and flashing her pants. The teacher suspected something wasn't right and referred the child to the counselling section. When investigated, the child explained that at home, she was asked by her uncle to pull her pants down and the uncle would do the same. Further investigations made, the pre-school child was among the other two children in her house that were abused by her uncle. We [team of school counsellors] knew the child was abused but she didn't have any idea that she was abused. This case has been filed [police case]. **(Respondent IZ, Female, School Counsellor)**.

This finding above demonstrates a pre-school child who was abused by her uncle. This response alone already makes a considerable value in having sex education in the country to protect the young people from sexual abuse as the respondent believed that sex education might help the victim to explain the situation of being abused. However, while supporting this, the respondent questioned the appropriate age to teach sex education as it may not be practical for younger children and all teachings should be under Islamic principles. In addition, this finding suggests that young girls should be taught that any form of sexual harassment is an act of abuse and must be reported to the police. Boys also should be taught to understand that if they harass or sexually abuse a girl, it will cause them serious problems. This ensures that sexual harassment is reported rather than keeping it quiet, so that sexual predators will not get away with law. This is owing to the fact that there is evidence of the increasing number of sexual predators among youth and the victims are also getting younger, hence there is a need to expose the young people on this issue. The international sexuality education models often use scientific and biological information to change

the sexual behaviours of the population (Philpott et al., 2006). However, this assumption should be avoided because although sexuality education is intended to provide information and knowledge as illustrated in many studies (Oshi and Nakalema, 2005; Wells, 2009) but it is not significantly lowering down sexual activities among the youths and lowering down the unwanted pregnancies, early incidences of teenage marriages and abortions rates to those who receive them. It is comprehensible as knowledge transfer does not automatically bring behavioural change probably because of the outer forces that seem to work against change (Gabler, 2011:12).

Another respondent discussed in order to protect the rights of the young children and women, there is a need to strengthen the law first before bringing the subject forward:

> What I know, what I learnt, follow and understand from the authorities, the young people are exposed to sex as young as primary 4 and 5. It's a good thing nowadays that Hudud [Syaria'] Law is going to be strengthened. Having that is a great opportunity to sculpture this subject. We should first teach them the punishments according to Islam due to such wrong doings before introducing SRE. **(Respondent ZA, Female, Teacher)**.

This suggests that the subject can be structured based on the Islamic law so as to improve and enhance the young people's understandings of promiscuity or pre-marital sex in Hudud Law besides providing the necessary basic knowledge for SRE. This finding also explains if Hudud Law is improved before SRE is introduced in the Sultanate, SRE will also be increasingly accepted among the public. The Bruneians especially parents will not have to be petrified by the thoughts of the young people to be sexually 'experimental' because the tenets of Islam is already underlying the curriculum.

An experienced teacher in a secondary school said that: 'I even educate my children to put barriers between themselves and their father. One would say that this is too much but the reality is some parents can abuse their children sexually.' **(Respondent S, Female, Teacher)**. Similarly, a female school counsellor shared that on an event of a rape case between relatives, 'the parents are more likely to drop the case because of the family ties." **(Respondent IZ, School Counsellor)**. Acknowledging this 'breaching of trust' issue, the finding seems to suggest that the adults in general and those who work related to young people are put in fear because of the responsibility to protect young people. This finding also informs us that it is possible to have trust

issues among families that father, uncles and grandparents who are sometimes regarded as threats for female family members. These evidences altogether evaluate the uneasiness in people's lives among family members. Recently, attempts to make SRE compulsory in UK schools including topics such as relationships and consent are unsuccessfully accepted in a parliamentary vote (Brown, 2015). Teaching young people about consent is crucial to learning about healthy, equal and safe relationships and choices (Brook, PHSE Associations and Sex Education Forum, 2014:9). Focusing on young children, SRE continues to pose tremendous challenge for policy makers (Brown, 2015). Many young people are lack of the basic information, knowledge and access to advice for sexual abuse

All of the respondents above agreed that sex education should cover all aspects of knowledge involving self-protection from sexual abuse and negative influences from abroad. For some of the respondents, if not all, educating young people about issues surrounding sexual abuse will strengthen the need for SRE implementation in the country. Most of the key informants believed that SRE was not an appropriate topic for discussion. However, some of the key informants among the senior policy makers, health officers and NGO called for open attitudes towards sex and many teachers tended to agree that SRE can be taught as an ideal part of marital relationship and self-protection against sexual abuse or harassment. The respondents believed that good SRE will equip children and young people with the information and skills they need to have in a relationship (even between family) and to take responsibility of others' sexual health such as respecting others' dignity and their own.

6.2.3 Responsibility and Gender Equality in Relationships

There are many studies that particularly criticised gender-inequality practices among Muslims and some gender-inequality features of Muslim law. The studies pointed out that the real implementation of gender imbalance in many Muslim states is alleviating and differ from those laws written on the books (The Library of Congress, 2005). Barlas (2004) recognised that gender equality, discriminatory and patriarchal cultures that have the weight of history, tradition, and hegemonic readings of the Qur'an have been overly involved in most Muslim societies. Mashour (2005:3) argues that 'Sharia' law is not static but rather an evolving body that requires to be adapted to the specific socio-historic moment it inhabits.' She further added that interpretations should be guided

by the principles of justice, equity and public welfare to protect the interests of the mass population.

The data has shed light on some gender discrimination and gender inequality particularly in the social exclusion of teenage mothers and fathers. This section will examine the conceptions of gender in the perspectives of Islam and the challenges it may pose to the Muslim family law. Studies about women in the parts of Arab world have become active (Satterfield, 2013; Retta, 2013; Abu Khalil, 1993) and these studies indicate that the promotion of the women's rights in the Arab world has escalated over the years for instance in the field of politic, educational rights and personal status and family law (Ottaway, 2004). Meanwhile, it can be argued that the discrimination of gender do not exist in Brunei because women obtain equal opportunities in education, healthcare, training, holding administrative positions, citizenship (Low and Sulaiman, 2013; Brunei Times, 4th July 2012). However, it has been argued by Hab (2013) that even though Brunei has minimised the gender gap of women's participation in the workforce, yet there is still a shortage of women decision makers.

There are two most important arguments about equality of women's rights in the Quran that was studied by Mir-Hosseini (2013). The first type treats both and women equally, whereas the second type suggests that women are under the protection of men, suggesting men are superior than women and at the same time enjoy more rights than men.

Apart from the findings above, some of the key informants also see the opportunity of introducing SRE in the country as a platform to teach young people to have a sense of responsibility towards themselves, their families and the society as a whole:

> Don't just teach the young people about sex, educate them with responsibilities after marriage as well. I would say to my students 'Just imagine if you are unemployed, how are you going to feed your wife and children?' **(Respondent L, Male, Teacher)**

SRE is also interlinked with managing gender, sexuality and relationship.

> I always [want to] advocate for our school curriculum not to teach just about sex education but also about responsibilities of families. [..] I think they should put more on the responsibilities of a child, the responsibilities of parents, the responsibilities of extended families like grandparents,

> uncles, aunties, towards one another. Interaction you know.. inter-dependencies. **(Respondent DA, Female, Government Officer from Ministry of Youth, Culture and Sports)**

This is owing to the fact that, a respondent believes that if relationships and responsibilities are discussed, it is more likely to reduce the increasing rates of divorce, as commented by another respondent:

> From the statistics that we have, the highest incidence of divorce are among those group aged 25 and 29. So that shows young marriages reflect immaturity, also not ready to assume the responsibility. **(Respondent DA, Female, Government Officer).**

In particular, girls who have grown up in father-absent or unstable households are more likely to become sexually active at young ages (Family Education Trust, 2003:3). The findings above seem to suggest that SRE can be crucial if it is to impact upon the rates of relationship distress and dissolution. This education also seems to increase the initiatives to reduce the risk of divorce among young couples. The knowledge and skills perhaps may be significant for the use of later life that is in a marriage life. SRE as suggested by some of the participants can be a tool that prepares young people for the expected roles and responsibilities of a husband-wife relationship. In conversation with the key informants, some of the respondents pointed out that in sex and relationships, men are placed as the dominant figure in sex, whilst women's role is to provide sex. A teacher argues that Bruneians lack the information about relationship, she noted:

> Bruneians are actually clueless about relationship, sex and what to expect. Especially on part of expectations of men and women. All we get to know is the information that we read from books and then from talks. **(Respondent AA, Female, Teacher)**.

A teacher perceived that SRE can deliver the information about healthy relationship. A sharper image produced by this response is the domestic and public spheres as a functional division of social activity. It is perhaps best illustrated by the following statement: "[H]ealthy relationship is now known of social interaction between men and women and how to have a stable relationship." **(Respondent CGA, Female, Teacher)**. In support of the responses above, another teacher perceives that relationship should include the teaching of men and women expectations in communication:

> It's actually part of psychology. What you need to understand how men and women interact especially and the expectation of the opposite sex.

> It's basically about how to survive in this society. It all comes down to sex and expectation. Well, what do men expect actually? They need sex. What other plan do they have? **(Respondent C, Female, Teacher).**

The response above seems to suggest that the respondent's idea of sex and relationship is understood predominantly on male terms only. The teacher above judged men to devalue females as she believed many women are sexually dominated by men. Yet at the same time, this opinion does not correspond with Islamic teaching, because Islam believes in equality even in sexual matters. In particular, a husband should represent the husband-wife relationship and family affairs. This finding may appear to suggest that men may have a greater say in sex and women are sole 'recipients'. The freedom of men or husbands to have sex may be questioned here. However, we must consider this as their wives' freedom to do similarly. This means that men may have the right to make decisions to have sex but wives are not necessarily involved in the decision-making process by discussing their sexual desires and expectations.

The limitations exist in the respondent's discussion can be largely construed as part of the considerable ambiguity surrounding the use of the term 'sex' and 'relationship' and this perspective can be a starting point for the formation of SRE in the country, and underlies the negative assumptions of sexuality and relationships. On the contrary, the idea that male dominance as discussed by this respondent is rather submissive to cultural and extreme Islamic practice. SRE in schools is required to prepare children for puberty, and teenagers learn about sexual consent and relationships. In reality, some schools in the UK for instance, offer little teachings about relationship and this may be hard to achieve (as discussed in Chapter 2). Teaching about SRE is an essential part, but the most challenging part of SRE is teaching about gender equality as this may vary among each culture and household practices (Phillips, 2010). However, SRE challenges the above findings because it is not a man's right to have sex but as a collective voice between two spouses, it should also be disseminated to young people that women are not sex providers and there should be consent in sexual relationships. As asserted by Phillips (2010), there has been a growing awareness of the complexities surrounding consent of marriage in the courts.

6.3 ACCESSING NGO: BRIDGING THE ROLES OF BRUNEI HIV/AIDS CENTRE

The previous section explored how the respondents presented negative accounts of how general Bruneian perceptions of taboo subjects such as teenage pregnancy are perceived. Furthermore, negative encounters were viewed as being the disorganisation of multi government agencies rather than the result of cultural and religious insensitivities. This section discusses some contextual factors which directly affect the ability of Bruneian NGOs to deliver social services and advocate for enhanced education services about teenage pregnancy and STIs including HIV/AIDS. The sixth millennium development goal aims to reverse the spread of HIV/AIDS by 2015 (Hogan et al, 2005). Furthermore, the cost of antiretroviral drugs (ARVs) for HIV/AIDS was expensive for poor countries at a cost of US$10,000 - $15,000 per person annually (WHO, 2002). Therefore, the goal for HIV/AIDS concentrated on decreasing transmissions (Hogan et al, 2005). As estimated by UNICEF (2002), the number of young people living with HIV/AIDS in the world is around 11, 800. Ulleberg (2009) studied the role and impacts of NGO's in capacity development which later improved to strengthening the education sector. This section also explores some of the respondents' accounts of NGO.

Some of the key informants for the interview were sampled from one of the HIV/AIDS Centre, where services were specifically aimed at supporting people infected with HIV/AIDS and educating young people about the biological facts of sex and the social consequences of teenage pregnancy and living with sexual transmitted diseases. In response to this, I formulated an interview question with a particular aim of extracting the approaches in which the members formed influences of their organisation. Responses to this question produced some interesting data related to the positive roles that the organisation had to offer. Additionally, the supportive roles of the organisation's members were addressed as a 'positive' theme in response to my questions. Extracts from the respondents are used to provide a bridge between the education sector, health and social services sections.

The number of people living with HIV and AIDS in Brunei is very low (Ministry of Health Booklet, 2010) compared to the number of cases globally (for example as illustrated in Africa, Helleve et al., 2009; Visser et al., 2004). As commented by a senior healthy officer: 'The number of HIV/AIDS cases is stable now, it is not as high as other countries around the region but we cannot rule out that it isn't going to happen in the future.' **(Respondent AF, Male, Senior Health Officer)**. Therefore, with the existing argument from the respondent above, it can be claimed that Brunei should not be too complacent with its low rates of HIV/AIDS. This is because the numbers may increase in the future and Brunei should start thinking of possible prevention strategies. On the contrary, not discussing and acting like sexual related problems do not exist allow deviant ideas to flourish among the young people particularly those learned from negative media influences (Makol-Abdul et al., 2009; Low et al., 2007). As argued by some studies (Kaufman, 2010; UNFPA, 2000), being ignorant to sexual related problems perhaps increase the likelihood of its occurrence. Bennett (2007) argued that it is false to claim that pre-marital sex does not occur in Muslim societies and it is important that we do not disregard the ever-present gap between the social realities of Muslims which also present for all faiths. The social reality of Muslims in this context refers to Muslims engaging to unhealthy sexual practices, having child outside wedlock, teen marriage and risky sexual behaviours (illustrated in Malaysian Muslim contexts, literature Jamaludin, 2013; Wong, 2012; Low et al., 2007).

As repetitively explained by the representatives from the Centre, the aim of XX Centre is to eliminate the total number of HIV and AIDS to zero. This is corresponding to Joint United Nations Programme on HIV/AIDS (UNAIDS) Getting to Zero strategy that put emphasis on 'revolutionise prevention' (UNICEF, 2011:3).

> What we are doing now is we are trying to focus not specifically on AIDS/HIV only but we are focusing on the prevention sides, mostly on providing knowledge and skills especially for the young people. **(Respondent AW, Male, Representative from HIV/AIDS Centre)**

His account clearly demarcates the differing perceptions between these different sectors. Health services may be perceived as less problematic due to health sector include support and involvement to this organisation with significant aspects of health service experience. In contrast, access to education may require more considerations, which SRE was often perceived to be complex to cater for important religious and

cultural requirements. In response to this, the respondent often speaks about how, in order to uphold religious and cultural values, they would suggest negotiating SRE in a Muslim country. The respondent has given a detailed account of what content the organisation has covered for the young people:

> We created this ourselves. We taught the youngsters that we are created with 'A.I.N'- *Akal-Iman-Nafsu*. *Akal* is in your brain. This is to think what's best for us (showing brain picture). I is *Iman* (faith), in your heart to control us within and *Nafsu* (temptation) is your genitals. Why is the Nafsu positioned below (genital area). Because genitals should be subjugated. So if your temptations are bigger than your brain, so your genitals will be on the reversed side. Isn't this already being in our religion and all? So again, it's Prophet's traditions (scrolling down the slides). And we even follow the international A-B-C, Abstinence-Be Faithful-Condom. **(Respondent AW, Male, Representative from Brunei Darussalam AIDS Council)**

As strengthened by Lewis and Kanji (2009:20): 'another reason the debates have continued between NGO supporters and critics is that there are surprisingly few data available relating to the performance and effectiveness of NGOs either development or emergency work. The respondent below provides a detailed explanation about the leadership program that is offered in the organisation. She explained:

> Ok as I mentioned HAPPY. It's all about the basics of HIV and not how to get it and if you get it, what would it be like and all those things. That's one of it. We also do LESTARI which is life skills training. Life skills tackle a lot of things. As you know, life skills are many. It covers presentation and all those things and off course during LESTARI itself, we also include HAPPY in one of the sessions. So that way, they know and off course during that as well, they will learn about friendships, how to appreciate their parents, and all those things you know. That way they learn to be grounded. **(Respondent DN, Female, Representative from HIV/AIDS Centre)**

The interview above highlights a fundamentally different picture of how support resources are provided for Bruneian youths. Using the above quote, it can be argued that NGOs have moved beyond 'gap-filling' initiatives into capacity building activities (UNESCO, 2009:8). Apart from that, counselling sessions are also provided for those who are living with HIVÁIDS, as explained by the respondent:

> I am aware that the Government is providing free health check. What we are concerned in AIDS Council for instance that particular person is HIV Positive. We do know that there are some counselling services that have been offered but how are these HIV Positive people y'know how these people are being stigmatised. What are our roles to take care of their

> welfare for a longer run, for example. We know that once a person has contracted HIV disease, some might be very depressed, trying to commit suicide. But our mission or aim is to 'how' we are going to bring them to a positive lifestyle. **(Respondent BJ, Male, Representative from HIV/AIDS Centre)**

This is echoing the need to improve education by 'empowerment', particularly among youth. Empowerment through education is strongly emphasised by a male respondent who organizes a non-government organisation who viewed that empowering Bruneian youth should instil Islamic family values:

> You need to educate and empower yourself. If you read XX's page today, in other countries they just realised that education is one of the key to HIV Prevention. We've done that in Brunei already [compulsory education]. His Majesty also realised that family and faith bind us all together. Family values are important, so whatever choice you made, you still remember, the value is still there. **(Respondent AW, Male, Representative from HIV/AIDS Centre, Male).**

Some respondents argued that trained NGO could be more effective and informative than teachers for teaching sex education.

> I remember I once attended a forum that promotes about the awareness of sexual health as a volunteer. The forum was organised by XX organisation. I think more similar forums should be promoted more in Brunei as it could benefit the youth in the long term. However, considering Brunei's conservative nature, it could be hard to introduce such changes. **(Respondent Q, Female, 21 years old)**.

Similarly, another respondent moves on to discuss the more familiar roles of HIV/AIDS Centre in relation to altering the forms of education practice, arguing that a non-NGOs approaches are more effective than a school-based sex education:

> HIV/AIDS Centre is very successful. I like them. I went to their talks sometimes, they are very blunt. They are bold because they are not tied with Ministry of Education. They showed all the sexual parts, the young people were surprised. And they show the infected parts of STD. They thought it was gross, they were shocked! They got scared, let them. **(Respondent L, Female, Government Officer)**.

The findings in this research have revealed that BDAC has a number of training activities and programs aimed at preparing the young people to be educated and empowered. She said:

> We also have the NGOs like HIV/AIDS Centre, such a fantastic group. I think they are a success, because they are run by young people. Young people talking to young people are the answer. It's much more effective,

> if *you* tell them. So that's why XX centre is very successful. I like them. I went to their talks sometimes, they are very blunt. **(Respondent DA, Female, Government officer)**

These findings have exposed that sex education is being implemented through informal education, in a non-government organisation. The strategies that are used by HIV/AIDS Centre seem to suggest that sex education can be interesting and the knowledge can be related to Islamic values. Unfortunately, the opportunities to participate in those activities do not occur for some youngsters. Based on a finding by Sex Education Forum (2011), 1 out of 4 young people said that they had not learned about HIV and AIDS in schools.

To compare the above quotations with the current perceived sex education is throughout the secondary school textbooks and workbooks for 'Integrated Science' and 'Biology' there are chapters that exclusively discuss 'body parts' and 'bodily functions' in Year 7, 8 10 and 11. However, opportunities for discussing the gender characteristics and differences of human body parts seemed to be limited to the information on the anatomy or physiology of the human body and human reproductive system, the characteristics of puberty and stages of pregnancy (Gerouki, 2008:334). There is also a section on contraception for Year 9 but there is no mention of promoting abstinence. Abstinence is especially important for Muslims as it is stated in the Quran. However, it can be argued that it is necessary to have programs addressing sexual health and sex education, reforms addressing sexuality met with various obstacles including social taboo and religion despite changing socio-economic factors, demographic and epidemiological patterns including increased premarital sex among young people and the spread of sexually transmitted diseases (STDs) and HIV/AIDS (Lkkaracan , 2005). We could argue here, that there is ignorance on the part of many participants' views about teachers' creative approaches which an individual could obtain from school. This altogether makes the policymakers to overlook the individuals' rights to be informed about sexuality education. In this study, the findings have revealed that there were growing concerns about whether there were enough resources and skills to teach SRE and about too much focus on Brunei's national philosophy particularly the 'religion' and 'cultural' aspects.

6.4 CHAPTER SUMMARY

The above discussions generally recognised sex education as a primary source of information about sexual relations and reproduction as the integral part that plays an important role in the early life of an adolescent for them to assert in the later life, which in this context, most of the respondents refer to marriage.

To the majority of the respondents, especially the elders and parents among the respondents, the suitability of sex education in Brunei is determined by its ability to guarantee reproductive health education in schools that promotes the teachings of Islam and the Malay traditions. This can be speculated that the government may be reluctant to introduce SRE due to the discussions above. The reluctance of the government to inaugurate contemporary SRE is due to Brunei's low number pregnancy among the young people and there is no significance of introducing the social aspects of sex education.

This study reflects some of the selected practice in the field which suggests the current practice in SRE relates to less 'sensitivities' to cultural differences and religion. The studies imply that failure to recognize religious and culture dimensions creates conflicts between parents and schools, values, religious teachings and peer knowledge and values. If considerations of cultural differences and religions are taken into considerations in teaching sex education, it is possible that sex is no longer seen as taboo because the explicit contents of sex and sexuality will be focused in the pervasive influence of culture, beliefs, and religion in defining one self.

Consequently, in light of the above responses, it is complicated to gauge how much impetus there is in Brunei for harmonisation, even at the time this subject is explored. Harmonisation in this context brings together approaches, views, expertise and experiences for building a sex education curriculum for the young people in Brunei. In other words, harmonisation within the key informants can be achieved by establishing conformity regarding the mechanisms and practices of sex education to ensure cultural and religious preservation. The responses do, however, indicate that there is clear support among some of the key informants for harmonisation among the

government agencies and that a lack of such harmonisation may be harming the goals to achieve SRE policy in the country. Alternative arrangements for SRE are currently at a satisfactory level, for instance with the help of organisations, government or non-governmental if education system was unable to provide religiously and culturally appropriate spaces.

By teasing these different views, the key informants displayed the complexity of the subject by underlying the ‘cultural’ and ‘religious’ sensitivity (as discussed in Chapter 4.1) and the view that sex should be discussed in biological teaching only.

CHAPTER 7

KEY INFORMANTS' PERCEPTIONS ON THE IDEOLOGICAL AND RELIGIOUS RESISTANCE TO SEX AND RELATIONSHIP EDUCATION

7.0 CHAPTER OVERVIEW

This chapter presents specific details of the final data chapter for the key informants, data analysis and the findings. While research on sexuality is growing, combined and explicit focuses on religion, culture and sexuality have been studied (for illustration Htun and Weldon, 2012; Halstead and Reiss, 2003). The aim of this chapter is to identify a number of factors that may influence resistance to support SRE in Brunei. In questioning the key informants' negative attitudes and perceptions towards SRE, this chapter will further explore how the key informants interpreted their understandings of SRE. This chapter can be a vehicle which reports the complexities surrounding Muslim current climate towards SRE. The summarised structure of this chapter is described below.

In what follows, the second part of this study (Section 7.2) discusses the perceived idea of SRE as a sensitive issue which will highlight the complex problems studied in this research. The third part of this study (Section 7.3) presents the perceived ideas of current development of SRE in Brunei. The fourth section (Section 7.4) explores the complexities of SRE that has been debated by the key informants which will be divided into 3 sub-sections. In the following sub-sections, the complexities of SRE will be discussed and these qualitative discoveries are later used to explicate how SRE can be stimulated. Additionally, the findings from this chapter can be used to suggest the desired climatic influences for an adaptive curriculum which can be developed in Brunei (further discussed in Chapter 9). The fifth section (Section 7.5) presents the discussion on the use of Quranic verse and the Prophetic traditions as point of reference to support the key informants' views. The final section (Section 7.6) will summarise the key findings in this chapter.

7.1 INTRODUCTION

The aim of this chapter is to investigate various professionals' negative attitudes towards SRE. The participants mentioned in this research were those professionals involved in the area of NGO, healthcare, education, religious bodies and community service. As argued by Attridge (2011:57), the issue of sexual health education is contentious because it varies from individuals, parents, young people, authorities' agencies, UNESCO and religious bodies. Tabatabaie (2015) further suggested that it is crucial to take into account the Muslims' social construct of sexualities following the profound influence of Islamic traditions. In relation to the studied context of this research, the sexual needs of Muslim students in school curriculum is believed to be extensively ignored because to accommodate sex education, the curriculum has to address the contents that contravene with Islamic teachings (Sanjakdar, 2009). Consequently, this chapter intends to demarcate the professionals' attitudes towards SRE within the social construct of Bruneian Muslims. In what follows, I will present the responses from the key informants that addressed the preceding discussions.

7.2 PERCEIVED IDEA THAT SEX AND RELATIONSHIP EDUCATION IS A SENSITIVE TOPIC

This section presents the attitudes and perceptions of professionals towards Sex and Relationship Education. As a starting point, I asked the respondents about their understandings of SRE. As the main response, the key informants often described the curriculum as 'sensitive', 'taboo' or 'controversial'. Some respondents commented that they were uncertain about this subject, which may explicate for partial answers. Others cited sensitivities as a reason for hesitant responses, because: 'SRE involves hotly debated issues.' **(Respondent L, Male, Teacher)**. Another teacher asserted: '[T]his topic is very sensitive, and if there's one parent who disagrees, it will become a big issue which can lead to public objection, revolt, complaint and legal action.' **(Respondent AZ, Male, Teacher)**. The following are some instances of responses when the respondents were asked about SRE. They explained their understanding of SRE:

> I think SRE is taught in biology. Sex is… sex, it's what people are doing **(Respondent IZ, Female, School Counsellor)**

> Sex Education is like science subject, related to human body and learning about its functions, male and female relationship like that **(Respondent S, Male, Teacher)**
>
> Is it a different subject or is it assimilated into another subject? I have never heard of it, just recently, but this is good though **(Respondent CGA, Female, Teacher)**
>
> I've heard of it, but I've never really come across it like into details. I see on TVs like ads from other countries but not locally **(Respondent Z A, Female, Teacher)**

Campbell et al. (2007) identified different range of roles that characterised the views of different profession groups which may include assumptions that those different roles carry and experience. These tentative responses reveal that the respondents provide opinions or comments based on the 'voice' that they choose as they represent a wide range of voices with diverse interests. The respondents either give opinions as an individual or speaking from their professions' point of view or both. The comments made by the respondents showed that the respondents either had inadequate idea or no idea about what is integrated into SRE. For instance, the respondents only view sex as part of sex education but do not learn the wide range of topics such as sexual issues or relationships and the values assimilated into the subject. Sex education in the United Kingdom encompasses a wider programme of health education which is taught within personal and social development (NCB, 2010). However, there are studies that show many Eastern countries have followed this type of sex education such as Thailand and Vietnam (Smith et al., 2003).

In this thesis, sex education is defined as the teaching of sex, sexuality and sexual health but also an understanding of personal, social, emotional and moral development (Family Planning Association, 2011; DfEE, 2000). However, these findings suggest that most of the key informants viewed sex education as used to inform young people about sex and sexual issues, but not as matters related to religious, cultural values and morality. This is owing to the fact that, to some respondents, cultural values and religions are perceived to be detached from Western sex education. For instance, a teacher explained that Malay Islamic identity is a way of life and it affects how sex is discussed: 'We are unlike the Western culture, whose parents are open and teach them about 'it' [sex]. Malays are educated about it only through formal education.' **(Respondent Z, Male, Teacher)**. Subsequently, another teacher expressed that vocalizing the word 'sex' is not acceptable in an Eastern culture

because according to her: '[W]hen it comes to sex, it is close behind the curtains even to discuss it in schools.' **(Respondent WP, Female, Teacher)**.

On a conflicting view, some European countries have made sex education compulsory (Sex Education Forum, 2010; Parker et al., 2009). Even though most European countries have compulsory sexuality education, European Parliament (2013) reminded that the content and quality of sexual health knowledge delivery will vary. Some Western culture does not condone sex education either for instance in a conservative Christian country like Ireland (Rolston, 2005). Additionally, the number of teenage pregnancy statistics in some Western countries for instance in Sweden, Norway and the Netherlands which has accounted for low cases of teenage pregnancy (Weaver et al., 2005). For instance, compared to the UK, teenage pregnancy rates in the Neatherlands are extremely low (Lewis and Knijn, 2002). The study carried out in England proved that some areas around the country which provide good quality of SRE and access to sexual health services for young people have accomplished the highest declines in teenage pregnancies rates (DfES, 2006). Lewis and Knijn (2003) studied that different approach reflected by both sex education in the Netherlands and the UK proved that the Dutch are considerably more effective in addressing the problem of unawareness and promoting comprehensible sexual health information.

Among the themes that feature strongly in this thesis is the role of religion and its influence in the society. In this study, some of the respondents also highlighted that the attentions devoted to religious matters and cultural values are often left out of Western sex education. The following response from a male representative in an organisation illustrates this:

> I've been to quite a number of conferences and workshops [outside Brunei, for e.g UN conference] where they introduced this idea of sex education called Sex Education 2.0. I realised that in Sex Ed. 2.0, it is lacking of values. That's very much missing. For example, they may teach not to get pregnant, they teach you how to be faithful and teach you how to use condom but where is the value [cultural/religious value] there? **(Respondent AW, Male, Representative from an HIV/AIDS Centre)**

The respondent has critiqued that Western sex education is lacking of values. This finding seems to suggest that the respondent above believed that Western sex education may lack in the choice of abstinence which perceived to be one of the important values for Muslims to consider in Sex Education. Here, the respondent was

suggesting that abstinence creates a value according to religious identity. Such emphasis on sex-abstinence is part and parcel of some Muslim societies recognition of purity, in which majority of the respondents agree to affirm it. Moreover, Yip et al. (2011:6) argue that: 'Western culture is often perceived as being increasingly secular and sexualised and religions are often perceived as sex-negative (or at least sex-constraining), with heterosexual marriage being the only appropriate context for sex'. Within the religious and moral contexts, some of the respondents below put emphasis on sex within matrimony and should be educated alongside pregnancy prevention. As illustrated by a non-Muslim teacher, he incorporated religious value in his contraceptive lesson:

> I remember teaching a reproduction topic to my [female] students, 'To prevent from getting pregnant or HIV/AIDS is by using condom. But according to your Islamic law, it is forbidden to have sex before marriage. This is just an awareness and to educate you. So keep in mind that it is not to encourage you [to have sex]'. So I practice Malay Islamic Monarchy standard in the country and include it in my teaching. **(Respondent ND, Male, Teacher)**.

By contrast, there is little correlation made by the respondents between spiritual status of Muslims and their sexual experiences. While being virgin may be a common attribute for the ideology of religious identity, it also indicates arrangements of sex education that are arguably suitable for Muslims. In their influential work, Halstead and Reiss (2003), details the ways in which UK system can introduce the moral value of SRE. In another teacher's response, she viewed that the reason to introduce SRE is not to excite the young people to avoid pregnancy but to ensure them to understand the Islamic value of abstinence altogether:

> The students will get excited with this education [SRE]. SRE is not going to teach about contraception only. We want to channel their thinking to a more Islamic way [while learning about contraception]. It's actually teaching them to protect themselves and to remain abstinence before marriage at the same time. **(Respondent X, Male, Teacher)**.

Drawing upon the response above, there are two points that are highlighted with respect to the desired position on the phenomenal form of SRE within self-integrity value, such as being virgin. First, the necessity of austerity in abstinence understands the spiritual side of sex and sexuality. Although the respondent does not openly refute the condom use as a contraceptive form, he put emphasis on the importance of sexual abstinence before marriage. This finding also indicates that if a non-distinctive sex

education programme which is a 'faith-based sex education' is introduced in Brunei, it is feared that the knowledge will be used as a mean for young people to be experimental and encourage any form of sexual behaviours and orientation before marriage. A respondent evidently exemplified this:

> '[I]f someone learns or discovers the sweetness of marriage while he or she is still far away from the wedding call, what will exist is curiosity and eventually would like to try.' **(Respondent K, Male, Government Officer from Ministry of Religious Affairs)**.

This response critic is concerned that sex education may promote early sexual activity (Al-Dien, 2010) and the ideal type of sex education in the Eastern paradigm is taught within the reproductive health framework and marriage institution. Similarly, several respondents also stated that sex should be delayed until marriage and only happened in a marital relationship:

> Sex is an act but it can involve relationship of course and actually the ideal situation which we like is that sex is involved in a permanent relationship, where they have sex after marriage that is, you know. But of course that term may not be relevant to a lot of young people today who see sex as part of relationship, pre-marital relationship. **(Respondent DA, Female, Government Officer from Ministry of Culture, Youth and Sports)**.

Another respondent also mentions that SRE should enable the young people to have delay the onset of sexual initiation:

> Teaching SRE is to enable the younger generation to be more mature, to increase confidence and self esteem and enable them to understand that the secret of why they need to delay sex until they fall due [marriage]. **(Respondent K, Female, Government Officer from Ministry of Religious Affairs).**

The discussions reveal that there is no difference between some key informants regarding sex outside marital relationship as they agree sex should be in marriage. The key informants believe that it is the mandate of Allah, sinful and should be forbidden in Islam. Muslim respondents in the study agreed that sex before marriage is condemned and punishable by Civil Law and Sharia Law called Hudud which is mentioned in the Islamic holy Book, the Quran **(Corresponding to Chapter 2)**. On the other hand, the essence of SRE is perceived by most key informants as teaching sexuality from the Western paradigm, a non-faith based sex education. Consequently, this obviously has aggravated distinctions between a Western and Eastern paradigm

of sex education. However, there was tension detected as one of the key informants recognised the value of a non-faith based SRE program:

> You don't call it Sex Education because when you say sex education, in the mindset of the Bruneian public, they would think of teaching them how to do it [have sex]. Actually, it is not. But in the Western world, that word is often used but the people in the Western world do not have that conception. Only in Brunei, the people think that sex education teaches people about sex, how to do it. **(Respondent DRR, Female, Gynaecologist)**

The respondent above seems to draw a distinction between the Western paradigm and the Eastern paradigm of Sex Education. These findings suggest that the respondent limited their discussions of sex education to the teaching of anatomy, reproductive organs and functions including planning pregnancy through the context of marriage and family life only. However, sex education guided by this perception does not discuss sex education further. This is because the inevitable consequences of globalisation that are quickly changing the values of the young people in the Eastern world today are not carefully considered. Topics such as contraceptive methods which are perceived to be 'Western' paradigm of sex education may be introduced to Bruneian young people but may not be opened for detail discussion or simply left out of the discussion because it is perceived to be contrary to Bruneian culture and Islamic teachings. This corresponds with a religious head's response that critically discards 'safe sex' practices among young people in Western sex education:

> If the objective of SRE is to organize safe sex practices for the public, especially among teens and an attempt to curb social ills such as teen pregnancy, pre-marital sex, HIV / AIDS and the like, according to Islam any sex outside of marriage or things that lead to it are illegal. Such cases are indeed will receive great opposition from Islamic countries because there are more negative impacts rather than positive ones. **(Respondent S, Religious Head)**.

In the quotation above, the respondent condemns the use of contraception such as promoting condom use instead of abstinence. The quote also suggests that sex education in Brunei can only be taught in the context of religion for fear it deviates from the beliefs and principles of Islam. For many respondents, the term sex means 'to reproduce' in marriage and this idea has become so common particularly in Eastern societies (as discussed by some of the young people in Chapter 7). This finding tends to suggest that most of the Eastern world is strictly tied to marriage and purity. On the

other hand, in the East, sexual culture is not any different to the West but most of the people in the East may keep their sexual exploration discreet due to cultural and religious beliefs.

Undoubtedly, globalisation causes a rapid change of Bruneian Islamic and cultural values and Bruneian young people are at risk of contracting sexual health diseases due to lack of SRE exposure and knowledge. The lack of HIVÁIDS knowledge has been recognised by Hasnain (2005) and he reminded that this problem is a growing concern in the Muslim worlds. One of the common solutions that the Government created was by strengthening the emphasis on Malay Islamic Monarchy philosophy whenever there are internal or external insecurities.

In this study, a religious conservative among the respondents also give critical views towards implementation of SRE in the country perceiving SRE as not aligned with the country's philosophy and aspiration altogether:

> SRE is from Western education and it is different from our ideology's objectives. Unless the component and policy for teaching and learning of SRE is *'Islamised'* and using completely different title, I think it may be aligned with the philosophy of the country and most importantly does not conflict with the desire of Brunei to achieve as a 'Dzikir Nation' [pious nation]. **(Respondent K, Government Officer from Ministry of Religious Affairs)**.

The response made by the respondent focused on Islamic sex education that can be integrated with the country's philosophy – Malay Islamic Monarchy. This finding implies that emphasis is stressed more on realising Brunei towards a 'Dzikir nation' or 'Pious nation' rather than putting more efforts into developing a futuristic plan for solving social problems. The influence of Westernisation due to globalisation is widely held responsible, but there is still no restriction on movies filtration, use of internet and gadgets. As a teacher commented:

> At Primary 4 and 5 they [children] already know stuff about this (sex). Actually, I blamed the internet. I blamed access to the media. There's no control. Last time I checked, teenage pregnancy cases were already high. It's very worrying. With the media as the driving force, you see. They want to try this and that. **(Respondent AZ, Teacher)**

The impact of the internet generally media have been frequently pointed by the key informants in influencing students' understandings of sex. For the ensuring decade, it is expected that with the influence of religious heads and Ministry of Religious Affairs

in the Brunei Government, Brunei would focus more on Islamisation while aggravating over the 'threats' that globalisation pose towards the Malay's traditional customs and values. In relation to the argument made earlier, it is inevitable that Bruneian culture is gradually changing due to globalisation but sex education (which covers the biological aspect only) is not changing in order to accommodate the needs of the modern Brunei Muslims societies. As a consequence of globalisation, Brunei is becoming more westernised but Brunei is still hanging on to the Eastern paradigm of sex education. The country's ideology always returns to Islam whenever there is a social 'threat'; however the problem with this is not everybody returns to religion or strictly adheres to religion. As a respondent shared her view on this: '[T]here are so many people who have religion but do not adhere to it. They do not bother to study the religion in depth.' **(Respondent CGA, Female, Teacher)**. Therefore, attentions to behaviour modifications based on religion have been perceived as a religious solution to pre-marital sex and teen pregnancy among youth in Brunei but are not necessarily congruent with Brunei people.

7.3 THE PERCEIVED IDEAS THAT BRUNEI ALREADY HAS SEX AND RELATIONSHIP EDUCATION

As the next step in this study, the key informants were asked about their perceptions of SRE in Brunei. Some of the respondents believe that school-based sex education program in religious schools is the main avenue by which Bruneian adolescents receive knowledge about sexuality based on Islamic perspectives. The perceived sex education in Bruneian religious schools may have some form of sex education, ranging from reproductive health, sexual crime based on the Quranic scripture, laws of marriage and divorce. However, the contents can be pragmatic focusing on 'marriage' only where all Muslim young people are given the sexual health information to retain until they are married. As explained by Mcclain (2006:66), conservative sexual economy is pre-occupied with heterosexual marriage as a suitable institution for expressing sexuality and channelling sexual drives into social forms, such as reproduction and parenting. For this reason, a short check on Munakahat textbooks in Brunei may prove useful at this juncture. It has been found that the Munakahat

curriculum does not consider the societal transition of ages[33] which Gerouki (2008:330) would note as 'societal in transition' as a demand that pushed schools to accommodate and facilitate change.

As explained by a Religious Head: 'To me, sex education is already learned and implemented in religious schools. [Even] Now, it has been learned well.' **(Respondent JP, Female, Religious Head)**. Another female religious head who is working in a religious institution, similarly agreed that Bruneian students have been studying sex and relationship in *Munakahat*[34]. She described that Munakahat covers a broader sex education which comprises the teaching of Sharia[35] law regarding sexual crime which is punishable. She commented:

> Sex Education in Islam includes Munakahat, teaching of puberty, vaginal and penis hygiene, criminal violation of Sharia law such as infidelity and pre-marital sex relationships. [..] Those are prohibited in Islam. Islamic education of sex has been learned and implemented [in schools]. **(Respondent USSA, Religious Head).**

The previous discussion has examined the important features of what underlies the lived ideology in Brunei **(as discussed in Chapter 4)**. Hence, in relation to this study, the imagined and idealised Bruneian Malay-Muslim person by whom is depicted as someone who complies with Sharia Law based on Quranic teachings and the Prophet's (Peace and Blessings Upon Him) traditions, maintains honours and dignity while protecting individuals' and family's reputation despite their lived religion and Malay cultural influence. At present, more than 30% of the Brunei population aged 13-18 years is Muslim. Under the enforcement of Mandatory Religious Education Order 2012 which became effective in January 2013, it has resulted in a surge of religious school enrolment to meet the needs of the Muslims students. Although Brunei religious education tends to channel Muslims' views on sexuality in the expression of spirituality

[33] The curriculum may have been introduced to young people before the Independence in 1984 as many people were married when they were still underage. After the independence in 1984, women are married at the average age of 20's. Societal changes have witnessed transitions, however Bruneian religious schools seem not to recognize these changes such as how Bruneian young people are getting more westernized these days and the effects of globalisation such as social media are not taken into consideration when delivering Munakahat curriculum.

[34] Munakahat is the teaching of marriage and family laws which is taught in Religious School classes for children aged between 14 to 16 years old.

[35] Sharia' Law deals with many topics including crime that include penalties such as amputation for theft and stoning for adultery.

(Smerecnik et al., 2010), this does not mean that contemporary sex education and prevention programs targeting Bruneian Muslims young people do not require special attention.

In light of the responses above, we should perhaps wonder, whether Bruneian youth have received sex education as most of the participants framed it in 'institutionalised religious curriculum'. Moreover, another female religious teacher who has more than fifteen years teaching experience, also recognised that Munakahat is sourcing the relevant information about sex but also admitted that it is sometimes a complex subject to explain particularly the private parts: 'I have taught Munakahat for Primary 6 students [Religious School] and adult classes. It is sometimes very difficult to explain sex, particularly something that is too private.' **(Respondent QY, Female, Religious Teacher)**. This indicated that Brunei youth had exposed to sufficient knowledge of sex education within religious framework, yet the respondent also articulated that 'personal parts' of sex is among the several areas where young people needed further information and understanding. (proof). She continued discussing the range of topics in Islamic *Munakahat*. She explained the teaching of erectile dysfunction and impotence is included in Munakahat:

> What happen if a girl is married to a guy who is impotent? In the jurisprudence, how the ruling [law applied to this kind of situation] would be if her husband is found impotence and having erectile dysfunction. This is all explained in Munakahat. **(Respondent QY, Female, Religious Teacher).**

Therefore, based on the discussions, the respondents perceived that religious education involves the subject of *Munakahat* which include the topics range from cleanliness, marriage, sexual health such as impotence and dysfunction erectile, puberty, criminal law of sex and meeting the needs of husband and wife as a form of worship to the Creator. This finding reveals that there are many practical side of the glorious Quran including sexuality (Islam and Rahman, 2008).

At present sex education which is taught in secondary schools and religious classes are considered to be not satisfactory by a senior policy-maker. She argued:

> In Religious Education, they teach about 'sex' in marriage context. They teach a bit on *Ghusul*[36] and all that you know. But it's not enough if they teach those only. SRE is different. It offers more than those learned in religious education. **(Respondent DA, Female, Government Officer in Ministry of Culture, Youth and Sports)**

The senior policy maker believed that there is more to offer in sex education than the ones offered in religious classes. As observed, the perceived sex education in religious classes does not cover the morality and the sociological aspects of sex education such as dealing with teen parenthood and social consequences of it such as school exclusion. Hence the current sex education embedded in the National Curriculum in Science does not map broader discussions of sexuality issues. Findings from the respondent above support the claim that such representation is limited and placing sex education at the margins of marriage institutions, biology and religious knowledge-only interventions in Brunei at the moment.

> It is a sin that Brunei is not doing Sex Education, because the outcome of pre-marital sex is actually sin. By not giving them sex education, we actually letting it happen. Even for the non-Muslims, it is against morality. **(Respondent DRR, Female, Gynaecologist)**

In Brunei, for one to have a family and have children is through marriage. The emphasis on human reproduction for Bruneian Muslims needs such context. Findings show that programs in schools on the prevention of early marriages, teen pregnancy, HIV/AIDS and STDs need such religious background information linked with human reproduction. It is also can be argued that the current Bruneian reproduction teaching is causing a serious contradiction that schools could provide young children with the information on how they could get pregnant but not giving information about contraception (Clark, 2001). Even though, these respondents did not directly express the need for educational reform, but the respondents suggested, in the salient way that curriculum reform has to happen. For instance, In Thailand educational reform stemmed from the widespread perception that the existing curriculum did not adequately meet students' needs, especially in relation to the areas of HIV/AIDS and inappropriate sexual behaviour (Smith et al., 2003). Subsequently, in Brunei there should be an educational reform particularly in the religious schools in accordance with the Education policies to actualize Brunei's Vision 2035. This is also to meet the

[36] Ghusul (Arabic word) is an obligatory ritual of cleaning full body for any Muslim after having sexual intercourse, orgasmic discharge, completion of menstruation and giving birth.

demands of a changing society and to respond to contemporary trends (Gerouki, 2008) of the global media impact which has been considered as a source of information for off limit topics (Gabler, 2011).

A mandatory pre-marital course has been developed by the Ministry of Religious Affairs (hereafter MoRA) for the use of Muslim spouses that intend to get married. The course is knowledge-skills based, which at this level, sex-related material usually cover sexual reproduction and Munakahat contents. Respondent DA questioned if the pre-marital course offered is effective as she viewed it as a mandatory course based on cognitive outcomes rather than developing social skills. She stated that:

> 'We already have a pre-marital course. But I still question if the contents of the course because I know a lot of people go through the course because they just want to get the marriage certificate. This shows that some of them may not be committed. But never mind at least there is a course.' **(Respondent DA, Female, Government Officer in Ministry of Culture, Youth and Sports)**

She continues to explain that parenting courses are important to include as it further indicates the importance of family values. A detailed description involves stages of every 5 years of parental skills development and enrichment:

> First before spouses get married, they have a pre-marital course. After 5 years of marriage, I suggested them to have another course because [at that time] they already have babies. They need to know how to deal with their children (age less than 5 years old). After 10 years, they should take another course because the baby is now growing up. Okay, if they can't do that, it is fine but the most important is a course for parents when their children aged between 15-19 years old. Teen age is different; it's not the same as looking after babies and younger children. Now parents have to change their styles of parenting perhaps add more skills. And then, when their children reach 20 or 21, parents have to change their parenting style again such as to respect their views and all that. Parenting is no easy task, I am also a parent. I myself went through all those, **(Respondent DA, Female, Government Officer)**

It is suggested that there should be a follow-up programme to be integrated into a range of subjects including family planning education, financial, parenting skills and counselling education.

7.4 EXPLORING BRUNEIAN KEY INFORMANTS' NEGATIVE ATTITUDES AND PERCEPTIONS OF SEX AND RELATIONSHIP EDUCATION

As discussed in Chapter 2, existing research on religious beliefs and sexuality has tended to focus on Muslims minority, exposing a significant gap in literature pertaining to the religious beliefs in a Muslim majority country. In the study of the role of religion within sexuality education or SRE, Halstead and Reiss (2003) argued that sex education should make space in a multi-cultural society. Sensitivity towards culture and religious belief, often attributed to spiritual meaning of sexuality. Their research among others (Sanjakdar 2008; Bennett, 2007; Mabud 1998; Noibi 1998; Athar 1996), articulates the importance of faith for many Muslim individuals undertaking the care of personal morality based on Quranic teachings and Prophet's traditions.

The following section will be focusing on the discussions of negative attitudes and perceptions of SRE. The first section explores the professionals' presented accounts suggesting that SRE is only understood within liberal context and a significant aspect of Islam is perceived to be non-existent or not considered by liberal sex education.

7.4.1 Perceived Liberal Contents in Sex and Relationship Education as the Main Highlight

While in the previous section discussed that religion and cultural influences should be considered throughout the process of setting up SRE, in this section one of the major challenges about SRE is highlighted by some of the respondents. The effectiveness of SRE is likely to attenuate for Bruneian Muslims due to many 'liberal' ideas in the subject as perceived by the respondents. Jones (2010) offered the discourses of sexuality education framework whether it is conservative, liberal, critical or post-modern. According to him, liberal sex education prepares students for 'life skills rather than work' and equipped them with sexuality skills and knowledge for personal choice (Jones, 2010:144; Kemmis et al., 1983). Hence, this discourse rejects framings of sexuality within personal morality and also avoids 'moralitistic programs' that advocate abstinence only (CQ Researcher, 2009:26).

Al-Dien's (2010:399) arguments are echoed within the findings in this research, where the contents of the courses were problematic for Muslims minority in Canadian schools and they also argued that schools were not sensitive to the religious and cultural

differences of students attending those courses. Perhaps, this similarity is reflected in my own study. Issues of 'lack of etiquettes or civics', 'different moral values of that offered in Islamic belief' and 'contents contravening with Islamic principles' were the greatest concerns and illustrated in the following discussions. As described by Al-Dien (2010), the moral framework in sex is closely associated with Islamic etiquette, attitudes and behaviours. A Religious Officer, who was particularly concerned about personal religious morality, commented:

> Organizing special programs related to sex and relationship education in Brunei is very inappropriate especially as a compulsory subject in schools. Islam and Malay culture put emphasize on ethical values. Whenever we say sex and relationship education is not appropriate, it does not mean that we deny or ignore it completely. Even ethical education such as "Sex Ethics" and "Relationship Ethics" is still absorbed in *tarbiyyah*[37] of the children and pupils in Brunei, formally or not. (**Respondent K, Male, Government Officer from Ministry of Religious Affairs).**

The respondent above put greater emphasis on the issue of lack of Islamic etiquette or civic. Furthermore, he also explained the importance of ethical values which he perceived have been embedded in the existing religious education. Furthermore, the kind of sex education that the respondent above suggested was as part of moral or civic education. The urgency to integrate Islamic values were similarly felt by majority of the respondents as they pointed out that Brunei is a Muslim country and strongly adhering to Malay Islamic Monarchy. Hence, they believed that it is obligatory that Islamic law underlies the basis of every consideration in shaping sex education policy and practice. As expressed by a teacher: 'We're Muslims, in a Malay Islamic Monarchy country. We must integrate our religion in sex education.' **(Respondent S, Male, Teacher)**. As supported by Smith et al. (2003), there is concern particularly within strong culture and conservative religious and moral commitments about maintaining cultural traditions and values while addressing the issue at the school level. Similarly, a respondent commented that Islamic values based on Quran teaching should be disseminated in SRE:

[37] Tarbiyyah means upbringing of children by educating them what is necessary for one's development, which in this context refers to moral education and upbringing.

> I'm a Muslim, so of course Islamic values have to be integrated and whatever the Al-Quran says about reproductive health should be applied to it [education]. **(Respondent DRR, Female, Gynaecologist)**

For this male teacher, negotiating sex education curriculum with young people would only create unnecessary encouragement for them to be sexually experimental which contravene with Islamic teachings. As he pointed out, the more the teacher shows the students how to practice 'safe sex', the greater the likelihood for young people to receive this subject in a wrong way:

> Wearing condom and teaching them 'how to' as to promote safe sex will only encourage *'pessimistic'* students to have sex because they learn that pregnancy and STIs diseases can be avoided through contraception. We want our young people to not take it in a wrong way, making the knowledge as a stepping stone and use it for their own advantages.' **(Respondent AZ, Male, Teacher)**

Similarly, a male representative from HIV/AIDS centre commented that teaching SRE may encourage 'safe sex':

> It may seem like we are encouraging safe sex. They already know the preventative measures and they would be more careful. They would buy condoms to prevent themselves. If they decided to have sex, it is not like we encourage them to have sex, but the good side of it would be reducing the risk of infections and diseases, and the spread of HIV in Brunei. **(Respondent BJ, Male, Representative HIV/AIDS Centre)**

The respondents above are against sex as an individual sphere for the creation of human intimacy and feelings rather than viewing sex as part of marriage commitment. The teaching of safe sex, contraceptive methods and making choices are prohibited (See Al-Dien 2010; Islam and Rahman, 2008; Athar, 1996). Issues of birth control in Islam have been discussed by many scholars. The ongoing discussion surrounding birth control and family planning among Muslims community raises 'legitimate questions' (El Hamri, 2010:27). They will know that since we are a Muslim country, it cannot advocate contraceptives for young people who are sexually active. **(Respondent DA, Female, Government officer)**. There are growing debates whether it is permissible within family institution or strictly prohibited (El Hamri, 2010). According to some Islamic scholars, Islamic contraception does not exist because Islam does not allow condoms and oral contraception in marriage. However, Islam allows all forms of contraception in marital relationship in order to protect the mother's

life, preventing pregnancy while breastfeeding (Family Planning Association, 2011; Blake et al., 2002).

Respondent AZ further added that SRE objectives are not measurable, hence it is difficult to ensure its efficiency which aims at a total abstinence:

> Just like how we teach maths, what do we want to achieve at the end of the lesson? Similarly, we need to know the objectives of introducing SRE in Brunei and why are we doing this? Is there any advantage? We can have trial and error, but personally I don't think it can go through the education system, because the objectives are not measurable. How to ensure that each individual is not having sex and have zero percent of teenage pregnancy? **(Respondent AZ, Male, Teacher).**

Such view may suggest that even though religious aspects of sexual health are imparted in possible future curriculum of sex education, there is no guarantee that number of pre-marital sexual relationships, teenage pregnancies and early incidences of marriage among teenagers will be reduced. As studied by Mitchell (2014), the challenge would be to relate sexual health indicators with SRE curriculum. As shown in this study earlier, teen pregnancy rates in Brunei increased following the religious implementation of Munakahat. This study altogether shows that there are factors that are more complicated than simply implementing a sexuality education.

The complexity of the issue of sexual health education is a contentious one because religious persons and professionals are afraid to address sexual health education openly (Attridge, 2011:57). For instance, among the key informants there are conflicts between existing and new views of sexuality may prove positive as well as negative for safe sex practices. However, the quotation above suggested that while religion plays its central role in sex education curriculum in a Muslim country, strong faith does not necessary avoid an individual to commit sexual crimes.

However, the particular concern on the above quotation is on the 'liberal sense' that sex education may offer to the young people. Some of the views expressed by the respondents indicate that there is some sense of reservations and frustrations over SRE. They seem to argue that when one goes to school, one is not necessarily to be formally educated about the values and social aspects of sexual or reproductive health but the students are simply 'schooled' by their surroundings and influences around them such as internet, peers and media. I also argue that, this 'schooled' rather than

‘educated’ perceptions do not equip students with tools, skills and attitudes that would make one function better in one’s environment or society. My argument is also that there is no institution for ‘schooling’ sexual desires, however our innate desires can be encouraged through proper ‘schooling’ leading to a better empowerment when making decision on sex.

7.4.2 Teaching to be Faithful and Abstinence

As discussed, ideological and religious views often intersect with the key informants’ responses. In this way, two distinct themes emerged, which revealed that relationship is about undertaking faithfulness dependent upon a religious belief which affects the individual’s submission to God. Firstly, the key informants reflected faithfulness within faith is an individual immersed by being a good husband or wife and ‘parents of the believers’. Secondly, perceptions about abstaining from sex in a pre-marital relationship were substantially not different from abstaining infidelity in matrimony.

Therefore, being faithful in a relationship for a Muslim can be interpreted as avoiding adultery in pre-marital relationships which accounted for non-married couples or married couples. This shows that the interpretation of being ‘faithful’ in a relationship means to submit oneself to the Order of Allah and be faithful to Him. As a result, in our discussions it is inevitable to separate the discussions of ‘being faithful’ within marriage and sexual abstinence.

This approach of HIV prevention strategy is commonly teaching a combination of Abstinence (A), be faithful (B), and condom use (C) (The Alan Guttmacher Institute, 2003) which was believed to be popularised in Uganda’s unique success of risk reduction and risk avoidance of HIV prevalence (Kiweewa, 2008). The ‘ABC’ approach has gained prominence within the discussions among the key informants. However, Brunei-based conservatives in the government continue to perplex the (C) condom issues. As argued by a male respondent, ABC method lacks Islamic value:

> For example, they may teach you not to get pregnant, how to be faithful and how to use condom. But where is the Islamic value there? Where is the family? Where is the Quran, Sunnah and self-identity? So far, I haven’t seen any [Muslim] country doing that. **(Respondent AW, Representative from HIV/AIDS Centre, Male)**

Even though this ABC method is frequently discussed by some of the key informants, the garnered controversies within this approach have not been fully explored by them. However, in the USA, Abstinence programs have been proven futile because most of the messages are delivered through 'scare tactics' and 'homophobic sentiments' (Kay and Jackson, 2008:9). In my study, majority of the key informants view abstinence as a positive trait for teenagers that practice healthy relationships. As supported by a female government officer:

> Abstinence, I always go for sex abstinence. How you say no to drugs, how you make them to say no to drugs, say no to sex. And teach the young people not to link sex to love. Sex is not necessarily love [..] Especially the girls they are very sentimental, they want to be loved all the time. But don't link sex and love. Love can be shown in many ways not just physically but it can be shown in caring and protecting ways. **(Respondent DA, Government Officer, Female)**

It was further included the view that teaching abstinence lacked a 'human right' or 'sexual right' that were plausible to correspond due to self-urge or self-control. As asserted by Bennett (2007:372) that 'as a young people's rights to health, their ability to negotiate marital rights, rights to use contraception and fertility control.' Even though, she originally concentrated on the rights of Muslim adolescence to be given comprehensive sex education that is religiously appropriate, however, she did not clarify and link that sexual right for youth is radically capable of making them to participate in Zina which is illegal in Islam. She also presented the choice of premarital sex rather than abstinence and contraception use to avoid unwanted pregnancy which overall defeats the purpose of introducing a religiously appropriate SRE. In addition, she then considered the 'social reality' (Bennett, 2007:372) of young Muslims which exists within their spiritual dogma and must not be ignored even though many youth uphold their pious attitudes towards premarital sex (Zina). A woman's sexual abstinence is depicted through a study illustrated by Cheng (2005), who has put emphasis on female sexuality which is constructed around purity, self-restraint and the denial of sexual pleasure with chastity and morality as the underlying logics. However, in practice, sexual abstinence is not practical because sexual desire is difficult to control (Kvasny and Chong, 2008).

Perceptions about abstaining from sex in a pre-marital relationship were substantially not different from abstaining infidelity in matrimony. This is best illustrated by Toft

(2014) as he stated that faith can have a positive effect on sexuality, which will sculpture positive effects on faithfulness in relationships. In other parts of the discussion, Respondent DA agrees to teach young people to have the ability to make informed choices which may suggest that she is in favour of a more comprehensive sex education. A male representative from HIV/AIDS Centre further explored the skills that a young people need to obtain in SRE:

> They need to have the skills to say 'No'. They also need to have skills to make decisions, time-management skills for use in the event of stressful experiences and stress management skills, **(Respondent AW, Male, Representative from HIV/Centre)**

This suggests that the respondent promotes sex-abstinence and no sex until marriage. Marriage is often professed as Muslims' living dogma which will avoid an individual from committing sins, as a male respondent explained that: 'Marriage can avoid Maksiat[38].' **(Respondent AZ, Male, Teacher)**. Considered precisely as a kind of immorality, 'maksiat' in this context refers to doing something which contradicts with the Sharia, for instance, adultery (Zina) or anything that contributes to it (Bennett, 2007). In dominant interpretations of Sharia, Zina also include rape, incest, extramarital affairs, prostitution, premarital sex, statutory rape and homosexual relationships (Bennett, 2007:376). On a similar note, a female respondent mentioned that: 'Evading Maksiat prevents the occurrence of adultery.' **(Respondent CGA, Female, Teacher).** The responses above of what it is to perform sexual acts against the advantage of marriage remains a good covenant to be clarified in this study. Islam and Rahman (2008) provide discourses on sex, marriage and reproduction has clarified large tracts of sexual morality which supports the respondents' account clearly. Another respondent similarly set up a line of thought that the theologians had articulated in the preceding discussions. A Religious Officer explores disseminating marriage topic into SRE, in which he denies the possibility of merging marriage within SRE but instead he suggests SRE programs to be included into Marriage Advisory Program. He explained:

> The bride and groom as a wedding couple definitely need to enjoy their life destination. Now, only then the need of sex education is required. Sex is required when the couple has two important objectives in the marriage; first, marriage is a response to a biological instinct of

[38] Maksiat is an Arabic word which means vices or immorality.

> procreation. Secondly, Islam teaches its followers that the goal of establishing a marriage is the responsibility of the spouses to extend the continuity of their progeny. Now these are clearly the importance of [Islam] sex education programs. **(Respondent K, Male, Religious Officer)**

The response above is relatively corresponding to what Mir-Hosseini (2010:31) explained as the classical jurists defined as the primary 'purposes of marriage' based on their consensus were to be: the gratification of sexual needs, procreation, and the preservation of morality. It appears that the respondent believes that SRE may only be reinforced as a pre-marital course, and this perception may ignore premarital sexual behaviours among youth. Yazdanpanah et. al. (2014) noted that in a Muslim country where sex is considered as a taboo subject, premarital education classes are the only formal opportunity for presenting sex education. Similarly to Brunei, the Pre-marital course for Muslims is made as a legal requirement for marriage and certificates will be given after completing the course. The effectiveness of premarital educational courses in Brunei continues to be the most neglected subject. Considering the increasing rate of divorce among Bruneians, the sex education offered in premarital educational classes may also be questioned if it has been successful in achieving its goals.

For several key informants, celibacy resolved the dissonance between their faith and sexuality. Perhaps, to harmonise between encouraging sex within marriage but not teen marriage is the Muslims' largest concern and may raise complexities. The quote by Respondent DA below demonstrates that marriage can be contained in SRE and it should not encourage teen marriage. This creates a scenario for an individual that by not actually committing to a pre-marital pregnancy, one is not being 'forced' to assume teen-parenthood responsibilities. She explained:

> Eventually, marriage will have to be in SRE, because our national agenda is towards strengthening family institution. We would propagate marriage but not teenage marriage or young marriage. **(Respondent DA, Government Officer)**

The following section will discuss the perceived breakdown of Malay Muslim family values on teenage marriage.

7.4.3 The Perceived Breakdown of the Malay Muslim Family Values on (Teenage) Marriage

Some respondents discussed that in fact the true message of Islam is best espoused through Islamic family values (Ball and Haque, 2003 as cited in Faruqi, 2007). Retaining Islamic values have to be dealt by parents within their families as Nurullah (2008:50) studied that one of the most vital ingredients in promoting and upholding Islamic cultural identity is Muslim family, as it is the most potent agent of socialisation of all societies. Corresponding to this, Teacher ZA commented that it is the parents' responsibilities to educate their children the Islamic values: 'Back to parenting skills, whatever it is comes from the house first.' **(Respondent ZA, Female, Teacher)**. Another teacher strengthened this with a Malay Proverb stating that: 'To bend a bamboo, start when it's still a shoot.' **(Respondent CGA, Female, Teacher)** which in the discussion's context means that parents should start educating their children the good values of Islam at a very early age.

Choosing the best man for marriage is stressed by the respondent because typically, role of a Muslim man or father is highlighted as a head of the family which poses challenges and enormous religious responsibilities (Horwarth et al., 2008). Consequently, the pressure from parental religious belief meant that marriage due to pre-marital pregnancy has to be readjusted based on Malay Muslim culture. This was often considered as a blurring line between religion and culture as some of the key informants addressed teenage marriage issues were problematic for Malay Muslim family values.

At this point, I want to address the important issue of what lies behind the concept of the lived ideology, a question of how Bruneian constitutes their moral self around marriage. It was further made complex when understanding the moral self around marriage is often perplexed with fragments of parental involvement in early socialisation and education, which may sometimes contradictory with what the religion has taught. Peumans (2014:624) associated this with some queer Muslims that may not endeavour toward 'an intellectual, theologically informed coherence between their sexual and religious identities'. For instance, a teacher explained that: 'Mothers always give a hope that a daughter will find a man who is destined to be with her. But sometimes they don't realise that they are handing down the culture of women

becoming a ‘victim’ or simply giving up to their daughters.’ **(Respondent CGA, Female, Teacher).** This discussion draws on gender sexuality, culture and religion. This respondent believes that religion is often abused in terms of gender sexuality which explicates barriers to women’s rights in marriage. The clash between culture, religion and equality rights has become a major issue internationally (Raday, 2003).

As a result, some key informants challenged the standpoints that have been put forward by various professions represented in the first section of this chapter. Firstly, by challenging what they understand marriage to be and secondly, by challenging how Muslim parents culturally deals with teenage pregnancy outside wedlock. The findings have argued that Islam saw marriage closely tied up with sexual activity with a wife or legal spouse (Al-Dien, 2010; Bennett, 2007; Athar, 1996). However marriage was often reconceptualised as a sexuality that was non-sexual because it is often done in relation to parenthood and a general challenge of what it meant to be assuming shared responsibilities within the household (Abd. Ghani, 2003). Parental action of uniting teenagers due to teenage pregnancy seems to suggest that Malay Muslim parents are not considering the Islamic family values which prioritize ‘religious’ roles before assuming other enormous responsibilities in marriage. Marriage due to Zina (adultery) which is a sinful act, proves that the young couples are not assuming that ‘religious’ responsibilities yet. Furthermore, the respondents perceived this as a breakdown of Muslim values which contradicts with retaining Islamic family values as discussed by Faruqi (2007). The process of ‘readiness’ involves recognising the need to change. Additionally, this has also been mentioned by some of the respondents particularly among the senior health officers, welfare officers and NGOs, weighing the benefits of SRE.

Referring to the data, a gynaecologist shared the average age of pregnancy among young people and the normal practice of Malay Muslim parents of amalgamating teenagers after they discovered about their ‘unintended’ pregnancy:

> Based on the data, there are not so many cases of teenage pregnancy under fifteen years old youth, but it is still occurring. Majority of the cases come from people between 15 to 19 years old and these all are unplanned. They got pregnant by ‘accident’ so they got married which is the norm in Brunei. **(Respondent DRR, Female, Gynaecologist)**

Pre-marital pregnancy causes shame and the parents to lose face (as discussed in Chapter 4). As a cultural defence, due to a sense of shame, parents unite their children who have been pregnant and are willing to sacrifice the Muslim family values in obedience to culture than God. This is a striking example of cultural influence on the concept of face or 'water face' which is significant among the Bruneian people or Malay culture generally. Another female teacher agreed that in Brunei there is a growing number of teenage pregnancy and teenage parenthood. She said teen marriage tends to lead failure in retaining their marriage, especially when the young couples are not ready yet:

> In Brunei, it is not surprising that young people get married early and get divorced at a very young age. There are so many cases like these. **(Respondent CGA, Female, Teacher)**

Lack of SRE is practically at fault because the respondent continued to point out the flaw of disinhibiting SRE in the education system:

> SRE should be put into play, to teach about how to control pregnancy, family planning, financial planning and so on. When it comes to sex, it is not all about 'on bed' stories, there are diverse things to be talked about. Most people have the idea after they got a job, they will get married and have kids. But they always forgot what should happen in between. **(Respondent CGA, Female, Teacher)**

Lack of 'readiness' in assuming responsibilities somewhat determined the impact of teenage pregnancy prior marital status. Divorce is divinely ordained by the law of Sharia (Mir-Hosseini, 2007; Alam et al., 2000) explored the process of divorce usually stemmed from a lengthy and hazardous arguments followed by mental and physical abuse to women, separation which eventually leads to divorce. Apart from that, financial instability is also pointed as a reason that initiates divorce (Harkonen, 2013). For several key informants teenage marriage does not necessarily resolve the dissonance between their Islamic faith and the social consequences of sexual behaviours outside wedlock. This action is considered by the respondents to inflict damage on Islamic family institution. In return, some key informants took their standpoints away from the belief of teen marriage as a consequence of unplanned pregnancy outside wedlock. Respondent AZ commented that:

> Early marriage among young people is also looking at their immature of thinking and readiness in terms of mentality. For instance, how are they

> going to face financial instability, are they mentally ready to face this problem?' **(Respondent AZ, Male, Teacher)**

Respondent CGA argued that Bruneian society focused too closely to sexual behaviours (zina) rather than the consequences of bearing a child. She also suggested that abortion may be the best solution to minimize the risk of jeopardizing the concept of face in Malay Muslim values:

> If a girl is impregnated, the parents have no choice but to unite them in marriage. Some pregnant girls will take a bad solution by abortion. If the girl is aborting the baby, she is guilty but at the same time she doesn't want to humiliate her parents. Part of it is disobedience. Part of it is serving good for their parents **(Respondent CGA, Female, Teacher)**

The performance of abortion is not legalized in Brunei and prohibited under the Penal Code Brunei Darussalam (Articles 312-316)[39] unless for the purpose of saving the mother's life. This response may suggest that marriage practice due to pre-marital pregnancy is not being compatible with Islamic family values, because some parents may not be happy with their child's pregnancy, and their act of Zina is considered to be disobedient to their parents. As a result, early incidences of marriage prove to cause a high incidence of divorce among young couples because their relationship is not blessed by their parents:

> Based on the statistics, the highest incidence of divorce is between group ages of 25 to 29 years old. This means that, they probably got married very early before they were 25 or 29, but between those ages they already got divorced. This reflects immaturity and they are not ready to assume responsibility. **(Respondent DA, Female, Government Officer)**

Her solution to this was to focus on other aspects of social consequences to teenage pregnancy and to reconceptualise teenage marriage as a result of unplanned pregnancy. The findings identified that there is a blurring line between religion and culture. Both cultural norms and religion practices have been frequently invoked by the respondents in this study, in national and religious contexts, as a form of defence in order to oppose teenage marriage due to pre-marital pregnancy. The concept of cultural defence of marrying young people by their parents are acknowledged in Brunei culture, while religious claims, in opposition to marriage are commonly made under

[39] Data obtained from: www.un.org/esa/population/publications/**abortion**/doc/**brunei**1.doc (Retrieved on 2/11/2014)

the umbrella of reconceptualising teenage marriage as a result of unplanned pregnancy outside wedlock.

7.5 USE OF QURANIC VERSE AND THE PROPHET'S TRADITIONS AS REFERENCE TO SUPPORT THE KEY INFORMANTS' VIEWS

This section presents the respondents' use of Quranic verse and the Prophet's traditions to support their views on roles of parents, adultery, marriage, reproduction, and sexual desires which leads to zina (adultery). In the first section of this chapter, there was a discussion about the prominence roles of parents. A female teacher highlighted parents as the first source of information on how to choose the best spouse to continue the progeny of Islam:

> A child is like a white cloth, it depends on the parents how they want to draw or design the cloth. [..] For me, the solution must start from the bud [home/parents]. Parents should communicate with their children on how to choose the right man to be an ideal husband. **(Respondent CGA, Female, Teacher)**

This quote is corresponding to the Prophet's Hadith (sayings) which was narrated by Bukhari and Muslim. In that hadith, The Prophet said: Every child is born in a state of fitrah[40], pure and untainted. It is the parent who will groom the child to be either a Jew, or Christian or a non-believer. This Hadith clearly teaches the parents to play prominent roles and responsibilities in shaping and determining the child's future. Hence as parents, they must always endeavour to give the best education as possible for their progeny. She quoted the hadith (Prophet's traditions) when she discussed about the prominent roles of parents in educating their children about relationship. She further explains that: 'Girls best teacher is a father. So, they will look at their fathers as a role model or the type of men that she's going to marry in the future.' When asked about whether SRE should teach about marriage, a Religious Officer disagreed to include SRE in the curriculum, he suggested to include SRE as part of

[40] State of Fitrah means, when a child is born, it has a natural belie of God. This natural belief is called 'Fitrah' in Arabic. In this context, Islam believed that all child is born Muslim and Islam is the religion of fitrah because its laws and teachings harmonise with the natural inclination of human nature to believe and submit to Allah, the Creator.

Marriage Advisory Program. In defending his stance, he brings a Quranic verse to strengthen his view on marriage:

> And of His signs is that He created for you from yourselves mates that you may find tranquillity in them; and He placed between you affection and mercy. Indeed in that are signs for a people who give thought. (Quran 30:21)

According to the respondent, marriage is the only way a couple can express their desires to the other spouse for the taste of love, peace and security. The only legal way recommended by the Prophet to be allowed and the lawful union of male and female couple is through marriage only. The most common Quranic verse which was stated among the key informants were: 'And do not go near Zina. It is indeed a shameful and an evil path.' (Quran, Al-Israa': 32). This findings show that most of the respondents condemn any form of adultery and promiscuity. It is clear to the respondents that zina or anything that leads to it are forbidden in Islam. HIV/AIDS danger is more than a medical and biological problem (Hasnain, 2005). In Islam it is treated as a بلاء (balā', "misfortune") for committing sins. Islamic doctrine suggests that religion can guard from sexual health problems and HIV/AIDS which Muslim countries were previously believed to be protected. As illustrated by a gynaecologist, it may suggest that infertility or acquiring sexual diseases is a form of balā' from Allah:

> We have many women in their early 20's that got married and they cannot get pregnant. When we investigated, they have evidence of previous infections, which means that they have infections that they didn't realised they have acquired, maybe at their early life when they were having sexual relationship before marriage. And that's the impact. We have many of these cases. Infections of the past can damage the tubes and cause ectopic pregnancy for instance. **(Respondent DRR, Female, Gynaecologist)**

This verse reminds the mankind to avoid and commit adultery, in a country where Sharia law is implemented, the adulterers can be stoned to death and this punishment is clearly mentioned in the Quran. A male teacher explained that the punishments of Zina based on the Quran must be clearly explained acknowledged by Muslims. Additionally, he said that Zina cause 'corruption on the earth', because it can damage Islamic family institution; increase the risk of getting sexual health diseases and infertility:

> We learn about religion from the start. So we learn religious values from religious classes. If we commit adultery, what are the punishments

> following the words of Allah? For instance, in the Quran Allah mentioned "Do not cause corruption on the earth," **(Respondent AZ, Male, Teacher)**

The respondent used a verse from Quran (2:11) to illustrate his point. In the Quran, it does not specifically mention about HIV/AIDS. However, the verse shows that it is an attempt to control the damage in this world.

A female teacher discussed about the Muslims' enemies is the Satans that can influenced human to commit to sins. She explained:

> There's a Quranic verse stating that among our obvious enemies are the Syaitans (demons), jins (genies) and humans. Sometimes, human can turn into Syaitan (evil). So in a way to say, even though he is a religious person or a president, the Syaitan will make its way to lure human (to do evil things) until the end of the world. No matter religious or not, someone will face the 'temptations', little or many but still will affect them in some ways. So, it doesn't matter, but at least we as Muslims realised with religion, 'aqidah' and 'akhlak', we can avoid these things. As long as you learn about it. Even though someone prays 24/7, it doesn't guarantee that a person will not do this [sex] **(Respondent CGA, Female, Teacher)**

The respondent does not clearly explain the specific verse in the Quran. However, in the Quran, it is numerously mentioned that Satan is a Muslim's true enemy. For instance, in Chapter 2:208 stated:

> O you who have believed, enter into Islam completely [and perfectly] and do not follow the footsteps of Satan. Indeed, he is to you a clear enemy. (Quran, 2:208)

According to this respondent, there are so many ways a Muslim can be influenced and cannot protect themselves from Zina (adultery). Amongst the most abhorred enemies are the Satans, genies and humans who commit sins, those who speak or show their sexual desires towards others. Suppressing sexual desires cannot be achieved without building the 'strongest fortress' which according to this respondent is strong aqidah[41]and akhlak[42] against Zina (adultery). However, it can be argued that faith does not guarantee that a person will avoid himself from committing pre-marital sexual relationship.

[41] *Aqidah* is a branch of Islamic studies describing the beliefs of the Islamic faith

[42] *Akhlak is a* term referring to the practice of virtue, morality

Humans are inclined to sexual desires because it is innately born within us as part of human psychological and physiological developments (The concept of Libido, Sigmund Freud as demonstrated in these studies). Referring specifically to sexual desire, research has tended to suggest that discrimination and disadvantage are reinforced if the person is Muslim or of a Conservative Muslim. For illustration, a legalised same-sex marriage between a Muslim Gay from Malaysia and an Irish man had received a great threat from Malaysian public (Goh, 2014).

With Islamic scriptures' perspectives, the concern is not only with the effects that sexual desires can bring upon the young people but the Muslims Ummah on a whole. The effect that it can bring for an individual such as exposed to diseases if the young people do not practice safe sex, teenage pregnancy, abortion and child abandonment which contribute to the future of the Ummah (the whole community of Muslims). There are specific challenges to educating desires which it is no near to possible to achieve in a short period of time because it involves the process of time. Sculpturing individuals' thoughts and sexual desires before it is turning into sexual actions is a great challenge because sexual desire is somewhat 'private' and 'personal' and many of our thoughts are hidden and protected. Consequently, by announcing Brunei Compulsory Religious Education act, Bruneian young people will not only be Islam on the façade but is expected to study the words of Allah for spiritual strengths. The Quranic scripture and the Prophet's traditions are full of lessons and words to live on. The problem with Muslims nowadays, they may be able to read the holy Quran but they do not fully understand and practice it in their everyday lives.

This section has discussed the respondents' application of Quranic verse and the Prophet's traditions to support their views. However, there are many references that were not discussed by the respondents, such as the discussions on menstruation, ejaculation, motherhood and parenthood which are all mentioned in the Quran.

7.6 CHAPTER SUMMARY

This study sheds light on sex in the meaning of religious involvement. The findings seem to suggest that agreements within multiple government agencies secured an acceptable SRE while preserving Brunei own domestic interests. The line of critique further argues that SRE has failed to generate positive accounts of sexuality. Instead, a cluster of intellectual professions, have challenged the position of sex education within Islamic context. The discussions claimed that faithful in a relationship is portrayed as a submission to God. Faithful is perceived to be abstaining sexual relationships outside matrimony either for married or unmarried couples. Above, I pointed out that many of the findings regarding the effects of early marriage due to pre-marital pregnancy suggest that customary practice has major long-term effects on divorce rates. Thus, some key informants shifted towards a more strict regulation of teen marriage. In Sharia discourse and academic literature, cultural and religious values of marriage are usually raised separately without reference to one another and with differences of emphasis. In the final section, a number of Quranic verses and the Prophet's traditions are quoted and analysed to identify the objective and wisdom behind marriage, sexual health problems and desire. It appeared that the importance of Quranic verses is made as references to support and strengthen the respondents' responses.

While self-control is the epitome of 'always easier said than done' (as illustrated in Public Agenda, 2002:8) in cultivating young people, developing sexual abstinence trait could be argued. Such outlook may erect barriers to control unplanned teenage pregnancies and the rising threat of STDs. Obviously, as a consequent, this may have wider implications in practice on individuals with Islam affiliations including unwillingness for the key informants to interact within the multiple agencies in Brunei to intensify their efforts particularly in health services and education. Wiesner-Hanks (2010) emphasises in the centrality of sexual desire and Christianity which she pointed out that the norms and lived reality are still in tension today.

A number of factors from the respondents trigger the level of readiness among the government agencies. These include when: (a) the respondents perceive that sexual health related problems are not going to be resolved in Brunei; (b) some respondents

are complacent with the existing religious sex education; and (c) some respondents perceive that they have adequate support in undertaking change.

CHAPTER 8

ATTITUDES AND PERCEPTIONS OF BRUNEIAN YOUNG PEOPLE TOWARDS 'SEX' AND 'RELATIONSHIPS'

8.0 CHAPTER OVERVIEW

This chapter explores how Bruneian youth learn about sex and relationship. The qualitative data is discussed and analysed according to the information obtained from 10 semi-structured interviews with young people. The study identifies a number of factors that may influence sexual behaviours among young people including romantic intimate relationships and teenage pregnancy. These factors may contribute to behavioural intentions through changing their perceptions of the personal and social consequences of teenage pregnancy. However, this study does not rule out environmental factors which may provide explanations for teenagers' pregnancy.

8.1 INTRODUCTION

As discussed in Chapter 6, various professionals have involved Islamic religion on sex which further broadens the discussions on marriage, religious-based sex education and the use of Quranic verses and the Prophetic traditions to strengthen their stances. The findings show that emphasis is put on protecting Brunei own domestic interest. In this study, I aim to view the 'coherence in religious subjectivity' (Peuman, 2014) between the professionals and Bruneian youth.

The youth in this study is between the ages of 15 to 26 years old. Their voices may represent Bruneian Muslim youth who may face reproductive health problems including exposure to pre-marital sex, little knowledge of reproductive health, poor awareness on sexual transmitted diseases and negative consequences of pre-marital sex (Smerecnik et al., 2010). Access to documents on Brunei youth engaging in pre-marital sex was reported to be predominantly complex by some of the professionals in the study. The data has never been documented and if any, it is not published publicly. In response, this study is intended to establish perspectives on the current attitudes and perceptions of Bruneian youth towards sexual health, information and services in Brunei Darussalam.

Thus, this chapter is divided into three sections. The first section explores the young respondents' perceptions and experiences of sex education. The perceived ideal relationship in a Muslim country is between heterosexual people in matrimony (Islam and Rahman, 2008). This idea also provides an important context to the second section, which explores how Bruneian youth perceive relationship. Finally, in the third section, I will review and analyse the existing evidence of school-based sex education[43] in Bruneian schools.

8.2 BRUNEI YOUNG PEOPLE'S UNDERSTANDINGS OF 'SEX'

This section will discuss on the results of an exploratory qualitative study on Brunei Muslims' adolescents regarding their views on sex in a Muslim country. Additionally, this research is also concerned with young people's attitudes and perceptions towards sex and relationship. Attitudes and perceptions of young people towards sex have been studied in many researches (Kanku and Mash, 2010; Elley, 2013) which include studies that are targeting Muslim youth (Bennett, 2007; Sanjakdar, 2009; Smerecnik et. al., 2010). These studies also investigate youth voices in regard to sexuality, in their own respective context. Therefore, this section tends to explore similar issues that represent the attitudes and perceptions of Bruneian young people towards 'sex' and investigate if there is 'coherence' of responses among these studies.

Initially, I asked the young people on their perceptions of sex. A religious university student perceives that sex is involving two participating individuals within marriage: 'The ideal kind of sex for me is between a male and a female that is after they tied a knot [marriage].' **(Respondent T, Female, 21 years old).** Correspondingly, another university student has commented that sex involves physical intimacy between two individuals and commonly contributed in a heterosexual marriage: 'Sex is an intimate relationship between two people, male and female which happens in marriage institution only.' **(Respondent MR, Female, 22 years old)**. The respondents above see that sex in marriage is between legal partners of opposite gender which remains the most widely accepted norm in Islam and Malay culture. To some extent, Bruneian

[43] Notice that the term sex education is used instead of SRE because SRE has not been introduced and implemented in Brunei yet.

young people in the study have developed an idea that sex and marriage is strictly related. This finding is corresponding to a study by Islam and Rahman (2008), that sex can only be achieved in marital relationship which contributes to the reproduction of mankind. Stokes (2008) stated that sex within marital relationship is believed by all Muslims as a form of obedience to the Only God. Hence, religious views on sex have constructed a common theme, such as the prohibition of adultery, given that Islam regard sex outside marriage and anything that leads to *Zina* as morally wrong and sinful (Islam and Rahman, 2008; Bennett, 2007). This finding is further strengthened by a male student as he described that: 'Adultery is not just sex, but it includes *Zina Mata* [making eye contact with girls], *Zina Qalb* [having the wrong intention to see a girl], *Zina Tangan* [touching or petting] and *Zina Mulut* [kissing or oral sex].'

The finding above further recognises the respondent's association of religious views with sex. Schaafsma et al. (2015:413) found that experiences with friendship, kissing, cuddling and holding hands are reported. Bennett (2007) argued that certain common features of dating and courtship in Muslim modern societies show that both men and women have sexual relationships and intimacy such as showing parts of their *aurat*, touching, petting, kissing and hugging as part of a relationship. She continues to argue that in this era of globalisation, there has been a vast growth of extended single life, thus transforming the patterns of relationship. Such as couples tend to enjoy 'courtship' and it becomes common among Muslims as they tend to prolong the dating course and de-value marriage (Bennett, 2007). Weeks (2003:97) refers this as de-valuing marriage and the 'commercialisation of leisure.'

Sex is not only viewed for the purpose of reproduction between spouses, but to some respondents, it is also viewed for the purpose of pleasure which includes penetrative sexual intercourse. Pleasure as a component of sex is also discussed by a male student. He commented that sexual activity that he learns from a pornography site seems like a pleasurable act: 'Sex is pleasure. I have not done it but it looks like it's pleasurable. I learned it from the website.' **(Respondent FF, Male, 15 years old)**. The non-procreative sexuality is mentioned by Al-Dien (2010:398), as the 'permissive' sexual ideology which includes masturbation, oral sex and homosexuality. Viewing sex as pleasure is also shared by a respondent who supports homosexuality. This finding also reveals that homosexuality in the country does exist. A young student who

believes that sex should happen in marriage was hesitant to discuss sex. He commented: ‘Sex is… [long pause] between a male and a female’. The response however seems hypocritical, after he further added that: ‘I have done sex with men. Not interested doing it with boys, I want a real man.’ **(Respondent M, Male, 15 years old)**. Homosexual act may not contribute to reproductive sex; however it may contribute to strengthening human relationship. This response however indicates that he acknowledges that religion promotes marital relationship. However, this is contradicting with his approval of gay relationship and homosexual behaviours. While some respondents agree that sex should be in a legal marriage, the latter response suggests that there are remarkable shifts in attitudes over recent generations on sexuality such as perceiving sex as a pleasurable act. In relation to gender, none of the females in this study link sex with pleasure. This may further suggest that some of the respondents believe that women play passive role in sex (as discussed in Chapter 5).

8.3 YOUNG PEOPLE’S UNDERSTANDINGS OF ‘RELATIONSHIPS’

In Chapter 2, the Muslims concept of ‘relationship’ is generally defined within the Islamic concept of relationship. As the concept of relationship is closely linked with societal relationships (Olayiwola, 1993), this perspective has broadened of how Muslim spouses such as boyfriend-girlfriend and husband-wife relationships have been previously perceived and discussed within the literature. In contrary, the concept of relationship in the literature has been integrated with Sex and Relationship Education (NCB, 2003a). The fundamental principle that ‘social relationships affect health outcomes’ (Umberson and Montez, 2010), has led to this study to analyse the ways in which Sex and Relationship Education can be supportive and helpful. For example, within SRE framework, it regards a good practice of relationship as an ability to manage and practice emotional skills, social skills, communicating skills, negotiating skills to resist peer pressures which later assist in decision making (NCB, 2003a). As such, this section explores how the respondents in the study negotiate religion within a relationship. In particular, it studies the nature of relationship within Muslims and how they perceive healthy and unhealthy relationship. The following sections will discuss the young people’s understandings of relationships.

As discussed earlier, the findings show that sex in marriage is between two legal partners of opposite gender which remains the most widely accepted norm in Islam and Malay culture. Phillips (2010) argued that the conception of 'arranged' and 'forced' marriage in the Islamic culture must be distinguished. Therefore, it can be argued that marriage in Brunei Muslims society is not depending on the 'produced' rules which led to women's control and suppression (Anwar, 2009:5). This has been strengthened by Mir-Hosseini (2010) who argues in her paper that Muslim 'family law are not divine, but are 'man-made' juristic constructs shaped by the social, cultural and political conditions which Islam's holy texts were understood and turned into law.

A finding by Sorensen (2007:2) found that the 'young people are at the greater risk of experiencing verbal, emotional and physical abuse from their partner'. A female student perceived that a healthy relationship is free from domestic abuse:

> As I am a Muslim, rather than viewing healthy or unhealthy relationship in terms of sex life, I viewed it differently. For me, healthy relationships is loving relationship where two people love each other and unhealthy relationship is when domestic abuse is occurring. **(Respondent Q, Female, 21 years old)**.

The account above demonstrates how she has attempted to define relationship out of the Muslim norms concerning the conduct and behaviour of courtship and dating between women and men. She alludes to beliefs about an individual dignity instead of ensuing the discussion of religion in relationship. The above account conforms the study made by Kyriacou et al. (1999), whereby the respondent reinforces the sense of 'safety' as a healthy relationship. She described how she is aware of 'love-hate' relationship, which in her religious belief to be unacceptable too. What has not been discussed by the respondents were about self-protection in relationships including with their boyfriends. As acknowledged by Abdullah et al. (2014), majority of the teenagers between the ages of 15 to 17 years old were pregnant because of being assaulted by persons whom they know or acquaintances including their boyfriends.

The place of human relationship in relation to religion was discussed by the young people in this study. In the discussion, the young people were addressing religious belief with the roles of men and women in a relationship. These responses may not affect the life and outlook of Muslims today because some of them may identify the roles of men and women in an Islamic relationship, but do not necessarily obliged to

it. Sorensen (2007) argued that romantic relationships becoming increasingly significant as they enter early adolescence. Bonding through romantic relationship has also been mentioned by Seiff-Krenke (2003) which provides evidence for a developmental sequence of romantic relationships overtime. Another female student provides an interesting example of how relationship and religious identities were often integrated:

> Relationship is a couple, between male and female loving each other either in a marital relationship or not. In Islam, we are taught to have '*Ta'aruf*' and courtship is actually not encouraged. It is against our religion to date a girl unless you want to marry them. **(Respondent VV, Female, 21 years old)**.

The respondent above shows her perspectives of how she disagrees with the prospect of non-conjugal roles within modern Muslim relationship on religious grounds. These views were common within the young people, where perceptions of a relationship were accompanied by religious beliefs and cultural values. Another female respondent further describes a healthy relationship that does not involve sexual intimacy as Muslim religious duty; however she is more accepting in courtship as long as it does not lead to sex:

> A healthy relationship in Brunei is through marriage. It is preferable for couples not to meet up to avoid sexual intimacy or anything that leads to it. Or, in dating or courtship, even if the couples meet up but they don't have sex, it is still considered as a healthy relationship. **(Respondent AM, Female, 17 years old)**.

As argued by a student that: '[An] unhealthy relationship is a relationship where two people are not bonded in marriage and having unprotected sex.' **(Respondent IP, Female, 22 years old)**. These findings view about the allowance of Islam to relationship were echoed by many of the respondents (including some of the key informants) in the study and presented a dominant theme within the data. Furthermore, the addition of religious beliefs and cultural values seemed to provide a legitimate argument to these perceptions. The reinforcement of relationship through the support of religious beliefs was also observed by Bennett (2007) in her examination of *Zina* (adultery) and youth in Indonesia. Consequently, it may be argued that religion may play a crucial part in structuring the relationship expectations of its adherents (See Cila and Lalonde, 2013). These findings further support for abstaining from sex leads to a healthy relationship.

In this study, bonding and romantic relationships are also identified in the participants' responses. This further complicates to build an understanding of the nature of a Muslim relationship and may cause problem between Islamic practice which contradicts with the social reality of Muslims youth. Athar (1996) and Bennett (2007) argued that courtship and dating create distinctions of beliefs, often failing to account for complexities within social relationship. Consequently, a young boy learned that having a girlfriend must construct boundaries:

> Mind your limits when you go out with your girl, whether you're alone together in the cinema. Sometimes when it is just the two of you, there is always the third person, the Satan. Mind yourself, don't act anything stupid,' **(Respondent LN, Male, 15 years old)**.

The response above shows that the respondent views that the young people must not be in a close proximity with opposite sex. Additionally, another response below presents the similar situation to make this point. As a student explained:

> Relationship is all about love. But it [relationship] doesn't necessary involves sex. It's like when you love someone, you love them not because of their outer beauty. You love them just the way they are and see beyond their inner beauty. **(Respondent FF, Male, 15 years old)**.

By examining these accounts, the role of mainstream cultural and religious identification significantly situates the Muslim youth's understandings of relationship in dating and courtship by practicing sexual abstinence. The accounts depict how Muslims provide a solution, bridging to the gaps of religion and social relationships. Therefore, the findings form a useful indication that Bruneian Muslim youth's perceptions and attitudes towards relationship do no necessarily challenge the core aspects of the respondents' cultural and religious identities. This aspect does not attempt to generalise the experiences of all young people. On the contrary, I fully acknowledge that there are range of intersecting factors and circumstances that construct the young people's understandings of relationship. This finding may provide a perceptive that their faith is informed by Muslim practices but incongruous with the mainstream practices of relationship.

Horn (2006) identified the school climate in the USA suggests that negative attitudes towards gay and lesbians individuals are 'quite common' among the adolescence. Addressing homosexuality as a 'western disease' (Sanjakdar, 2013:16) in her work on

Muslims sexuality education, she explores how Australians Muslim teachers attempt to include studies on homosexuality as part of a wider discourse on developing comprehensive sexuality education for Muslims youth by designing appropriate pedagogies and moral frameworks and expressions of embracing sexual difference. In this way, homosexuality discourse among Muslims will not be repressed both in the family institution and in educational contexts.

8.4 BRUNEIAN YOUNG PEOPLE'S INFORMATION SOURCES ON SEX: CONTRACEPTION, INFORMATION AND ADVICE

This section investigates the relationship between formal, informal sex education and sexual-related attitudes and behaviours of Bruneian youth. Furthermore, this section seeks for young people's perceptions and opinions on school-based sex education and finding out the indicators of sexual health awareness among young people. In this study, I intend to focus on young people's knowledge of contraceptives, its uses and one of the potential consequences of those sexual activities such as teenage pregnancy (as discussed in Chapter 4). The following sub-sections will discuss on the young people's experiences and perceptions of school-based sex education, contraception and its relationship with pregnancy, HIV/AIDS and STIs prevention and finally exploring the young people's exposure to informal sex education.

8.4.1 School-Based Sex Education: Perceptions and Experiences

School has been mentioned by many authors (Sanjakdar, 2013; Spratt et al., 2010; Sanjakdar 2008; Clark, 2001) as a site for the promotion of health. School was selected because it is among the main avenues for acquiring information about sex and moral values regarding sexual behaviours (Al-Dien, 2010). According to Brewer et. al. (2007), schools sexuality education programs have been developed in reaction to increasing rates of teenage pregnancy and STIs. This study draws on data collected as part of an investigation examining the perceptions of Bruneian Muslim adolescents in regard to sex education in Brunei as provided by public schools and religious schools.

In line with the research question, young people were asked about their experiences and perceptions about the current practice in school. A female student explains that specific sex education in Brunei is non-existent during her school years: 'To be honest, there was no specific sex education programme in any school I ever attended [elementary, middle school and sixth-form]' **(Respondent Q, Female, 21 years old)**. Non-existence of specific sex education as mentioned by the adolescent girl may imply that the subject was never taught as a single curriculum as it is being incorporated to other curriculums such as science-related curricula. Another investigation also found that, Bruneian youth rarely mentioned sex education as a separate school curriculum. Majority of them refer 'Science', 'Reproduction', 'Reproductive Health', 'Sexual Transmitted Diseases' and 'Biology' as part of Sex Education assimilated in science and health related subjects (Clark, 2001). These are the most commonly perceived idea among Bruneian youth as early exposure to school-based sex education. As illustrated by a young boy who viewed that reproduction lesson offered in his class often explained in a more passive form of education, hence not a memorable learning:

> It's in Year 7. We learned about male and female reproductive systems. I don't remember much about it. Male have sperms and women have egg. I learn sex from studying these. **(Respondent FF, Male, 15 years old)**.

The above finding suggests that Brunei young people are educated about reproduction among humans. This rather scientific learning of sex often forgets certain details of sexual activity that in order for the sperm to reach the route, there are processes-in-between that should take place (Wahba and Roudi-Fahimi, 2012). For instance, sexual arousal of male and female, the indications of it and ejaculation should occur in order for the whole reproduction process to begin. Topics such as sexual arousal, the insertion of a male penis into a female vagina and ejaculation are found not discussed by the young respondents. This suggests that the young people may be taught inadequate information of sex and it can be reasonable to assume that youth would also receive a limited sex education and open discussions about it. In Bruneian Government schools, the biological aspect of sex is first introduced in Year 7, when the young person is around thirteen to fourteen years old. Identically, another participant explained her experience of studying sex in her secondary years mostly covering the scientific processes of reproduction:

> I was a Science student. I learned sex in biology which explained about the reproduction processes such as male and female reproductive parts and fertilization. **(Respondent MR, Female, 22 years old)**.

Another female student commented that sex education in school is inadequate: 'Sex education in Brunei is not enough. We want to know the challenges of sex and reasons why people are doing it [sex] in a relationship.' **(Respondent BB, Female, 23 years old)**. The response implies that sex education in school concentrates too much on the factual biology instead of discussing on the emotional challenges and social issues of sex and relationship. Another female student noted that factual and biological topics were taught in biology:

> I was in Year 11, in biology class I learned how sperm works, condom, puberty and basically how male and female reproductive system works. I don't remember learning about sex in any other subject. **(Respondent VV, Female, 21 years old)**.

The above quotes generally recognise biological facts of sex as the primary sources of information about sexual relations and reproduction as the integral part that plays important role in the early life of an adolescent for them to assert in the later life, which in this context refers to marriage. Corresponding to this finding is the Essentialist approach towards sex, it assumes that the approaches that sex offer is a basic 'biological mandate' which stresses against and must be reserved by the cultural matrix (Weeks, 2003:18).

Most of the young people agree that the existing sex education in Brunei is taught in a form of science or health-related topic. In secondary school textbooks and workbooks for 'Science' and 'Biology', there are chapters that exclusively discuss 'body parts' and 'bodily functions' in Year 7, 8, 10 and 11. However, opportunities for discussing the gender characteristics and differences of human body parts seem to be limited to the information on the anatomy or physiology of the human body and human reproductive system, the characteristics of puberty and stages of pregnancy (Gerouki, 2008). The responses seem to suggest that the focus is only made on human reproduction but less association is made with relationship and marriage, in which Muslims need such context to be highlighted for human reproduction.

Such findings show that programs in schools on the prevention of early marriages, teen pregnancy, HIV/AIDS and STIs need such religious background information which links with human reproduction. As argued by Clark (2001), a factual-based sex education may cause a serious contradiction where schools could provide young children with the information on how they could get pregnant but not giving information about contraception. The findings also seem to suggest that majority of the young people considered 'reproduction' as a school-based sex education. Whilst the young people learn the biological process of sex, they may be missing out other important aspects of sex such as how and where to learn about meeting individual needs, or what exploring their needs might look like. A female student traced that biological sex education does not meet the individuals' sexual needs information, because it is often limited to the scientific knowledge only, she noted:

> As far as I can remember, I only learned about contraception, sex and sexually transmitted diseases in Biology class. In those [biology] classes, I only learned the scientific part of sexual relationships rather than what you actually have to do during sex. I think I learned about reproduction rather than about the sexual intimacy process. **(Respondent Q, Female, 21 years old)**.

She argues that sexual intimacy process of sex is often eliminated from the discussion of the subject, including expectations of what to do during sex and how the sexual process begins and ends. The current status of sex education under the Brunei Government at present shows that it is a requirement for all secondary schools to educate biological aspect of sex such as reproduction, and the spread of sexual health related diseases. These topics are part of the National Curriculum which must be taught in all secondary level students. It has shown that Brunei overwhelmingly favours narrowed sexuality education programs over those comprehensive sex education because the broader topic of sexuality and relationship is currently not introduced within the national curriculum. The finding may also suggest that Brunei is more inclined towards abstinence sex education because Abstinence-Only contents focus on teaching sexual abstinence as the only acknowledged way of avoiding pregnancy and STIs among youth. Currently, there are abstinence, pregnancy and STD

prevention topics being taught with a little need to cover broader sexuality education topics such as feelings and relationships often overlooked (Acharya et al., 2009)[44].

8.4.2 Contraception and Its Relationship with Pregnancy, HIV/AIDS and STIs Prevention

The previous chapter has discussed the key informants' perception that sex education has already been implemented in the country **(See Chapter 5)**. Thus, the respondents believe that sexuality-related information is disseminated to young people through a variety of avenues including public schools, religious schools, through religious people like 'ustaz'[45] and 'ustazah'[46], participation in Islamic talks and organisations, which the content and messages often vary. These are perceived to be alternative arrangements that Brunei provides for young people who are attending schools at the moment. Most young people in this study perceive that falling pregnant outside wedlock as negative with consequences such as low attainment of education, unemployment, difficulty of returning back to education and being stigmatised for crossing the cultural and religious taboo **(as also discussed in Chapter 4).**

In the UK, Teenage Pregnancy Strategy was launched in 1999 (SEU, 1999) which aims to aid teenage parents to reduce the long term consequences of social exclusion by increasing the amount of education, training and employment (Teenage Pregnancy Strategy Evaluation, 2005). However, it can be argued that the Government's TPS has failed as Family Education Trust (2002) announced the indicators that the TPS is destined to fail. Paton (2009) also recognised, that teenage pregnancy in the UK remained 'stubbornly high' over the last 20 years, which altogether can be argued that the strategies of TPS do not improve the worsening cases of teenage pregnancy in the UK.

When the young respondents mentioned the religious or cultural aspects of their encounters with SRE, they generally criticise the availability of choice provided in schools. For example, in religious educational settings, a young boy expressed a

[44] http://eprints.bournemouth.ac.uk/12695/1/Acharya_et_al_sex_educ_Nepal_20009.pdf (Retrieved on 04th Sept, 2014).
[45] Ustaz, a male religious teacher or religious head.
[46] Ustazah, a female religious teacher or religious head.

negative opinion of Munakahat that is taught in religious schools as it does not contain sex education. He argued: 'Sex in *Munakahat? Munakahat* is the teaching of marriage and not about sex.' **(Respondent C, Male, 16 years old).** Echoing this finding, another young boy stated: 'I learned that you need to wear condom if you don't want to impregnate a girl. I don't learn this in religious school.' **(Respondent FF, Male, 15 years old)**. Similarly, a female university student also failed to recall sex education during her religious class: 'I don't remember learning about sex education in religious school, at all.' **(Respondent VV, Female, 21 years old)**. These findings deny the idea that Brunei already has a religious-based sex education. This also contradicts with some of the young people's beliefs, in which they do not recognise Munakahat as sex education.

While most of the young participants engaging in this research never have sexual intercourse, they agree that condom is the most taught contraceptive method during their school years. Apart from condom use, the respondent below was also taught about other contraception methods, a young student explained:

> In Upper Secondary school [Year 10 or Year 11], we learned about contraception in Geography to control population growth. Birth control such as condom use is largely worn by couples during sex to avoid pregnancy. For instance in Singapore, they are controlling the growth of the population through contraception. And apart from that, it is used to avoid sexual-related diseases such as AIDS. There are other ways too such as contraceptive pill and injection. **(Respondent T, Female, 21 years old)**.

The effectiveness of condom use is debatable, which several studies argued that condoms have some limitations. This altogether has prompted for more evidence to consider if condom use is the best method for contraception and HIV/AIDS prevention. As explained by IFPT (December, 2001), condoms can reduce the risk only but not totally eliminating it. A Bruneian who was born in the United Kingdom has denied the protection that condom can afford, as he commented that condom cannot be entirely trusted:

> Condom is for safety right? It's for protection purpose. In Brunei, I am not exposed to condom. But I have learned about it in the UK. If you were to have sex, use a condom. In the UK, they promote condom use, so the sperm will not get into the uterus, and she can't get pregnant. But we

> can't really trust condom 100%, because sometimes it might tear up. Things can go wrong. **(Respondent LN, Male, 15 years old)**.

As supported by Wald et al. (2005), condoms do not ensure an adequate job of protecting human against sexual transmitted diseases. This discussion begs for advising young people that condom use may still increase the risk of pregnancy or transmitting sexual diseases. Collectively, there is data to argue that oral contraception and hormonal injection do not necessarily avoid sexual diseases either (Braun, 2006). Guttmacher Institution (2001) discussed that condoms protect the risk of herpes infection for women only but do not equally protect men. These findings can argue that there is actually no safe way to sex and it may defeat the purpose of teaching contraception methods overall. As studies made by Wald et. al. (2005), they suggested that consistent use of condoms is associated with lower rates of infection with HSV-2 and recommended for frequent use of condoms. Therefore, condom use may be the best available option for contraception. As Brown (2015:314) noted that: 'condoms were felt to be difficult to use and to spoil the spontaneity of sex'. A gay student commented that: 'Even though we know that condom is to protect ourselves but sometimes it is hard to use a condom every time you know. That's a hard thing to do.' **(Respondent FN, Male, 25 years old)**. As studied by Cohen (2003:3), there is a certainty that the reality of consistent and correct use of condom create 'disinhibiting effects' on people's sexual behaviours as argued by the Conservatives in the U.S.A. However, she disagreed to this argument and stated that increasing HIV treatment is more disinhibiting than the assertion made by the Conservatives. At this blurry border, an attempt to practice safe sex is still 'risky', however significant improvements in sexual and reproductive health can be achieved by practicing 'safe sex' using condom. These important points may not be conveyed in sex education and contribute to misleading conception about contraception as this has to be imparted in sex knowledge as well. The young people should be educated that contraceptive is there to reduce the sexual consequences only. On a discussion of contraception in a Muslim country, a university student, who is one of thirteen siblings, commented that contraception in family planning may not be forbidden for Muslims:

> Some contraceptive methods can be accepted in some Muslims country, depending on the situation. I think it is part of family planning. For instance, a married couple who has many children wants to control birth. There's no harm of doing it. **(Respondent MR, Female, 22 years old)**.

Islamic principles are believed to be against the use of contraceptive and restricting the use of sterilisation and induced abortion (Sahu, 2010). For instance, in 2014, Iran as a Muslim country in the Middle-East banned permanent contraception to boost population growth and calls for more babies (Guardian, 11th August 2014)[47]. There has been general consensus that contraception is an external Western conspiracy that aimed at curbing the growth of Muslims population (Shaikh et al., 2014)[48]. However, the proportion of Muslims engaging in sexual behaviours that put them at risk of unplanned pregnancy, HIV infections and sexually transmitted diseases remains significantly high especially for the Muslims in low socio-economic community (Wong et al., 2013). Although in this study, sexual relationships (heterosexual or homosexual) outside marriage have not been studied and may in some cases rare among Muslims women, there are evidence suggests that increasing numbers of Bruneian young people are having their first-born outside marriage (Statistics from Ministry of Health Brunei Darussalam, 2011) and local government medical service data shows that Bruneian suffers higher rates of syphilis and gonorrhoea (Ministry of Health Brunei Darussalam, 2010). It appears that Bruneian young people have little knowledge of sex and sexuality including STIs.

8.4.3 Informal Sex Education

The previous sub-section focused on how young people in the study emphasised the negative aspects of school-based sex education. As discussed above, some of the respondents described that sex education may not be sufficient as it is restricted to the teaching of biological facts and condom as the best option for contraceptive method. In this section, the importance of informal sex education among Bruneian youth will be investigated.

This section explores how, for some of the respondents in the study may have constrained how support from outside the home could be accessed. The subsection begins with a discussion about the expectations many respondents presented, that media and peers would be influencing SRE. Consequently, respondents frequently

[47] http://www.theguardian.com/world/2014/aug/11/iran-ban-permanent-contraception-population-growth Accessed on11th August 2014.
[48] http://www.ncbi.nlm.nih.gov/pubmed/24386733 Accessed on 12th August 2014.

presented accounts of how they currently undertake all aspects of sex education without the assistance of formal and parental education. The section then moves on to examine how these expectations are reconciled when learning circumstances require some knowledge or intervention from an outside organisation. This dilemma revealed how the respondents often presented contradictory accounts of knowledge accessed. Here, most participants argued that they did not receive of any outside support, which deemed to contradict descriptions of supports available for them.

Following some of the findings discussed in Chapter 5, many of the key informants in the study described how they perceived the influence of media to be sourcing the young people's curiosity of sex. As Gabler noted that (2011:22) contribution to the distinction between both impact of media and growing global accessibility has been considered as a means for exploring the participants' responses presented here which sometimes deemed as sources of information regarding topics that are 'off-limits'. For instance, a classic study by Varma (1999) argued that in India, media is seen as a battlefield for the young minds and Indian culture as foreign influences might damage traditional values. In this study, some of the key informants express their concerns that these expectations would be transmitted to the current and future Muslim generations living in Brunei. In this section, media and peers have also been recognised by majority of young people as a source to obtain sexual information. These types of concerns were particularly prevalent for key informants who taken care of young people in educational settings or providing health and community services for teenagers. Here, a male student explains that due to limited access to sex knowledge at school, he learned sex through his peers. He explained: 'I learned about sex from my friends, they never had sex but we kind of like making fun of it.' **(Respondent FF, Male, 15 years old).** In the quote below, he speaks in some detail about how he obtains sex education informally:

> I learned sex through websites and honestly speaking, I watch porn too. I don't share my sexual pleasure with my friends though we share about watching porn. I keep the pleasure to myself **(Respondent FF, Male, 15 years old)**.

Similarly, another male respondent argued that he was not exposed to sexual knowledge when he was young. As he claimed himself as a late bloomer, he explained that he was first exposed to it when he was in his first year of university:

> It was a French class and they talked about French kiss. And then a teacher came across this acronym, BJ. I asked that teacher, 'What's BJ?' She said, 'No you guys should not know'. And I was insisting to know, I repeatedly asked, 'What's BJ?' She said, 'Its Billy's job'. I said, 'It can't be!' There was my classmate who asked me to just Google it. I actually searched for it and there were images. So, I know about *blow job* from that on. **(Respondent G, Male, 23 years old)**

The concerns that the respondents presented above have been similarly studies by researchers, who have pointed out that Muslims, in general are increasingly integrating into the norms of Western culture (as discussed in Chapter 5). Consequently, the current formal sex education in Brunei is influenced by this perception to the extent that traditional expectations of sex for marriage may no longer be perceived by Brunei's youth today. These findings are also echoed by Gabler (2011) where a persistence to conform secular cultures for some respondents may lead to a sense of pride and a building up relationship in social spheres. For instance, the respondents regularly presented beliefs that sex should ideally be undertaken solely within the home; however certain cultural barriers often dictated that this may not be possible. Consequently, participants often shared about how they learned sex knowledge without any support from parents or family. A male student shares his experience of being gay. His perception of sexual orientation provides the same kind of standards of how sex is perceived in a gay relationship. He explained:

> I don't only learn it from biology class but also through friends. A relationship between a young girl and a boy is gross. Actually I have done it and I share it with those who have done it. We're 'making' it not with a girl actually. We had it with guys. You understand what I am saying, right? **(Respondent M, Male, 15 years old)**

This finding seems to suggest that the respondent is only comfortable to talk about his gay sex life among his circles as gay relationship is illegal[49] in Brunei. The finding also suggests that within Brunei, most young women and men may begin their sexual intercourse in their teenage years (this finding is corresponding with Weaver et al., 2005). The respondent above is fifteen years old and it shows that there are high schools students who may engage in sex considerably at a very young age. This kind of response is often accompanied by a sense of pride that sex could be shared and discussed within the same interest. Based on a study by Sanjakdar (2013:16), the

[49] Homosexuality is punishable under the Sharia' law.

heightened visibility of homosexuals among Muslims is induced by liberal attitudes towards sexual differences in modern world, which she stated that many Muslims perceived this as a 'western disease'. The sense of embarrassment at receiving support from inside the family was found that, the respondents regularly presented contradictory accounts as to whether or not they receive alternative help and support outside. In this way, participants would discuss some of their experiences of certain sex education they had accessed, after stating that they did not receive any support informally outside home.

A female student describes how she does not receive contraception learning during her adolescent years:

> In schools, we have friends with different backgrounds. Some are more social than the others, and some may be more religious than the others. I've heard so many things from my friends who chose condom as contraception which in schools we were not taught about it. **(Respondent VV, Female, 21 years old)**.

A distinctive situation ascends where she explains how family members have given her the knowledge of sex that she does not receive in any formal education. Then, she subsequently speaks about the questions that her sisters regularly attend. The extract from the interview is presented below to demonstrate this account:

> Mostly from my science class, sometimes from Western movies and my sisters shared their experiences since most of them have already married. I asked my sisters how were their 'first night' of marriage and how does it feel like to live with someone they newly wedded to, how to get pregnant and why some people get pregnant easily than others. **(Respondent AL, Female, 22 years old)**.

Two out of ten respondents identified their mothers as their source of information about relationship. Similar to the respondent above, another respondent also described his caring role as a mother who took the responsibility of providing advice for his son to put boundaries between a male and female. In the quote below, he is then asked if his mother educate him any specific sex education. He replies that he has not and subsequently explains the different form of sex education that he had accessed. The following account below presented this discussion:

> My mom asked me not to let a girl to go into my room. She also advised me not to be alone with a girl. I have no girlfriend yet. My mom is just being extra-cautious. **(Respondent LN, Male, 15 years old).**

There are studies that mentioned that most Muslims agreed that parents should take responsibility to provide sex education to their children immediately prior to marriage (Fernandez et al., 2008). According to Orgocka (2004), educating sex to children can be hindered by mother's uneasiness, lack of information and a fear of undermining the mother-daughter relationship. These types of responses created a consistent theme throughout the data, where most of the participants regularly stated that they received no home and formal support for sex education, whilst also describing experiences of various means currently accessed such as advice from peers and family members. In this way, we might understand the contradictory responses that many participants presented, as both a reflection of the expectations of being a Muslim and a presentation of the lived circumstances of the social reality of youth in modern times.

8.5 EXPLORING BRUNEIAN POSITIVE AND NEGATIVE ATTITUDES AND PERCEPTIONS OF SEX AND RELATIONSHIP EDUCATION

The previous section explored the complexities of accessing sex knowledge among Muslim youth. Subsequently, it can be argued that the country provision of sexual health knowledge is only available to the respondents in minimal approach. Here, the possible positive and negative consequences of accessing to SRE are explored. Much existing literature has mapped the ways in which Muslim youths often face barriers to accessing sexual health and services. These studies tend to suggest that religiously and culturally inappropriate education prevent access to sexual health information (e.g Sanjakdar, 2008; Al-Dien, 2010). The findings in this study proves this body of knowledge in that respondents generally reported negative experiences of accessing sexual health knowledge. Furthermore, these negative encounters can be interpreted as being due to general incompetence of some professionals, rather than due to being Muslim.

Additionally, some respondents were reported being complacent with making alternative arrangements if education facilities were unable to provide for religious and cultural requirements of SRE. For instance, attending religious talks and participating in youth camp and NGOs that deliver information about sexual health. This section identifies and addresses opportunities for and challenges for Sex and Relationship

Education in Brunei. Firstly, given the intention to focus on the potential role of sex education, young people were asked about perceptions of this aspect of SRE. A young boy views SRE as a useful tool to share among inexperienced young people and can be applied for their future relationship: 'It is appropriate to have SRE in Brunei, because some people are probably 'noob[50]' at this and it might be useful for them in the future. If I have a wife, maybe.' **(Respondent FF, 15 years old)**.

In their responses, participants traced the benefit of SRE is to reduce the rise of teenage pregnancies and increase attention on the sexual process of sex rather than on the biological part only:

> I think I would be good to introduce Sex and Relationship Education (SRE) in schools considering there is rise in teenage pregnancies in recent years. I also think the SRE should highlight about the process of sexual intimacy process such as the 'erotic' part itself rather than focusing too much on the scientific part. This is because I think what I learned in Biology classes does not really apply in real life. **(Respondent Q, Female, 21 years old)**.

Another university student realised the importance of having SRE in school is to give the young people a form of formal and reliable education about sex:

> There are so many young people who are sexually-active nowadays, it is probably because they are lack of this education. They are more open to unreliable resources such as the internet and they are easily influenced by it. Sexual activity from the internet may look fun, but they may not learn the [bad] consequences out of it. **(Respondent MR, Female, 22 years old)**.

Although the main thrust of this section argues that the respondents in the study positively viewed SRE, some also presented negative accounts. Respondent MR was echoed by many of the young people in the study, who complained about the aspects of SRE, but did not attribute this to discrimination of school-based sex education that they experienced during their school years. For example, Respondent T speaks about his friends' pre-marital sexual activity argued that when learning SRE, religious affiliation was an issue:

> SRE is a sensitive education. It often relates with sexual activity between a male and a female. It is sensitive because this is a Muslim country and

[50] Noobs *(colloquial language)* means someone who is lacking knowledge or experience in sexual activity.

> it is feared that it will lead to Zina, which is forbidden for all Muslims. Our Muslim society does not accept zina. **(Respondent T, Adolescent girl, 21 years old).**

I come to realise that SRE can become a controversial subject for students who are adhering to their values, cultures and religions as there are differences among cultures and Islamic beliefs regarding sex and relationship. In contrast, Respondent Q who concerns about the rise of teen pregnancy among Bruneian teen Muslims argued that religion does not factor into experiences of SRE:

> I do not really associate Islam with SRE. For instance, it doesn't really matter if that person is a Muslim or not because at the end of the day it is an individual choice whether to have sex or not. **(Respondent Q, Adolescent Girl, 21 years old)**

She continued by describing the alarming increase in 'baby dumping' cases in Brunei in the recent years, including teenage pregnancy: 'should be the catalyst to introduce SRE in Brunei despite being an Islamic country which forbids sex before marriage'. **(Respondent Q, Female, 21 years old).** When some respondents mentioned religious or cultural aspects of their experience with biological sex education, they occasionally referred to Munakahat which is taught in Bruneian Religious Schools.

Another participant describes that SRE brought considerations of the young people's abilities to apply the knowledge, in a good or bad way:

> I'll be neutral. To agree is to give young people the chance to apply the knowledge. If we introduce it too early, they may try it. But if I were to disagree, I'm afraid that this might be a useful knowledge which can be good for them too. **(Respondent FF, Male, 15 years old)**.

Respondent Q who was concerned with non co-ed sex education explained that: 'it was quite embarrassing to discuss about these issues at times as our class was a mix of both girls and boys' **(Respondent Q, Female, 22 years old)**. This suggested that the respondent thought that separating boys and girls have the likelihood of improving better understanding of sex education. At present, there is no separation of gender in sex education particularly in non co-ed public schools in Brunei. Similarly, a respondent also figured that the educators must be gender-separated as well. For instance Respondent FN explained that: 'As my Biology teacher was a guy, he often uses videos and film [secondary sources] during SRE rather than explaining it in

person.' **(Respondent FH, Male, 26 years old)**. This finding reveals that sex education may seem like a demanding subject and require absence of the opposite sex, in order to gain success. Experts on both sides of the issue weighed in their arguments to separate boys and girls in sex education to optimizing single gender in sex education.

The previous discussions explored how the young people generally presented positive accounts of SRE. Negative accounts were perceived as religious and cultural sensitivity rather than being the result of misuse of SRE information. Furthermore, young people in this study reported that they were satisfied with making alternative adaptations if SRE were unable to provide religiously and culturally appropriate education for young people. These findings echoed the professionals' account which was discussed previously **(See Chapter 4 and 5 for discussions)**. Here, most of the respondents regularly argued that their religious and cultural needs would not be met. Consequently, this will not meet the national curriculum development's requirement, which resulted in mistrust and unnecessary attention from parents and general public.

Despite the usefulness of sex education programs study, a religious university student rejects the idea of introducing SRE in Brunei because she believed that it is parents' role to educate their children about sex:

> If this sex education is going to be proposed in the education system, I don't the Government will want it to happen. Our country is an MIB country. It's hard. It's the parents' responsibilities to educate sex. Parents know better about sex but they have to lead this discussion to a better path, not to leave their children astray. **(Respondent VV, Female, 21 years old)**.

Some of the contents of these programs were perceived problematic for Muslims adolescent in the study and the complexity of gender issues may arise. A young boy commented:

> Some of the teachers may not be happy teaching the contents of SRE because it is kind of weird to teach it in school. There will also be gender problem like female teachers teaching male students. It is going to be hard to do it. **(Respondent FF, Male, 15 years old)**.

The findings above address some of the key things that are significant for wider implications of the findings. This will be further discussed in Chapter 8.

8.6 CHAPTER SUMMARY

Evidence from this study suggests that there are few Bruneian young people receive sex education from parents, and the main resources for sex usually related to peers and internet. Apart from those, the young people in this study also gain sexual related knowledge from peers, religious classes, teachers and pornography. This analysis reveals that media and peers often become influential for obtaining sexual related knowledge. A key finding is that young girls and boys use similar information sources. All young people who took part in my study have a high awareness of sexual information, mostly through internet and peers. However, the impact of the internet generally media have been frequently pointed by the respondents in influencing students' understanding of sex and sexual health. They are also aware of the sexual consequences such as pregnancy and teenage marriage. The findings also indicate that Bruneian youth are not equipped with adequate information on sex particularly on the contraceptive use and pregnancies. The role of relationship activities determines a healthy or unhealthy relationship. Some of the respondents in this study view that adolescent's romantic relationships that involve sex as 'unhealthy'. Many among the respondents tend to define the norms of sex in relationship is between heterosexual spouses to reproduce.

CHAPTER 9

CONCLUSION AND RECOMMENDATIONS

9.0 CHAPTER OVERVIEW

This thesis set out to explore the cultural and religious barriers of setting up a Sex and Relationship programme as perceived and negotiated in Brunei Darussalam, a Muslim country. More specifically, it sought to document the respondents' accounts, and identify patterns that contributed to an understanding of how a Muslim country should significantly shape a SRE curriculum. The thesis focuses on how Malay culture and Islamic religious beliefs, within Muslim customary and practice, were constructed as a way of providing support on a controversial subject and emphasis on spiritual significance to the teaching and learning of SRE. Additionally, it explored the challenges that may impact the implementation of SRE, which distinguish the advantages and disadvantages of SRE in a Muslim country. Consequently, it revealed how health sectors and a non-government sector were generally positive towards SRE, however difficulties arose in the uptake of public education and religious education, primarily due to the threat that are posed to the reputation and dignity of Muslim individuals especially within Muslim family context. This chapter concludes the study by drawing conclusions based on the findings and discussions.

I had initiated a study to explore whether both education and health systems would foresee a future plan or accelerate all possible strategic options for Bruneian children to experience SRE. This research aimed to examine what positive and negative perceptions that Bruneian have towards SRE and how each Bruneian differed in their views. At the beginning of this thesis, I gave a brief introduction of the complex nature of Brunei as a Muslim country to employ a more comprehensive sex education. The angle of this research was geared towards understanding the perceptions that the Bruneian people have in order to consider the desired climatic influences that are more acceptable to the country that practices Sharia' Law. Of the particular concern was that some of the respondents in this study had the need to incorporate the national philosophy, Malay Islamic Monarchy into Sex and Relationship Education. There were several important pointers that Sharia' Law could potentially have a positive effect on SRE. Since it is established that Brunei Government is fully governed by an absolute

monarch, this thesis aimed to determine Bruneian people's perceptions of SRE and how a Muslim country would be affected by its execution.

I focused on studying the perceptions of two main target groups: teachers including other key informants and young people on what these stakeholders perceived on the challenges of integrating SRE curriculum which is more comprehensive in public schools. To answer the research questions, I employed semi-structured interviews to obtain qualitative data.

In **Chapter 5**, my analysis revealed several issues that are relevant for the design of future sex education programs targeting Muslim youth in Brunei Darussalam. Apart from some expected outcomes regarding, for example, taboos on sexuality, sex outside marriage, stigmatising young people and children outside wedlock, homosexuality and gender roles, my analyses show that in cases of difference of opinions 1) respondents used Quranic verses and the Prophet's traditions to support their views, 2) discussions were polarised along with this was believing that sex education will not be introduced in Brunei and 3) the authorities of the Ministry of Education and Ministry of Religious Affairs (MoRA) were either questioned or emphasised by the participants to take responsibility in combating perceived social problems in the country.

In **Chapter 6**, the most interesting finding of this chapter was the positive perceptions of the key informants towards SRE. The themes include, perceiving SRE as a weapon to aid young people, perceiving SRE can help young people to identify and report sexual abuse, and, finally, the responsibility and gender inequalities are also studied. The roles of the NGOs are also explored, providing positive accounts of accessing sexual-health related information through NGO.

In **Chapter 7**, it discusses the key informants' perceptions towards the ideological and religious resistance of SRE. Available evidence suggests that moral and civic etiquette is important to be integrated in SRE. Relationship is further discussed; firstly, relationship is undertaking faithfulness which is dependent upon a religious belief which affects the individual's relationship with God. Secondly, perceptions about sex-abstinence before marriage were substantially not different from abstaining infidelity in matrimony.

Chapter 8, the young people give their opinions about sex and relationship. The role of 'sex' and 'relationship' in young people's lives were explored. Whilst the young people perceived that sex is only permissible within marriage institution, some of the respondents view that sex is a pleasurable act to strengthen human bonding. This research is further extended on studying how faith interconnected with SRE among Bruneian Muslims. This shows that there is a personal openness toward dating and romantic relationships among Muslim youth, however stronger religious identification indicate that less intimacy is expected in Muslim dating or courtship. Healthy relationship is usually connected with faith and cultural identities and this is clearly shown in the responses. However, some of the findings may not be congruent with the social reality of Muslim youth nowadays. Furthermore, abuse is regarded as the breakdown of the healthy relationship and a contributing factor to what the respondents perceived to be the decline of religious faith.

Chapter 9 presents the reflections on study which include the curriculum development including how SRE is framed and what contents should be imparted to Bruneian Malay Muslims, the development of culturally and religiously appropriate space including delivery methods and resources; and provisions for trainings, both for educators and young people. The second section of chapter 8 evaluates the methodology employed in this study. This study presents the limitations of the methodology used and refers to the critical reflections of the qualitative method and the appropriateness of the methodology to answer the main research question is also further discussed. It also suggests further recommendations for research in the future.

9.1 REFLECTIONS ON STUDY

The reflections on this study will be divided into two sub-sections. The first section will be focusing on the cultural contexts and the second section will reflect on the pedagogical implications for SRE based on the discussions in this research.

In this study, I have reviewed and analysed some of the potential aspects of the desired climatic influences that can support the implementation of setting up a SRE in Brunei. I also found that SRE is a subject which requires design, planning and quality performance factors from teachers for young people. Access to SRE for British Muslim minorities was reported to be particularly challenging for studies made by Halstead

and Reiss (2003), in that the respondents were challenged and contradicted core aspects of the parental religious and cultural identities. Similarly, in response to this study, participants regularly described certain sex education as mixed-gender and 'filtered'. British Muslim for Secular Democracy (2010) outlined a brief guidance for sex education where Muslim children are encourage to receive sex education from a reliable resource so that adolescent children will not be alienated from talking about sex. This guidance also addresses a well-known Prophetic tradition that 'there is no shame in talking about sex' (BMSD, 2010:11). In European country, for instance in the Netherlands (Weaver et al., 2005), over time the perpetual debate between 'sex' and 'religion' was settled in favour of meeting human needs for sex education and sexual health services taking precedence over faith. While much of the non-contemporary Islamic world has taken the opposite view, there is a growing tendency amongst Muslims minorities in the USA and Australia has been receiving sex education (See Al-Dien, 2010; Sanjakdar, 2008).

9.1.1 Cultural Contexts

9.1.1.1 Cultural concept of teenage pregnancy and teenage marriage

Most of the respondents in this study were under the impression that teenage pregnancies are rocketing. But over the past 5 years, the rates have been decreasing in Brunei. However, it is still a pervasive issue in the media, that teenage pregnancy is identified as a social problem. The argument whether teenage pregnancy is a public health problem or a social issue has concentrated more on the important issues, such as the wide range of consequent adverse health and social outcomes (Harden et al., 2009). However, it was argued that the current "crisis" discourse fails to recognise the real problem of childbearing patterns as responses to poverty and limited opportunity in education and employment (Jimenez, 2012). Instead, it attributes teen pregnancy to individual problem which results in the creation of social exclusion policy. In particular, attention is paid to a hitherto neglected aspect of the social construction of teenage pregnancy. Thus, of course, teenage pregnancy issues remain on the agenda and can be further pursued here. However, the emergence of such issue in this context serves to highlight a theme central to the present thesis.

This study also reflects some of the selected practice in the field which suggests the current practice of SRE relates to less sensitivity to cultural differences and religion (as discussed in Chapter 2). This study implies that failure to recognise religious and culture dimensions creates conflicts between parents and schools, values, religious teachings and peer knowledge and values (Halstead and Reiss, 2003). The cultural concept of teenage pregnancy and marriage in relation to Malay-Muslims engaged in the theme of shame and concept of 'face'. One striking cultural influence in participants' responses is the concept of face or 'water face' which is significant among the Bruneian people or Malay culture generally. One should not drop the 'water face' of others (Hanizah Zainuddin and A. Moore, 2003) and the role of face reflects sustaining good manners, politeness, dignity and honour. In my argument, the customary practice of uniting pregnant teenagers into marriage is perceived to be a breakdown of Muslim family values on marriage. This is due to parental involvements usually force young people to assume responsibilities when they are not ready emotionally and financially. This shows the complexity of how Bruneian moral self around marriage is perplexed by customary practice which is considered as a blurry line between religion and culture. As the respondents were generally not experienced in SRE, some of the respondents perceived SRE negatively, thus the conceptual theme of 'taboo' does emerge here. Additionally, the vast majority of the respondents view that teenage marriage due to teenage pregnancy is problematic for Malay-Muslim family values. Assuming religious responsibilities are essential for Muslims before committing to a marriage, whereas marriage due to Zina (adultery) only proves that they are not ready to assume that 'religious' responsibilities yet. Customary practice of marriage due to Zina seems to suggest that there is a breakdown of Muslim values as they rather chose to maintain face for the cause of marriage than being obedient to God.

9.1.1.2 Gendered perceptions

The study reflected in Chapter 5 shows that Bruneian young girls are not protected from gender inequality which may put them in a drawback position. Gendered perceptions of how sex education should be taught within the Muslims were supported by accounts of studies. As such, the participants suggested that sex education should be carried out by women and supported by female teachers for female students. The young respondents in this study were asked to explain a typical school-based sex education that they experienced. This question was designed to elicit how teachings were negotiated and performed on a current basis of sex education. Responses to this question revealed that the female teachers in the study reported undertaking the sex education for mixed-genders. Similarly, the male participants in the study also described how sex education was carried out by male teachers in non co-ed schools. In this way, male teachers seemed to prefer teaching with the absence of female students within the provided biological sex education.

Sanjakdar (2013) and Smith et al. (2003) gendered views about the delivery of SRE were echoed by many of the respondents in the study and presented a dominant theme within the data. Additionally, religious beliefs and cultural values seemed to provide an explanation to these gendered perceptions. The underpinning of gendered divisions of teaching and learning of SRE through the support of religious beliefs was also studied by Yip (2010) in his/her examination of gender and space. In this thesis, the finding seems to suggest that cultural norm under Islam will be more likely to reinforce gendered divisions of teaching and learning of SRE. For instance, female teachers are embedded within the female students and the vice versa.

9.1.1.3 The issue of condom-use in Muslim communities

Young people perceptions and attitudes of experiencing sex education were primarily dependent upon two factors. Firstly significant similarities emerged in the youth's perceptions about school-based sex education. Respondents generally expressed few concerns about limited sexual health knowledge; however, biological science is often seen to be SRE. Additionally, in light of these discussions with young people, I have established the understanding on the current patterns of sexual behaviours and the reproductive health status of Bruneian youth. It is learned that a proportion of students in this study are receiving sex instruction only about abstinence.

In Brunei, young people receive very limited SRE through the formal school. The study has shown that young people lack the basic information of SRE topics and often receive information from unreliable resources that may be misleading and inaccurate. This is corresponding to studies made by Wahba and Roudi-Fahimi (2012); Smarecnik et al. (2010). This study also shows that the young people's parents do not provide information of sexual-health related at home. Condom use is also perceived by some of the respondents not safe. A key finding is that young girls and boys use similar information sources including websites, movies and peers. All young people who took part in my study have somewhat low awareness of sexual information, mostly through biology class, internet, family and peers.

The relative fluidity of this research creates a space for sensitive issues to be raised that might be perceived by some of the respondents to be non-feasible for a Brunei Islamic environment and settings. The findings indicate that teachers have to deal with the challenges of delivering sexual facts including contraceptives. Furthermore, to some respondents giving youths the tools to have 'safe' premarital sex is contrary to Islam and Muslim code of behaviour. As studied by Orgocka (2004:256), parents perceived that SRE classes particularly challenge transmission of Islamic values to young girls by teaching them to conceptualizing decision-making regarding sexual behaviour as a personal choice rather than a family matter. Condom use raised a social concern by the respondents in this research, as this approach is developed to prevent young people from getting pregnant and getting sexual-related diseases. This initiative purports for encouraging young people to make their own decisions and defeats the purpose of abstinence altogether. As a result, most Muslim parents object to their children participating in sex education classes (Halstead, 1997). However, it can be suggested that mentioning 'safe sex' within the curricula can be a model for imparting balance values, knowledge, information and skills and attitudes. According to Smith et al (2003:12), the concept of ABC of sex (**A**bstinence, **B**e faithful and **C**ondom) promotes condom as the 'last resort' rather than an alternative equivalent to abstinence and fidelity.

Evidence suggests that some of the young respondents engage in sex with limited condom use. Each year there is approximately 388 births recorded of children conceived outside wedlock. Although teenage pregnancy and birth have declined in

recent years, teenage pregnancy and parenthood lead to significant personal, social and economic consequences. The school exclusion policy in Brunei may also make pregnant teenagers, including male to experience lower education attainment and higher rates of adolescent childbearing.

9.1.2 Pedagogical Contexts

9.1.2.1 The complexity of challenges: Integrating Islam in SRE

There are existing debates of the nature of Islam by many scholars, educators, journalists and policymakers (Moore, 2006:279), however there are no conflicting views regarding Islam in Brunei, unlike in many parts of Muslims countries in the world such as the constant conflict in the Middle East and other regions that have created a strong and international debate regarding the nature of Islam. In Brunei, Islam constitutes the counterparts of the national ideology and it defines the country's system in managing the government organisations (Blomqvist, 1998).

This study sheds light on the religious involvement in SRE. The findings seem to suggest that the consensus within government agencies will likely to promote SRE while preserving Islam and Malay culture. A cluster of intellectual professions have challenged the position of SRE within Islamic context. The qualitative results from this research also found that the feeling of less urgency to implement SRE in Brunei is due to a small number of teenage pregnancy and STIs cases. This altogether reduces the level of receptivity among the key informants towards SRE. This enquires for educational reform for school-based SRE in Brunei. According to Gerouki (2008:330), 'the main objective of educational reforms is to create teaching and learning standards that will promote higher levels of knowledge and cultivate the skills that students will need to develop most fully.' The previous chapter investigated and assessed multiple agencies in supporting Bruneian youth with teenage pregnancy and STIs including HIV/AIDS. The findings suggest that provisions for cultural and religious appropriate space will be more likely to engage the policy makers to Sex and Relationship Education (hereafter, SRE). This is mainly because cultural and religious barriers discussed in the study revealed several issues that require considerations for a relevant design of future SRE policy and practice targeting Bruneian Muslims youth.

For instance, majority of the respondents disagreed that sex should be encouraged through the promotion of 'safe' sex.

The supporters of this research may advocate for educational reform as some of the respondents argued there is a need to meet the demands of a sexualised[51] society which brought changes to Malay-Muslim values especially towards sex and relationship. The supporters argued in response to the worrying trends of the reality of teenage pregnancy which put the young people at the margins of underprivileged. This may create for the need to sustain their financial support and social welfare by Brunei Government. As discussed by some of the respondents, reforms were initiated by some policy makers on ministerial levels and non-government organisations; however decisions are made based on the directives of the Ministry of Education and Ministry of Religious Affairs.

In my study, some of the respondents disagree to introduce sex education, given the widespread sensitivities of delivering sex education which is perceived to be a Westernised education and it is very crucial of the subject matter being integrated with the country's philosophy – Malay Islamic Monarchy. Contrary to my study, this research is intended to contribute to a greater development of documenting and analysing the extent of attention paid to SRE in a Muslim state.

My interpretation of these in regard to this study totally eliminates the negativity of perceiving Muslim states are all alike. This is owing to the fact that one Islamic state's political structure may be distinctive than others. The political nature of Brunei is based on the national philosophy, Malay Islamic Monarchy which may pose certain complexities in implementations due to religious beliefs that contravene with certain aspects of SRE (as discussed in Chapter 2, Chapter 4 and Chapter 6). Additionally, promoting core values is one of the vital factors to effective SRE Programmes that enable the young people to identify and reflect on their own values including their peers (NCB, 2010). This will be likely to be reflected in Brunei's unique SRE. As supported by Al-Dien (2010) and Sanjakdar (2009), the decision to adopt Sex and Relationship Education that is significantly unique to one's country must aim at creating a multi-ethnic and religiosity that is addressing the individual or minority

[51] There is a growing concerns about 'sexualisation' that has changed the society to be more 'pornified' or 'sexualised'.

beliefs, values and faiths. Consequently, the type of SRE that Brunei is likely to employ is Abstinence-Plus Education[52].

9.1.2.2 Existing state of readiness for SRE in Brunei

One of the findings in this study reflects the existing level of readiness for SRE among the key informants involved in this study. It is concluded that the state's readiness can be incrementally developed towards improvement success, however, the contextual conditions need to be addressed and well-tailored. A number of themes recur throughout this study which includes occupational roles interlinked with religious beliefs and national philosophy, cultural concept of teenage pregnancy and teenage marriage and provisions of culturally and religiously appropriate for SRE in a Muslim country. All of these are original contributions to the current body of knowledge.

According to Dalton and Gottlieb (2003), the desire to change can determine the degree of readiness. For this study, readiness concept is defined as a multi-level construct which either can be positive or negative depending on the influence of the organisation and the climate for improvement. This study has examined readiness, associated factors and the resulting consequences to attitudes towards SRE. The concept of readiness was inductively derived through a number of factors. The factors include when these are triggered: (a) the respondents perceive that premarital sex and teenage pregnancy as a social concern, (b) a change in Brunei's compliance to Sharia' and Compulsory Religious Education takes on new significance on the country's motivation to adopt SRE, (c) respondents perceive that they have inadequate support in undertaking and developing change. When one or more of these factors is present, the respondents become not ready to consider SRE. The process of readiness involves recognising the need to change, weighing the advantages and disadvantages of SRE. The responses from the participants in this study have also suggested to take actions.

[52] Abstinence-Plus Education is employed in the U.S.A.

9.1.2.3 Occupational roles interlinked with religious beliefs and national philosophy

The research findings recognised the state of readiness for SRE establishment, most of the respondents feel compliant and not ready to support improvements, expressing their awareness of their professional roles with the obligation of adhering towards the national philosophy: Malay Islamic Monarchy **(refer to Chapter 8 section 1.3)**. The government officials expressed the feeling of the urgency to support and reduce the number of teenage pregnancy cases among Brunei teenagers, which altogether recounts for pre-marital and risky sexual behaviours among young people which are forbidden in Islamic teachings. This can be speculated that the government to inaugurate contemporary SRE is due to Brunei's low number of teenage pregnancy cases and there is no significance of introducing the social aspects of SRE.

From the discussions ensued in the previous chapters, it showed that firstly, the importance of religion or being Muslim for the professionals is explored. Here, the respondents present the complex interlink of their identities as professionals and as Muslims. This discussion provides a basis of understanding for the preceding discussions, whereby Sanjakdar (2008) supported that the role of religiosity is applied to how the professionals in the study pursued the topic being explored. The analysis shown that the complexity of culture and religion were hard to separate, which the respondents' perceptions were mostly based on the construction of Brunei's national philosophy: *Melayu Islam Beraja* (Malay Islamic Monarchy). These discussions are somehow applied to how Bruneian Muslims in the study provided religious and cultural explanation for Sex and Relationship Education among Bruneian youth. This analysis reveals the complexity of religious beliefs within SRE, which were based on popular Muslims theology. This altogether calls for adapted and reconstructed implications for practice to relieve the nations' circumstances.

Subsequently, religious belief often interconnected with the respondents' everyday lives and working performances. For instance in Chapter 6, it reveals the philosophy's significance was attached to their own professions, in which the respondents would often serve as an obligation to their working role. This analysis reveals the connotation of being a Muslim can extensively influence and construct the respondents' perceptions of SRE. Similarly, on a general level majority of the respondents

presented the connotation of upholding to the country's philosophy, Malay Islamic Monarchy creates and set for cultural and religious expectations which impacted on how the respondents' perceived and experienced sexual health education.

This altogether creates for an original contribution of knowledge because documenting findings on roles of government agencies as done by this research is important as such information could be missing or unremembered if not well-archived. The findings have revealed some similarities among the practical and occupational skills associated with the perceived roles of the teachers, which the majority of the respondents said should be integrated within the formal school curriculum.

This study also revealed that each profession has its own agenda in contributing the establishment of SRE in Brunei. The distinctive roles of the profession are investigated which allows for a more depth understanding of how each profession constructed their ideas and perceptions to support the specific needs of Muslim youth and students in the country, in regard to Sex and Relationship Education. Their accounts (as discussed in Chapter 4 and 5) provide further strengths to some of the arguments discussed, and the primary focus is to study the respondents' perceptions pertaining to their working professions. As such, the professionals' voices within this research are explored and connected to their access to their experience of formal and informal support in sexuality education and reproductive health in the country.

A table is presented below, which maps for the key informants' occupational roles interlinked with Islam and Malay culture as a national identity, hence affecting their overall responses in the study. The study shows the respondents' religious beliefs are interconnected with their everyday life practices.

Faith/Religion of Respondent	Sample Number	Percentage %
Born Muslim	25	89.3%
Newly Convert to Islam	2	7.1%
Non-Muslim	1	3.6%

Table 6: Occupational Roles Interlinked with Islam and Malay Culture

The respondents regularly spoke about how their roles took on devotional aspects as a form of worship to the Only God, Allah. Furthermore, Brunei is embedded with Malay Islamic Monarchy (also known as MIB in Malay language). Some respondents in the study echoed these concerns, describing how their working roles encourage them to fulfil expected Muslim religious practices such as becoming good community or Muslim parents. However, a significant theme revealed from the data is that the respondents often viewed that their working roles are a form of worship to perform the commandment of Allah. Consequently, the respondents felt that there is the need to carry out the duty of a Muslim as part of religion's obligations (Buckman, 2011). These findings echoed by Pe-Pua et al. studies (2010), those in the community members particularly those who hold key roles and in ethnic community organisations feel there is an urgency to maintain cultural heritage and identity and incorporate it with the mainstream services. At the end of this chapter, we will determine if any of the professions opt for alternatives that will help SRE to achieve its place in Brunei Government system, if it is in the best concern of the key informants, or whether it is best for SRE to remain on its current path, in which does not require any transformative journey. Consequently, in light of the above findings, it is complex to gauge how much impetus there is in Brunei for harmonisation, even at the time this subject is explored. Harmonisation in this context brings together approaches, views, expertise and experiences for building a SRE programme for Bruneian young people (for instance, Sex Education Forum, 2008b; Brook, 2010; DfEE UK, 2000). In other words, harmonisation within the key informants can be achieved by establishing conformity regarding the mechanisms and practices of SRE to ensure cultural and religious preservation. The findings do, however indicate that there is a clear support among some of the key informants for harmonisation among the government agencies and non-government organisations. The lack of readiness of the government agencies may affect such harmonisation and hamper the goals to achieve for establishing SRE in the country.

9.1.2.4 The desired climatic influences for SRE in Brunei

The factors that influence the desired climate for SRE are derived from the findings in this study. Evidence shows that provisions of SRE activities in a religiously and culturally appropriate space are more likely to be accepted. *As suggested by Mitchell

(2014:9), SRE cannot be separated from values whether it is liberal or conservative, religious or non-religious. The results of this study have identified the four main key areas that represent the key aspects of SRE in Brunei. The following sections explain the desired climatic factors that represent the key aspects of SRE in Brunei as a country that is adhering to Islam and compliant with the Sharia' Law.

a. How to frame SRE?

Reflecting on my study, the discussions generally recognised SRE as a primary source of information about sexual reproduction. The taboos surrounding sex and teenage pregnancy seem to cover a wider range of social and moral principles of Muslims people. To the majority of the key informants, the suitability of SRE in Brunei is determined by its ability to guarantee reproductive health education in public schools that promotes the teachings of Islam and Malay traditions.

In the absence of adequate SRE, children would seek sexual related information they need from popular media and peers which is questionable for its reliability and quality (Halstead and Reiss, 2003). This finding is corresponding to this study where majority of young people would seek information from pornography and experience of their peers and family members. As issues are addressed in this study, an innovative aspect of SRE can be developed to enable supports and minimise negative attitudes towards the curriculum. The dominant arguments encircle the implications of sex education for the lives of the young people who are deprived of the information which according to some of the respondents, SRE will only encourage for sexual experimentation. Therefore, it is important to negotiate the core aspects of *Melayu Islam Beraja* (hereafter MIB, or better known as Malay Islamic Monarchy in English language) to negate the line of arguments that do not favour the implementation of sex education for secondary schools or even earlier. The provisions of SRE in Brunei will acknowledge compatibility, similarity, asymmetry and continuity between the religious school curriculum of *Munakahat* and biological facts of reproductive health. As part of topics that are suitable for an Islamic sex education, solid evidence is taken from the Quran and Hadith (Prophetic traditions).

Topics that are widely addressed in Islamic schools as studied by Bennett (2007) include interpretations of Zina (adultery); sexual consent, the right of marriage and divorce; men and women rights in relation to polygamy; obligations in marriage; rights

to conception, family planning and abortions. Whereas the biological and scientific based information such as puberty, conception, child birth and pre and post natal care can be taught in a manner that reinforces Islamic family values and mothers position and roles in the family. Some of the contents taught in SRE contravene with culture and religion in which these disagreements are reflected by Bennett (2007), Sanjakdar (2009), Helleve et al. (2009) and Al-Dien (2010), Additionally, as suggested by Reiss (2003), a value framework of SRE would likely to promote the core values that enable young people to identify and reflect on their own values including their peers (Sex Education Forum, 2010a).

The international sexuality education models often use scientific and biological information to change the sexual behaviours of the population (Philpott et al., 2006). However, this assumption should be avoided because although sexuality education is intended to provide information and knowledge as illustrated in many studies (Oshi and Nakalema, 2005; Wells, 2009) but it is not significantly lowering down sexual activities among the youths and lower down the unwanted pregnancies, early incidences of teenage marriages and abortions rates to those who receive them.

b. Developing curriculum title and contents based on local sensitivities

At the beginning of the interview, the researcher has asked the participants' about their understandings of SRE. There are certain aspects of sex education that appear to the participants to be contradicting with the Malay culture and Islamic teachings. They seem to object sex education due to: 1) issues of the sex title and how it may interfere with the young people's thinking on constantly associating the word sex with the actions, 2) condemn the use of contraception such as promoting condom use instead of abstinence and 3) sex education contravenes with the Islamic teaching and becomes a reasonable target for Muslims disagreement of participating in sex education (Halstead, 1997). It is also interesting to note that their responses to the first question shape their next responses or for the whole interviews. These perceptions suggest that Muslims in Brunei do not tolerate with contemporary sex education which most of them find it unacceptable in most majority Muslim society.

The possible solution to the above findings is to change the word 'sex' because it is considered inappropriate for many Muslims society and Eastern culture. One respondent gave the suggestion to use 'Reproductive Health' Education to adjust to

Brunei's religion and culture. The term 'sex education' has been misled by some Muslim communities and often seen as a subject that contains liberated morality (Al-Dien, 2010). Most of the respondents suggested replacing sex education or SRE into 'Reproductive Health' as it is more suitable for the complex nature of Brunei. Each government across the regions has used different terms for sexuality education as it may reflect their national ideologies (Parker et al., 2009). It is also similar for countries in South East Asia such as Thailand, Vietnam, Indonesia and Mongolia, sex education is usually discussed in social terms and by reference to 'the family' (Smith et al., 2003). This is respected due to cultural values because the word 'sex' may create images of sexual intercourse simply as a narrow definition (Rolston et al., 2005) and certain public, community or organization has different definition of sex education.

In some countries, the adoption of the term 'Living Together' is used in Netherlands whiles 'the family' term is used in Thailand, Vietnam and Indonesia. In many countries, the sexuality education is biological facts and time-tabled in biology lessons (Smith et al., 2003; Parker et al., 2009). However, developed countries such as Netherlands, France and the United Kingdom implement contemporary sex education that covers wide range of topics from reproductive biology, sexual health such as STI's, sexual identity, sexual behaviour, gender issues and interpersonal relationships (Weaver et al., 2005). As a consequence, school-based SRE in Brunei requires 'to recognize and respect the reality, diversity and cultural specificity of student experiences in the classroom, including the needs of appropriate sex education for Muslim students.' (Al-Dien, 2010: 398).

When looking at sex concepts of Muslims, it is a building debates around the contents of sex knowledge that are not suitable for Muslims such as teaching sexual relationships outside lawful marriage, contraception outside marriage, sexual acts that are not permitted in Islam such as oral sex, anal sex, masturbation and masochistic that challenge the Islamic concept of sex (Bennett, 2007). In Islam, sex is only within the context of marriage as it is seen as a religious duty (Halstead, 1997) in order to maintain the ongoing process of god's creation – sexual duality that is male and female (Halstead and Reiss, 2003).

The studies made by Halstead (1997), Sanjakdar (2009) and Al-Dien (2010) as exemplar cases which can be related to my study. All studies call for culturally

appropriate sexual health education curricula despite the cultural and ethnic diversification of the countries. There are certain aspects of SRE that appear to the participants to be contradicting with the Malay culture and Islamic teachings. They seem to object to sex education due to issues of the sex title and how it may interfere with the young people's thinking on constantly associating the word sex with the physical attributes such as the internal reproductive structures. Based on a religious teacher's experience who taught Year 6 in religious classes, she stated that 'teachers cannot be too described about sex or reproductive systems, for example explaining about *'faraj'* (vagina) and *'zakar'* (penis) because it is feared that the youth will envision it.' This is because in Islam, anything that leads to wrong is considered as wrong (Athar, 1996).

The findings have suggested an ideal curriculum for sex education in Brunei should include:

a) the Islamic Laws on Zina (adultery) and the social consequences of Zina such as untimely pregnancy and birth outside wedlock,
b) biological, physiological and psychological aspects of Sex Education,
c) family roles and responsibilities (relationships),
d) incest (relationships),
e) marriage (relationships),
f) self-empowerment
g) Sexually Transmitted Diseases and put emphasis more on the Islamic perspectives,
h) puberty, and
i) moral, religious and social values of sex.

Based on the discussions, the most unlikely topics that will not be included in Brunei's sex education are:

a) Homosexuality, even though there are some students who are supportive of it,
b) Contraceptive methods such as condom-use
c) Sexual Pleasure including masturbation

As part of topics that are suitable for an Islamic sex education, solid evidence is taken from the Quran and Hadith[53]. Promoting core values is one of the vital factors to effective SRE Programmes that enable the young people to identify and reflect on their own values including their peers (NCB, 2010). The decision to adopt Sex and Relationship Education that is significantly unique to one's country must aim at creating a multi-ethnic and religiosity that is addressing the individual or minority beliefs, values and faiths (Al-Dien, 2010 and Sanjakdar, 2009).

c. **Revision of School Exclusion Policy to Reduce Long Term Effects of Teenage Pregnancy or Parenthood**

The picture revealed in my study is that the lives of many Bruneian teenage parents and children born outside wedlock are characterised by negative perception which is often associated with discrimination and inappropriate treatment. For instance in the provision of free education and health services for children born outside wedlock, they are likely to be disadvantaged by this social and taboo stigma. In particular, it has been explained by Family Education Trust (2003:3) that girls who are raised and deprived of father's love or unstable family will be more likely to become sexually active at a young age. This is corresponding to a study made by Collins et al. (2002:2), which shown that adolescent girls who become mothers are less likely to complete high school. Revision of school exclusion policy will allow minimising harm and discrimination especially towards pregnant girls. It also allows teenage parents to pursue their studies and reduce unemployment rates in Brunei as low-level education attainment are escalating which make it hard to break the cycle of poverty, divorce rates and breakdown of family values. In Chapter 6, I pointed out that many of the findings regarding the effects of early marriage due to premarital pregnancy suggest that customary practice has major long-term effects on divorce rates. Based in the discussions made in Chapter 2, in Sharia' discourse and academic literature, cultural and religious values of marriage are usually raised separately without reference to one another and with differences of emphasis.

The possibilities of the revision of school exclusion policy can advantage teenage parents as it may reduce the long term effects of teenage pregnancy or parenthood.

[53] A collection of traditions containing sayings of the prophet Muhammad, Peace Be Upon Him (PBUH) from (*en.wikipedia.org/wiki/**Hadith).***

Based on the discussions in Chapter 4.2.1, it shows that the status is not known for the revision of policy, with specific attention being paid to the educational policies for pregnant young girls and teenage parents. This mandatory practice of social exclusion of expecting teenage parents obviously does not give any option for the parents and pregnant teenagers but to comply with it. This finding shows the complexities of Bruneian's conservative nature in regard to pre-marital pregnancy where in most cases, pregnancy outside wedlock is usually viewed as a phenomenon that does not require any intervention by education and the government agencies. The findings further indicate that there are no standard practices for schools in dealing with the reality of pregnant and parenting teens as being pregnant outside wedlock is considered to be a personal problem and has to be dealt by the affected persons. Only in the event of pre-natal, labour and post-natal will the pregnant teenagers seek help for medical advice in governmental health care and services.

Harden et al. (2006) argued that SRE may be important to prepare an individual for adulthood life however it cannot be an effective strategy on its own for teenagers to delay parenthood. According to Policies for Sexuality Education in the European Union (2013), the best practices in sexuality education include the intervention of trained and open minded professionals on a holistic approach. Therefore, effective SRE derived from quality of teaching and the knowledge presented to delay the onset of sexual initiation. According to US Department of Education (2013:3), there are many young people reported that, 'before they became parents, they had been doing reasonably well in school; they also had a strong belief that they could have graduated had they stayed in school.'

9.2 FURTHER RESEARCH AND PRACTICE

9.2.1 Evaluation of methodologies employed

Sex and Relationship Education in Muslim-majority countries remain to be under researched subject. Findings from this study indicate that further investigation is needed if we are to comprehend in depth of how SRE is perceived, performed and negotiated within Muslim country environment. In a classical study by Ward and Taylor (1997), they argued that the immigrants and minority adolescents perceived that school-based sex education is unsuccessful in integrating the reality of sexuality; for instance emotions are framed by cultural values and beliefs that made the instructors insensitive to adolescents' experiences and stereotyping adolescents based upon their culture. This argument is further extended by Al-Dien's (2010) findings which reported that many Muslim individuals in Canada are often overlooked. He perceived that sex education offered in Canadian schools are not characterized by cultural sensitivity to the different needs of adolescents to obtain the information, the Muslim adolescents continue to be understudied within academic literature. As such, this section makes three suggestions for further research and how studies could contribute to the existing body of knowledge.

9.2.2 Investigating the research findings using multiple methods

As research of SRE specifically on Majority-Muslim country is particularly uncommon within academic literature, I recommend that this research should be enhanced to further explore the findings. Furthermore, the limitations that I address within this study could be used to develop the methodological approaches for collecting data. This may be attended in the following ways. Firstly, a larger sample size could make the findings more able to represent Muslims in Brunei. The study could be re-imagined if Muslim parents are involved in the study to obtain their insights of the subject being explored. This study also would be more interesting if pregnant teenagers shared their first-hand experiences of how Bruneian public react to their pregnancies and the services available for them.

9.2.3 Comparative study of other Muslim states in SRE

By researching the perspectives of twenty professionals, whose occupation specifically related to supporting the young people in Brunei, this study was able to gain an inside perspective of the relationship between Muslim young people and their access to education, health and social services. Within this study, the roles of a non-government organisation were understood. However, further research comparing the responses of the services available with Muslim young people may expand a broader perspective of how services are effectively accessed and explored the barriers that can prevent access with other Muslim states will give more insights of improving SRE in Brunei. The study addresses the accounts of negative perceptions presented by both key informants and young people and may be attributed to improve for pedagogical practice. However, exploring other Muslim states' negative perceptions of SRE should also be included as these findings may also be shared by other Muslim.

9.2.4 Future research

Research findings have revealed that the challenging question of how these findings can generate the possible curriculum design of SRE through the many perceived barriers. The barriers include the kind of challenges that need to be met by the teachers, school as a great supporter to SRE and teachers' commitment. Many reasons will be cited by the majority of respondents in the following discussions, and some also be discussed in this section. There are many issues where the school will be particularly sensitive and proper regard should be given to cultural and religious factors, whilst taking into account the range of home backgrounds and values which the young people have.

The challenge future of SRE in Brunei lies in devising a strategic plan that prescribed to the development of an integrated approach from Brunei towards a holistic framework for sexual education. The development of a conceptual framework and model can demonstrate how the country can exhibit how the country can promote SRE in adaptive ways to Brunei complex nature of settings. As argued by Fernandez et al. (2008:188), 'developing and implementing culturally appropriate SRE can be considerable challenge especially in schools where many faiths are represented.' As

a support to this, a finding made by Smith et al. (2003) has clarified Brunei's objection to adopt Sex Education policy:

> "..[S]ex education (or sexual education or sexuality education) in its liberal sense is not taught in any of the topics in the science syllabus developed by the Curriculum Development Department at any level of education in Brunei Darussalam as this is contrary to the teachings of Islam. Sex [education] that explicitly mentioned the [encouragement] use of condoms and other forms of contraceptives including IUDs, sex enhancement devices and drugs including orally taken pills, masturbation, forms of intercourse (oral, anal, vaginal), 'free' sex, multiple partners, exchanging spouses, free intermingle among men and women for pleasure as a pastime, or communal marriage, polyandry, infidelity, the likes of any unnatural forms of sex (including homosexuality and lesbianism) is strongly condemned in Islam. Unlawful and immoral sex practices including premarital sex are all forbidden (haram) in Islam." (Taken from Smith et al., 2003:10)

This section focuses particularly on SRE provision for Bruneian young Muslim and highlights some of the complexities in conveying SRE messages (Fernandez et al., 2008). Becoming aware of the existing programs and resources has been encouraged by many researches (Fawcett et al., 1992). This study can be re-imagined if a completed conceptual framework from the findings of the study is developed in this Chapter.

9.3 FINAL COMMENTS

This research project was originally undertaken with a set of preconceptions about how Malay Muslim in Brunei would experience Sex and Relationship Education in such Islamic settings. The continuing negative highlights on Muslim affairs globally has undoubtedly impacted on non-Muslims' perceptions of Islam as a religion of conservative (Moore, 2006) has led to increased dislikes and prejudice against Islam or Muslims (Buckman, 2011). As discussed, this body of knowledge presents a valuable addition to literature about the experiences of SRE within Muslim communities. However, it is inequitable to assume that Malay-Muslim responses in this study are sufficient to represent conclusions for all Muslim communities. Therefore,

my research places the contribution to the existing knowledge by specifically exploring how being Muslim influences perceptions and negotiations of setting up SRE in a Muslim country.

This study has led to the identification of the existing state of readiness of Brunei for SRE development. The desired climatic influences can be used as a new approach for effective improvements in public schools and non-government organisation. SRE that contains climatic factors is necessary to promote the Bruneians' readiness to support further improvements in reducing the number of teenage pregnancy and sexual-related diseases. Whilst the framework can be tailored according to Brunei's context, its applicability could also be useful in other countries with a similar background.

There is a need for a more comprehensive study that combines the perceptions of the inter-related agencies on the state readiness, its climate and the organisation functions. Four key findings were identified based on the interviews. Firstly, it was found that as a Muslim country, preparation to cope with the issues of unintended climate that is specific to the Brunei context evolves out of the respondents' perceptions of Brunei as a Muslim country and its strict adherence to Malay Islamic Monarchy. Secondly, in order for SRE to be established, the essential climatic factors that further support a higher level of the state readiness are identified. Finally, based on the shared perspective of the respondents in the study, the findings confirm that the hypothesis that there is a negative and positive relationship between the identified climatic factors and the country's readiness in terms of the respondents' current actions and future hope for improvement. Evidence has shown that the desired climatic factors were recognised as being the key factors for SRE development. This altogether describes the polarity of attitudes among the key informants that is between positive attitude and negative attitude towards the development of SRE in Brunei.

From the academic perspective, the significance of this study is that it highlights the country's readiness to employ Sex and Relationship Education demonstrating the complexities of the national philosophy: Malay Islamic Monarchy. Understanding the cultural and religious barriers trigger the influential factors based on the respondents' perspectives that allow the policy makers or the practitioners to evolve and achieve success in reducing the number of teenage pregnancy and the number of STI's cases

among youth including HIV/AIDS. From the practical perspective, this research provides evidence of vital information needed by the knowledge providers both in public schools and non-government sectors for a tailored approach in succeeding improvements of delivering a quality SRE. This study has further recognised opportunities for other researchers to perform further research in similar contexts and discover linkage of findings. However, I do not advocate that SRE policy may reduce teenage pregnancy and risky sexual behaviours in my country but rather highlight the importance of understanding the present debates in SRE policies and practice to influence the reduction of the social consequences of sex particularly among young people.

The findings in this research have revealed that HIV/ÁIDS Centre has a number of training activities and programs aimed at preparing the young people to be educated and empowered. Some alternatives for addressing the issue or problem of teenage pregnancy and HIVÁIDS are anticipated by this organisation. The resources are also mapped with the needs of the Muslims that can reduce the barriers towards accessing SRE which might be acceptable to the Bruneian Muslims community.

REFERENCES

(Last Reviewed on 2008) *Policy: Sex & Relationships Education.* Pent Valley Technology College, Available from http://www.pentvalley.com/%5Cfilestore%5Cpolicies%5CSex%20%20Relationships%20Education%20Policy.pdf.

ABD. GHANI, Z. (2003). Father as head of the family; its relations with the reality of present occupation. *Sinar Rohani Magazine*, KL: University Kebangsaan Malaya.

ABDULLAHI, M. & UMAR, A. (2013). Consequences of pre-marital sex among the youth a study of University of Maiduguri. *Journal of Humanities and Social Science*, 10 (1), 10-17.

ABERBACH, J. D. & ROCKMAN, B. A. (2002). Conducting and Coding Elite Interviews. *PS: Political Science and Politics* , 35 (4), 673-676.

ACHARYA DR., TEIJLINGEN, E.R. & SIMKHADA, P. (2009). Opportunities and challenges in school-based sex and sexual health education in Nepal. *Kathmandu Univ Med J*, 7 (28), 445-453.

ADVOCATES FOR YOUTH (Sept. 2009). Comprehensive Sex Education: Research and Results. Washington: Advocates for Youth.

AFFI, A. AND AFFI, H. (2014). *Contemporary Interpretation of Islamic Law.* UK, Troubador Publishing Ltd.

AHSAN, M. (Sep. - Oct., 2007). Review of Sex and Sexuality in Islam by Muhammad Aftab Khan. *Culture, Health & Sexuality,* 9 (5), 551-552.

AKELLA, D & JORDAN, M. (2015). Impact of social and cultural factors on teen pregnancy. *Journal of Health Disparities Research and Practice*, 1, 41 – 62.

ALAM, N., SAHA, S. K. & GINNEKEN, J. K. van (2000). Determinants of divorce in a traditional Muslim Community in Bangladesh. *Demographic Research:*

Online Journal, 3 (4). Available online http//: www.demographic-research.org/Volumes/Vol3/4/ [access on 01st August 2015].

AL-DIEN, M. M. Z. (2010). Perceptions of Sex Education among Muslim Adolescents in Canada. *Journal of Muslim Minority Affairs,* 30 (33), 391-407.

ALI, A. (1997). 'Brunei Darussalam: an oily economy in search of an alternative path', *Asian Profil,* 25: 281-301.

AL-LAHIM, S., H. (1995). *The Principles of Islam*. Riyadh, Cooperative Office for Call and Guidance.

ALLEN, D. (2002). Research involving vulnerable young people: a discussion of ethical and methodological concerns. *Drugs: education, prevention and policy* 9(3): 275-283.

ALLEN, L. (2005). *Sexual Subjects. Young People, Sexuality and Education,* Basingstoke, Palgrave Macmillan.

ALLEN, L. (2009a). It's Not Who They are It's What They are Like: Re-conceptualising Sexuality Education's 'Best Educator' Debate. *Sex Education,* 9**,** 33-49.

ALLEN, L. (2009b). Sexing the subject: Evoking 'sex' in teaching an undergraduate course about sexuality. *International Studies in Sociology of Education,* 19**,** 245-256.

ALQUAIZ, A., M., KAZI, A. & AL-MUNEEF, M. (2013). Determinants of sexual health knowledge in adolescent girls in schools of Riyadh-Saudi Arabia: a cross sectional study. *BMC Women's Health,* 13**,** 1-8.

ANDERSON, P. (1999). Application of Complexity Theory to Organization Science, *Organization Science Special Issue*, 10, 216-232.

AN-NAIM, A. A. (2000). *Islamic Foundation for Women's Rights,* Kuala Lumpur, Sisters in Islam.

ANON, (2010). Does sex and relationships education work? A Sex Education Forum evidence briefing. Available at: www.ncb.org.uk/media/494585/sef_doessrework_2010.pdf Accessed online 29th June, 2015.

ANWAR, Z. (2009). *Wanted: Equality and Justice in the Muslim Family*, Malaysia: Musawah Sisters in Islam.

ARAI, L. (2009). *Teenage Pregnancy, The Making and Unmaking of a Problem*. Bristol, UK, The Policy Press.

ARMENAKIS, A.A., HARRIS, S.G. & MOSSHOLDER, K.W. (1993). Creating readiness for organisational change. *Human Relations*, 46, 681-703.

ARNSON, J. & ELIZABETH, Q. (2014). Why Sex is a Dirty Work. *Sex Forum,* 10**:** 105 - 111.

ARONSON, J. (1995). A Pragmatic View of Thematic Analysis. *The Qualitative Report*, 2, 1-3. Retrieved from http://nsuworks.nova.edu/tqr/vol2/iss1/3 [Accessed online on 17th February 2016].

ATHAR, S. (1996). Sex Education, Teenage Pregnancy, Sex in Islam and Marriage. In *Sex Education: An Islamic Perspective*, edited by S. Athar, 1–20. Chicago, IL: Kazi.

ATTRIDGE, S. (2011). The Sexual Health Educator and the provision of Sex Education in Wales. *Education and Health*, 29 (3), 53-57.

AVRUCH, K., 1995, 'Part Four: Discourses of Culture in Conflict Resolution', in Culture and Conflict Resolution, United States Institute of Peace Press, Washington, DC, 73-108.

AZAM, H. (2013). Sex, marriage, and eroticism in contemporary Islamic advice literature. *Journal of Middle East Women's Studies*, 9 (1), 54 -80.

B. E. R. A. (2004). *Revised Ethical Guidelines for Educational Research*. Available from http://www.bera.ac.uk/files/2008/09/ethica1.pdf

BADAWI, J. (1995*). Gender Equity in Islam: Basic Principles*. Indianapolis, American Trust Publication.

BAKKE, M. (2001). Cultural Policy in Norway. *The Journal of Arts Management, Law, and Society,* 31 (1), 10-33.

BALL, C. & HAQUE, A. (2003). Diversity in Religious Practice: Implications of Islamic Values in the Public Workplace. *Public Personnel Management*, 32 (3), 315-330.

BANDA, D. (2008). *Education for All (EFA) and the 'African Indigenous Knowledge Systems (AIKS)': The Case of the Chewa people of Zambia.* Unpublished Thesis. University of Nottingham.

BAOFU, P. (2007). *The Future of Complexity: Conceiving a Better Way to Understand Order and Chaos.* Singapore, World Scientific Publishing.

BARLAS, A. (2002). Believing Women in Islam: Unreading Patriarchal Interpretations of the Qur'an. Austin, Texas University Press.

BARRETT, C. B., & CASON, J. W. (2010). *Overseas Research A Practical Guide*. 2nd edition. USA, Routledge.

BARTZ, T. (2007). Sex education in multicultural Norway. *Sex Education,* 7 (1), 17-33.

BASMENJI, K. (2005). *Tehran Blues: Youth Culture in Iran*. Tehran, Saqi Books.

BAYLISS, P. (2007). Tinkering with Transcriptions. University of Plymouth.

BEAN, C. (1999). The forgotten cleavage? Religion and politics in Australia. *Canadian Journal of Political Science,* 32 (2 Sep.), 551-568.

BECKETT, L. (1996). Where Do You Draw the Line? Education and Sexual Identities. In: (EDS), L. L. A. C. B. (Ed.) *Schooling and Sexualities.* Deakin University, Deakin Centre for Education and Change.

BECKFORD, J. A. (2003). Social Theory and Religion. Edinburgh, Cambridge University Press.

BENNETT, J. (2006). Evidence for controlled deception: A long list of observations – Part II. *Journal of Debunking 9/11 Conspiracy Theories,* 1 (1), 1-11.

BENNETT, L. R. (2007). Zina and the enigma of sex education for Muslim youth. *Sex Education,* 7 (4), 371-386.

BENNETT, S., E. and ASSEFI N., P. (2005). School-based teenage pregnancy prevention programs: a systematic review of randomized controlled trials. *J.Adolesc.Health*, 36(1), 72-81.

BERNHART, M. H. & UDDIN, M. M. (1990). Islam and family planning acceptance in Bangladesh. *Study of Family Planning,* 21**,** 287-292.

BHANA, D. (May - Jun 2007). Childhood Sexuality and Rights in the Context of HIV/AIDS. *Culture, Health & Sexuality, Selected Papers from the IASSCS Conference 2005 (San Francisco),* 9 (3), 309-324.

BHATTA, L. D. (2013). Mono-Cultural Practices in Multicultural Science Classroom. *International Journal of Scientific and Technology Research, 2 (5)*, 233-241.

BHOPAL, K. (1999). South Asian Women and Arranged Marriages in East London. In: R. BAROT, H. and (EDS), B. A. S. F. (Eds.) *Ethnicity, Gender and Social Change.* London, Macmillan Press.

BIDDULPH, M., (2007). Rules of engagement: Boys, young men and the challenge of effective Sex and Relationships Education. *Pastoral Care in Education*, 25(3), 24–33.

BLAKE, S. & KATRAK, Z. (2002). *Faith, values and Sex and Relationship Education*. UK, National Children's Bureau.

BLAKE, S. (2008). There's a Hole in the Bucket: The Politics, Policy and Practice of Sex and Relationship Education. *Pastoral Care in Education,* 26(_)**,** 33-41.

BLOMQVIST, H. C. (1998). The endogenous state of Brunei Darussalam: The traditional society versus economic development, The Pacific Review, 11 (4), 541-559.

BLOOR, M., & WOOD, F. (2006). *Keywords in Qualitative Methods*. London, SAGE Publications.

BLUM, L. (2010). Secularism, multiculturalism and same-sex marriage: a comment on Brenda Almond's 'Education for tolerance'. *Journal of Moral Education,* 39 (2), 145-160.

BMSD. (February 2010). Advice for schools: Brief guidance for handling Muslim parental concern. UK: BMSD.

BONELL, C. (2004). Why is teenage pregnancy conceptualized as a social problem? A review of quantitative research from the USA and UK. Culture, *Health and Sex*, 6, 255 – 272.

BONELL, C., P., STRANGE, V., J., STEPHENSON, J., M., OAKLEY, A., R., COPAS, A., J., FORREST, S., P., JOHNSON, A., M. & BLACK, S. (2003). Effect of social exclusion on the risk of teenage pregnancy: development of hypotheses using baseline data from a randomised trial of sex education. *J Epidemiol Community Health,* 57**,** 871-876.

BONKE, J., & FALLESEN, P. (2010). The impact of incentives and interview methods on response quantity and quality in diary- and booklet-based surveys. *Survey Research Methods*, 4(2), 91-101.

BONNEY, R. (2004). Reflections on the differences between religion and culture. *Clin Cornerstone*, 6, 25 – 33.

BOONSTRA, H. (2010). Winning Campaign: California's Concerted Effort to Reduce Its Teen Pregnancy Rate, *Guttmacher Policy Review*, 13 (2).

BOONSTRA, H. (2014). What Is Behind the Declines in Teen Pregnancy Rates? *Guttmacher Policy Review*, 17 (3). Available online: https://www.guttmacher.org/pubs/ gpr/17/3/gpr170315.html

BOONSTRA, H. D. (2011). Advancing Sexuality Education in developing countries: Evidence and implications. *Guttmacher Policy Review*. 14 (3), 17-23.

BORNEO BULETTIN. (2010). Rising teenage pregnancy due to growing promiscuity.

BORNEO BULLETIN. (2004). Underage Pregnancy and Free Sex On Increase In Brunei.

BOYATZIS, R. (1998). *Transforming qualitative information: Thematic analysis and code development*. Thousand Oaks, CA: Sage.

BRAUN, V. and V. CLARKE (2006). Using Thematic Analysis IN Psychology. *Qualitative Research in Psychology* 3, (2), 77-101.

BROOK, PSHE ASSOCIATION, SEX EDUCATION FORUM (2014). Supplementary Advice to the Sex and Relationship Education Guidance DfEE (0116/2000). London, Brook, PSHE Association and Sex Education Forum.

BROOK. (2011). UK sex and relationships education fails to prepare young people for modern day life. Available from: http://www.brook.org.uk/application/brookpr/index.php?option=com_brookpr&view=article&id=91&Itemid=640. Online on 15th January 2012.

BROWN, S. (2015). 'They think it's all up to the girls': gender, risk and responsibility for contraception. *Culture, Health & Sexuality*, 17(3), 312–325.

BRUNEI DARUSSALAM GOVERNMENT. (2002). Retrieved from http://www.brunei.gov.bn/about_brunei/land.htm.

BRUNEI DARUSSALAM GOVERNMENT. (2002). Retrieved from http://www.brunei.gov.bn/about_brunei/land.htm.

BRUNEI DARUSSALAM GOVERNMENT. (2010). Available from http://www.depd.gov.bn/MDG/Downloads/Brunei%20Final%20MDG%202nd%20Report.pdf. Online on 29th December 2011.

BRUNEI DARUSSALAM GOVERNMENT. (2010). Retrieved from http://www.depd.gov.bn/MDG/Downloads/Brunei%20Final%20MDG%202nd%20Report.pdf.

BRUNEI DARUSSALAM GOVERNMENT. (2010). Total Number of Registered Live Births in Brunei Darussalam by Age of Mother, Gender of Childs and Years (2006 - 2010).

BRUNEI DARUSSALAM GOVERNMENT. (2011). Total Number of Registered Live Births in Brunei Darussalam by Age of Mother, Gender of Childs and Years (2006 - 2010).

BRUNEI TIMES. (07 MAR 2015). Redefining Women's Role in Society. Available from: http://m.bt.com.bn/news-national/2015/03/07/redefining-women%E2%80%99s-role-society. Online on 8th July 2015.

BRUNEI TIMES. (10 MAR 2015). Women play vital role in national development. Available from: http://www.bt.com.bn/news-national/2015/03/10/%E2%80%98women-play-vital-role-national-development%E2%80%99. Online on 1st July 2015.

BRUNEI TIMES. (4 JULY 2012). Brunei women third highest paid in world. Available online: http://www.bt.com.bn/news-national/2012/07/04/brunei-women-third-highest-paid-world [Access on 01st August 2015]

BRUNEI TIMES. (JAN 2011). Religious Education Order still under revision, says minister. Available from: http://www.bt.com.bn/news-national/2011/01/28/religious-education-order-still-under-revision-says-minister. Online on 14th January 2012.

BRUNEI TIMES. (JAN 2011). Religious Education Order still under revision, says minister. Available from: http://www.bt.com.bn/news-national/2011/01/28/religious-education-order-still-under-revision-says-minister. Accessed online 14th January 2012.

BRUNEI TIMES. (July 2010). STI Awareness: Role of parents, teachers vital. Available from: http://www.bt.com.bn/news-national/2010/07/19/sti-awareness-role-parents-teachers-vital. Online on 29th December 2011.

BRUNEI TIMES. (July 2010). STI Awareness: Role of parents, teachers vital. Available from: http://www.bt.com.bn/news-national/2010/07/19/sti-awareness-role-parents-teachers-vital. Online on 29th December 2011.

BURNHAM, K. E., et al. (1969). RACIAL PREJUDICE IN RELATION TO EDUCATION, SEX, AND RELIGION. *Journal for the Scientific Study of Religion,* 8 (2), 318-318.

BYRNE, D. (1998). *Complexity Theory and the Social Sciences: An Introduction*. London, Routledge.

CALDWELL, S. (2015). Let's Talk About Sex: The Failure of Abstinence-Only Policies in America's Public Schools. *CMC Senior Theses*. Paper 1035. Available online: http://scholarship.claremont.edu/cmc_theses/1035. Accessed online 2nd August 2015].

CAMPBELL, M.K., SNOWDON, C., FRANCIS, D., ELBOURNE, D., MCDONALD, AM., KNIGHT, R., ENTWISTLE, V., GARCIA, J., ROBERTS, I. AND GRANT A. (2007). Recruitment to Randomised Trials: Strategies for Trials Enrolment and Participation Study: The STEPS Study. UK, Queen's Printer and Controller of HMSO.

CARROLL, C., KALTENTHALER, E., FITZGERALD, P., BOLAND, A. & DOCKSON, R. (2011). A Thematic Analysis of the strengths and weaknesses of manufacturers' submissions to the NICE Single Technology Assessment (STA) process. *Health Policy,* 102, 136 – 144.

CARUSI, A., & JIROTKA, M. (2009). From data archive to ethical labyrinth. *Qualitative Research,* 9 (3), 285-298.

CENTER FOR MENTAL HEALTH IN SCHOOLS AT UCLA. (2008). Teenage Pregnancy Prevention and Support. Los Angeles, CA: Author

CHAKRABORTY, K. (2010). The sexual lives of Muslim girls in the *bustees* of Kolkata, India. *Sex Education,* 10 (1), 1-21.

CHARLESTON, R. (1998). *Implementing a Developmental Perspective of Learning in the First Year of School: Brunei Darussalam*. Paper presented at the Australian Association for Research in Education Conference. Retrieved from http://www.aare.edu.au/98pap/cha98080.htm

CHEONG, I.P.-A., (2012). Working Towards a Healthier Brunei. Health Education in Context: 223–233.

CIA WORLD FACTBOOK, (January 2011). Brunei.

CIA WORLD FACTBOOK. (2008), Brunei.

CILA, J. & LALONDE, R. (2013). Personal openness toward interfaith dating and marriage among Muslim young adults: The role of religiosity, cultural identity, and family connectedness. *Group Process & Intergroup Relations*. XX(X), 1-14.

CIPRIANI, R. (2009). Religions in Europe. *Religion,* 39, 109-116. Available: http://www.elsevier.com/locate/religion Accessed 30th December 2011.

CLARK, J. A. (2001). Sex Education in the New Zealand Primary School: A tangled skein of morality, religion, politics and the law. *Sex Education,* 1 (1), 23-30..

CLEARY, M. & WONG S. Y. (1994). *Oil, Economic Development and Diversification in Brunei Darussalam,* Basingstoke: Macmillan.

COENDERS, M. and SCHEEPERS, P. (2003). The Effect of Education on Nationalism and Ethnic Exclusionism: An International Comparison. *Political Psychology,* 24 (2), Special Issue: National Identity in Europe, 313-343.

COLLINS, A., BRONTE-TINKEW, J., & BURKHAUSER, M. (2008). Using Incentives to Increase Participation in Out-of-School Programs. (25). Available from:http://www.childtrends.org/files/child_trends-2008_06_18_pi_ostincentives.pdf. Access online on 3rd August 2015.

COLLINS, M.P.P, C., ALAGIRI, P. & SUMMERS, T. (2002). Abstinence Only vs Comprehensive Sex Education: What are the arguments? What is the evidence? Policy Monograph Series, AIDS Policy Research Center & Center for AIDS Prevention Studies & AIDS Research Institute, University of California, San Francisco.

COOKSEY, E. C., RINDFUSS, R. R., and GUILKEY, D. K. (1984). “The Initiation of Adolescent Sexual and Contraceptive Behaviour during Changing Times”, Journal of Health and Social Behaviour, Vol. 37, 1996, pp. 59–74; and D. Kirby, Sexuality education: a handbook for the evaluation of the programs, Santa Cruz, CA: Network publication.

CORBIN, J., & STRAUSS, A. (2008). Basics of Qualitative Research 3e. USA, SAGE Publications, Inc.

COULTER, J. A. (1969). The Problems of the Church in Northern Ireland. *The Furrow,* 20 (8), 400-407.

DAHLEN, A. P. (2014). *Islamic Law, Epistemology and Modernity: Legal Philosophy in Contemporary Iran*. New York, Routledge.

DAILARD, C. (2001). Sex Education: Politicians, Parents, Teachers and Teens. *The Guttmacher Report on Public Policy,* 14 (1), 9 – 12.

DALTON, C. C. & GOTTLIEB, L. N. (2003). The Concept of Readiness to Change. *Journal of Advanced Nursing*, 42, 108 – 117.

DARLINGTON, Y., & SCOTT, D. (2002). *Qualitative Research in practice: Stories from the Field*. Philadelphia, USA, Open University Press.

DENSCOMBE, M. (1998). *The Good Research Guide for Small-scale Social Research Projects.* 3rd edition. England, Open University Press.

DENZIN, N. K. (1989). *Interpretive Interactionism*. London, SAGE Publications.

DENZIN, N. K. (2003). The Call to Performance. *Symbolic Interaction, 26*, 187-207.

DENZIN, N. K., & LINCOLN, Y. S. (2005). *The Sage Handbook Qualitative Research*. 3rd edition. London, SAGE Publications.

DENZIN, N. K., & LINCOLN, Y. S. (2008). Introduction: The Discipline and Practice of Qualitative Research. In N. K. Denzin & Y. S. Lincoln (Eds.), *Strategies of Qualitative Inquiry*. California: USA, SAGE Publications.

DEPARTMENT FOR EDUCATION (2014). *The Equality Act 2010 and Schools: Departmental Advice for School Leaders, School Staff, Governing Bodies and Local Authorities.* UK: DfE.

DEPARTMENT FOR EDUCATION AND EMPLOYMENT. (2000). Sex and Relationship Education (DfES – SRE) Policy Guidance. London, DFEE

DEPARTMENT OF EDUCATION & EMPLOYMENT, (2000). Sex and relationship education guidance, Nottingham: DfEE.

DEPARTMENT OF EDUCATION UNITED STATES. (Revised on June 2013). Supporting the Academic Success of Pregnant and Parenting Students Under Title IX of the Education Amendments of 1972. Washington, D.C.

DFES. (2006). Teenage Pregnancy Next Steps: Guidance for Local Authorities and Primary Care Trusts on Effective Delivery of Local Strategies. London: DfES

DHIRI, S. (1999). A qualitative study of Pakistani Muslim women's views on using family planning services.) *Unpublished Report Submitted for New researcher's Programme.* Nottingham, Nottingham community Health Trust.

DODD, L. (17th February 2015). MPs back parents' right to withdraw children from sex education classes. *The Tablet.*

DORKENOO, E., MORISON, L. & MACFARLANE, A. (2007). *A Statistical Study to Estimate the Prevalence of Female Genital Mutilation in England and Wales Summary Report.* FORWARD, Department of Health.

DUNGUS, A. (2000). Iran's other revolution, *Populi*, 27 (2), UNFPA.

DUNNE, M., PRYOR, J., & YATES, P. (2005). *Becoming a Researcher: A Research Companion for the Social Sciences*. England: Open University Press.

EDWARDS, J. (May - Jun., 2007). 'Marriage Is Sacred': The Religious Right's arguments against 'gay marriage' in Australia. *Culture, Health & Sexuality,* 9 (3), 247-261.

EL HAMRI, N. (2010). Approaches to family planning in Muslim communities. *J Fam Plann Reprod Health Care* 2010, 36 (1), 27–31.

ELLEY, S. T. (2008). Sex and Relationship Education and Young People's Lived Experiences.) *Sociology and Social Policy.* United Kingdom, University of Leeds.

ELLIOT, F. R. (1996) .*Gender, Family and Society*. Basingstoke, Macmillan.

ELWOOD, S. A. & MARTIN, D. G. (2000). 'Placing' interviews: location and scales of power in qualitative research. *Professional Geographer* , 52 (4), 649–657.

ELY, M., ANZUL, M., FRIEDMAN, T., GARNER, D., & STEINMETZ, A. M.-C. (1991). Doing Qualitative Research: Circles within Circles. London, The Falmer Press.

EMMERSON, L., (2007). SRE and Young People in Further Education: A Review of Provision and Practice in England. Pastoral Care in Education, 25 (3), 39–48.

EUROPEAN PARLIAMENT. (2013). Policies for Sexuality Education in the European Union. *In:* Beaumont, K. & Maguire, M. (eds.). Brussels: European Union.

FARUQI, Y. M. (2007). Islamic view of nature and values: Could these be the answer to building bridges between modern science and Islamic science. *International Education Journal*. 8 (2), 461-469.

FATAH YASIN, R. F. & M. S. JANI (2013). The positive role of polygamy in reducing women socio-related problems in Malaysia. *American International Journal of Social Science.* 2 (3), 72-82.

FERNANDEZ, T., CHAPMAN, J. & ESTCOURT, C. S. (2008). Joint-working as a policy for reducing inequalities in access to information: developing culturally appropriate sex and relationships education for young Bangladeshis in London. *Sex Education,* 8 (2)**,** 187-200.

FERSHTMAN, C., GNEEZY, U. & HOFFMAN, M. (May 2011). Taboos and Identity: Considering the Unthinkable. *American Economic Journal: Microeconomics,* 3**,** 139-164. Available from: http://www.aeaweb.org/articles.php?doi=10.1257/mic.3.2.139. Access online on 7th June 2015.

FLEMING, J. & BOECK, T. (ed.) (2012). *Involving Children and Young People in Health and Social Care Research*. London, Routledge.

FOWLER, M. L*. (2004) National Marriage Day 2004: Mary-Louise Fowler. Available from:**http://www.marriage.org.au/index.php?option=com_content&view=article&id=23&Itemid=3**. Accessed* online on 29th December 2011.

FPA (Jan 2011). Sex and Relationship Education Factsheet. London: FPA. Available at: http://www.fpa.org.uk/sites/default/files/sex-and-relationships-education-factsheet-january-2011.pdf Access online on 30th July 2015.

FRIEDLAND, R. (2002). Money, Sex, and God: The Erotic Logic of Religious Nationalism. *Sociological Theory* 20, 381–425.

GABLER, M. (2011). Searching for sexual revolutions in India: non-governmental organisation-designed sex education programmes as a means towards gender equality and sexual empowerment in New Delhi, India. *Sex Education,* 1 (15).

GAWRONSKI, B. & LEBEL, E.P. (2008). Understanding patterns of attitude change: When implicit measures show change, but explicit measures do not. *Journal of Experimental Social Psychology*, 44, 1355–1361.

GEEL, F. E.-Z. (2012). Quality Sexual Education Needed for Adolescents in Egyptian Schools. Population Reference Bureau.

GEER, J. (1991). Do Open-Ended Questions Measure “Salient” Issues?

GEORGE, J.M. & JONES, G.R. (2001). Towards a process model of individual change in organisations. *Human Relations*, 54, 3-22.

GEROUKI, M. (2008). Sexual health indicators in Greece and in Finland. Is education the key for promoting sexual health and well-being? *Abstracts of the 9th Congress of*

GHAILL, M. & HAYWOOD, C. (2014). British-Born Pakistani and Bangladeshi Young Men: Exploring Unstable Concepts of Muslim, Islamophobia and Racialization. *Critical Sociology*, 41(1), 97–114.

GIBSON, M. (1984). Approaches to multicultural education in the U. S.: Some conceptions and assumptions. *Anthropology and Education Quarterly*, 15(1), 94-119.

GOLDMAN, JDG (2008) 'Responding to Parental Objections to School Sexuality Education: A selection of 12 objections', Sex Education, 8 (4), 415–38.

GOODMAN, A., KAPLAN, G. & WALKER, I. (2004). Understanding the Effects of Early Motherhood in Britain: the Effects on Mothers.

GOVERNMENT OF BRUNEI DARUSSALAM. (2002).

GOVERNMENT OF BRUNEI DARUSSALAM. (2010). Brunei Darussalam: Department of Economic Planning and Development.

GRANT, W., & SUGARMAN, J. (2004) Ethics in Human Subjects Research: Do Incentives Matter? *Journal of Medicine and Philosophy*, 29(6), 717–738.

GRAY, P. B. (2003). HIV and Islam: is HIV prevalence lower among Muslims? *Social Science & Medicine*.

GREEN, S. K. and SOLLIE, D. L. (Apr., 1989). Long-term Effects of a Church-Based Sex Education Program on Adolescent Communication. *Family Relations,* 38 (2), 152-156.

GREENE, M., RASEKH, Z. & AMEN, K. (2001). In this generation: sexual and reproductive health technologies in a youthful world. *In:* International, P. A. (ed.). Washington, D.C.

GREIG, A., & TAYLOR, J. (1999). *Doing Research with Children*. London, SAGE Publications Ltd.

GROUP OXFORD BUSINESS. (2009). 'The Report: Brunei Darussalam 2009'.

GROVER, S. (2007). Children's right to be educated for tolerance: minority rights and inclusion. *Education and the Law,* 19 (1), 59-70.

GUPTA, A. & MICHAILOVA, S. (2004). Knowledge Sharing in Knowledge-Intensive Firms: Opportunities and Limitations of Knowledge Codification. Denmark.

HAERI, S. (1989). *Law of Desire: Temporary Marriage in Shi'i Iran*. Syracuse, NY, Syracuse University Press.

HALPIN, D., & TROYNA, B. (1994). *Researching Education Policy Ethical and Methodological Issues*. London: The Falmer Press.

HALSTEAD, J. M. (1997). Muslims and Sex Education. *Journal of Moral Education,* 26 (3), 317-330.

HALSTEAD, J. M. and LEWICKA, K. (1998). Should homosexuality be taught as an acceptable alternative lifestyle? A Muslim perspective. *Cambridge Journal of Education,* 28 (1), 49-64.

HALSTEAD, J. M. and REISS, M. J. (2003) Values in sex education. From principles to practice.) London, Routledge.

HANSEN, K., M. (2006) The Effects of Incentives, Interview Length, and Interviewer Characteristics on Response Rates in a Cati-Study. *International Journal of Public Opinion Research* 19(1), 112-121.

HARDEN, A., BRUNTON, G., FLETCHER, A. & OAKLEY, A. (2009). Teenage pregnancy and social disadvantage: systematic review integrating controlled trials and qualitative studies. *BMJ,* 339**,** 1-11.

HARDEN, A., BRUNTON, G., FLETCHER, A., OAKLEY, A., BURCHETT, H., BACKHAN, M. (2006). *Young people, pregnancy and social exclusion: A systematic synthesis of research evidence to identify effective, appropriate and promising approaches for prevention and support*. London: EPPI-Centre, Social Science Research Unit, Institute of Education, University of London.

HARDEN, A., BRUNTON, G., FLETCHER A. & OAKLEY A. (2009). Teenage pregnancy and social disadvantage: systematic review integrating controlled trials and qualitative studies. *BMJ*, 339, b4254.

HARKONEN (2013), Divorce Trends, Patterns, Causes, Consequences. Stockholm Research Report in Demography, 7, Sociology Department, Stockholm University.

HARVEY, W., S. (2010). Methodological Approaches for Interviewing Elites. *Geography Compass* 4 (3), 193–205. Available from: http://www.sbs.ox.ac.uk/centres/reputation/Documents/Methodological%20Approaches%20for%20Interviewing%20Elites%20%28Geography%20Compass%20-%202010%29.pdf. Accessed online on 23rd May 2012.

HASNAIN, M. (2005). Cultural Approach to HIV/AIDS harm reduction in Muslim countries. *Harm Reduction Journal,* 2 (23), 1-8.

HASSO, F.S. (2010). Deconstructing Sexuality in the Middle East: Challenges and Discourses. *Contemporary Sociology: A Journal of Reviews*, 39(1), 47–48.

HASTE, P. (2013). Low opinions, high hopes: revisiting pupils' expectations of sex and relationship education. *Sex Education: Sexuality, Society and Learning,* 13**,** 522-534.

HAYWOOD, C. (1996). 'Out of the Curriculum': Sex Talking, Talking Sex. *Curriculum Studies,* 4**,** 229-249.

HAYWOOD, C., (2008). Genders and sexualities: exploring the conceptual limits of contemporary educational research. *International Studies in Sociology of Education*, 18(1), 1–14.

HEALTH INFORMATION BOOKLET (2010). Brunei Darussalam: Department of Policy and Planning, Ministry of Health.

HEATH, S., CHARLES, V., CROW, G., & WILES, R. (August 2004). Informed Consent, Gatekeepers and Go-Between. Paper presented to stream on 'The Ethics & Social Relations of Research' on the Sixth International Conference on Social Science Methodology.

HEFCE (2008). International approaches to Islamic Studies in higher education. *A Report to HEFCE.* Available online: http://eprints.soton.ac.uk/52069/1/rd07_08.pdf. Access on 02nd August 2015.

HEILBORN, M. L., BRANDAO, E. R. & CABRAL, C. D. S. (2007). Teenage pregnancy and moral panic in Brazil. *Culture, Health & Sexuality: An International Journal for Research, Intervention and Care*, 9, 403 – 414.

HELLEVE, A., FLISHER, A. J., ONYA, H., MUKOMA, W. & KLEPP, K.-I. (2009). South African teachers' reflections on the impact of culture on their teaching of sexuality and HIV/AIDS. *Culture, Health & Sexuality,* 11 (2)**,** 189-204.

HELM, J. H., & BENEKE, S. (2003). *The Power of Projects*. New York: USA: Teachers College Press.

HENRICSON, C. and BAINHAM, A. (2005). The child and family policy divide: Tensions, convergence and rights.) National Family and Parenting Institute, Joseph Rowntree Foundation.

HIRST, J. (2004). Researching young people's sexuality and learning about sex: experience, need, and sex and relationship education. *Culture, Health and Sexuality,* 6**,** 115-129.

HODGE, D., R. (2005). Epistemological Frameworks, Homosexuality, and Religion: How People of Faith Understand the Intersection between Homosexuality and Religion. *Social Work,* 50**,** 208-218.

HOFSTEDE, G. (1991/1994). *Cultures and Organizations: Software of the Mind*. London: Harper Collins Business.

HOGAN, D., R., BALTUSSEN, R., HAYASHI, C., LAUER, J., A. & SALOMON, J., A. (2005). Achieving the millennium development goals for health: Cost effectiveness analysis of strategies to combat HIV/AIDS in developing countries. BMJ Publishing Group Ltd. Available online: http://cdrwww.who.int/choice/publications/p_2005_MDG_series_HIV_AIDS.pdf [Access online: 02nd August 2015].

HOLSTEIN, J. A., & GUBRIUM, J. F. (2008). Interpretive Practice and Social Action. In N. K. Denzin & Y. S. Lincoln (Eds.), *Strategies of Qualitative Inquiry*. California: USA: SAGE Publications.

HOLZNER, B. M. and OETOMO, D. (May 2004). Youth, Sexuality and Sex Education Messages in Indonesia: Issues of Desire and Control. *Reproductive Health Matters,* 12 (23, Sexuality, Rights and Social Justice), 40-49.

HORN, S. S. (2006). Heterosexual Adolescents' and Young Adults' Beliefs and Attitudes about Homosexuality and Gay and Lesbian Peers. Cognitive Development, 21, pp 420 – 440.

HORTON, A. V. M. (1984) 'The British Residency in Brunei, 1906-1959', in Centre for South East Asian Studies, University of Hull.

HORWATH, J., LEES, J., SIDEBOTHAM, P., HIGGINS, J. & IMTIAZ, A. (2008). Religion, beliefs and parenting practices: A descriptive study. UK, Joseph Rowntree Foundation.

HOSSAIN, K. (2003). In Search of Equality: Marriage Related Laws for Muslim Women in Bangladesh. *Journal of International Women's Studies*, 5(1), 96-113. Available at: http://vc.bridgew.edu/jiws/vol5/iss1/6

HTUN, M. & WELDON, L.S., (2012). The Civic Origins of Progressive Policy Change: Combating Violence against Women in Global Perspective, 1975–2005. *American Political Science Review*, 106 (03), 548–569.

HUGHES, J., & SHARROCK, W. (1990). *The philosophy of social research* (3rd ed.). London: Longman.

IHSANOOLU, E. & IHSANOGLU, E. (2003). The Difference Aspects of Islamic Culture: Culture And Learning in Islam (Different Aspects of Islamic Culture), Paris: UNESCO Publ.

İLKKARACAN, P. (2008). Deconstructing sexuality in the Middle East: challenges and discourses P. Ilkkaracan, ed., Aldershot, England: Ashgate Publishing.

ILLES, J. (2012). Young sexual citizens: reimagining sex education as an essential form of civic engagement. Sex Education, 12 (5), 613–625.

INGHAM, R., and CARRERA, C. (1998). Liaison between parents and schools on sex education policies, *Sex Education Matters*, 15 (11).

IPPF (2014). Over-protected and under-served: A multi-country study on legal barriers to young people's access to sexual and reproductive health services, United Kingdom case-study. London, International Planned Parenthood Federation. Available from: http:// www.ippf.org/sites/default/files/ippf_coram_uk_report_web. pdf. Online on 3rd February 2015.

IPPF. (2009). Sexuality and Religion. *X-Press by and for Young People*. 9, 1-16. Available from: http://www.ippf.org/NR/rdonlyres/9EAEC525-CC9C-4B8D-BD12-78E7740433E5/0/xpressNov09.pdf. Online on 23rd December 2011.

IREDALE, R. and FOX, C. (1997). The impact of immigration on school education in New South Wales, Australia. *International Migration Review,* 31 (3), 655-669.

ISLAM, M. S. AND RAHMAN, M., M. (2008). Sex Education: an Islamic view. *The Dhaka University Journal of Islamic Studies*, volume

ISRAEL, M. & HAY, I. (2006). Research Ethics for Social Scientists. London: SAGE Publications Ltd.

IYER, P. & AGGLETON, P. (2014). Seventy years of sex education in Health Education Journal: a critical review. *Health Education Journal*, 74(1), pp.3–15.

JACOBSON, K. C. & CROCKETT, I. J. (2000). Parental monitoring and adolescent adjustment: An ecological perspective, *Journal of Adolescent Health*, 10, 65-97.

JAMALUDIN, Z., ABU BAKAR, MD. Z. & WAN ABDULLAH, W. A. R. K. (2013). Adolescent Pregnancy: Factors and Solution in Islamic Perspective. *Adv. in Nat. Appl. Sci* ., 7(4), 373-376.

JIMENEZ, S. (2012). Social Constructions of Teen Pregnancy: Implications for Policy and Prevention Efforts. *Scripps Senior Theses.* Paper 50. Retrieved from http://scholarship.claremont.edu/scripps_theses/50 [Accessed online on 20th February 2016].

JOHNS, M. J., MONCLOA, F. & GONG, E. J. (2000). Teen Pregnancy Prevention Programs: Linking Research and Practice. *Extension Journal*, 38 (4). Available online: http://www.joe.org/joe/2000august/a1.php Access date: 30th July 2015.

JOHNSON, H. (2005). There are worse things than being alone: polygamy in islam, past, present, and future*, William & Mary Journal of Women & Law*, 11 (3), 563 – 596. Available at: http://scholarship.law.wm.edu/wmjowl/vol11/iss3/11

JOLLY, S. (2002). Gender and Cultural Change. Brighton: University of Sussex, Institute of Development Studies.

JOSEPH ROWNTREE FOUNDATION (1995). Social Background and Post-Birth Experiences of Young Parents.

JUPP, V. (2006). The Sage Dictionary of Social Research Methods. London: SAGE.

KAILO, K. (2000). Monoculture, Gender and Nationalism: the Kalevala as a Tool of Acculturation in Sunnari, V, & Rasanen R. (eds). University of Oolu, Oolu University Press.

KANKU, T. & MASH, R. (2010). Attitudes, perceptions and understanding amongst teenagers regarding teenage pregnancy, sexuality and contraception in Taung', *South African Family Practice* 52(6), 563–572.

KAUFFMAN, S.A. (1995). *At Home in the Universe: The Search for Laws of Self-Organization and Complexity*. Penguin, Harmondsworth.

KAUFMAN, K. Ed (2010): The Prevention of Sexual Violence. A Practitioner's Sourcebook, NEARI Press.

KAVANAUGH, K., MORO, T. T., SAVAGE, T. & MEHENDALE, R. (2006). Enacting a theory of caring to recruit and retain vulnerable participants for sensitive research. *Res Nurs Health*. 29(3), 244.

KAY, J. F. & JACKSON, A. (2008). *Sex, Lies &Stereotypes: How Abstinence-Only Programs Harm Women and Girls.* New York, Legal Momentum.

KAY, T. (2006). Daughters of islam: family influences on muslim young women's participation in sport. *International Review for the Sociology of Sport,* 41 (3/4), 357–373.

KEITH, M. (2006). Complexity Theory and Education. Paper presented at APERA Conference, Hongkong, 1 – 12.

KERKYASHARIAN, S. (1998). Multiculturalism in Australia: Today and Tomorrow. Paper presented at Annual Conference of the Federation of Ethnic Communities' Councils of Australia. Available from: http://www.crc.nsw.gov.au/__data/assets/pdf_file/0010/1342/multiculturalism_in_australia.pdf. Accessed Online on 10th November 2011.

KHAIRUDDIN, S. (2008). Stemming the Tide: A Critique of the Reform of Polygamy Laws in Malaysia. Unpublished Masters Dissertation. International Institute of Islamic Thought and Civilization, Malaysia, International Islamic University.

KILP, A. (2011). Religion in the Construction of the Cultural 'Self' and 'Other'. *ENDC Proceedings*, 14, 197 – 222.

KINCHELOE, J. L. & STEINBERG, S. R. (2004). *The Miseducation of the West: How Schools and the Media Distort Our Understanding of the Islamic World.* USA, Greenwood Publishing Group, Inc.

KIRANA, P.-S., NAKOPOULOU, E., AKRITA, L. & PAPAHARITOU, S. (2007). Attitudes of parents and health promoters in Greece concerning sex education of adolescents. *Sex Education,* 7 (3)**,** 265-276.

KIRBY, D. (2007). Emerging Answers 2007: Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases (Washington DC: National Campaign to Prevent Teen and Unplanned Pregnancy). Read more at http://www.fpa.org.uk/factsheets/sex-and-relationships-education#ltJBkoxt2hJbvReZ.99

KIRKENDALL, L. A. (1956). Premarital sex relations: The problem and its implications. *Pastoral Psychology*, (April), 46-53.

KIWEEWA, J. M. (2008). Uganda's HIV/AIDS success story: Reviewing the evidence. *Journal of Development and Social Transformation*. 5, 53-61.

KOFFI, A. K. & KAWAHARA, K. (2008). Sexual abstinence behaviour among never-married youths in a generalized HIV epidemic country: evidence from the 2005 Cote d'Ivoire AIDS indicator survey. *BMC Public Health*. 8, 408.

KON, J. (2011). Shedding Light On The Trouble With Teen Pregnancy. *Borneo Bulletin*.

KVASNY, L. AND CHONG, J. (2008). A Feminist Analysis of the ABC Approach to HIV/AIDS Prevention in the Sub-Saharan Africa, In N. Wickramasinghe and E. Geisler (Eds.), *Encyclopedia of Healthcare Information Systems,* (pp.10-16)*,* Hershey: Idea Group Publishing.

KWAHK, K-Y. & LEE, J-N. (2008). The Role of Readiness for change in ERP implementation: Theoretical bases and empirical validation. *Information & Management*, 45, 474–481.

KYRIACOU, D. N., ANGLIN, D., TALIAFERRO, E., STONE, S. TUBB, T., LINDEN, J. A., MUELLEMAN, R., BARTON, E. & KRAUS, J. (1999). Risk factors for injury to women from domestic violence. *The New England Journal of Medicine.* 1892-1898.

LAFOREST J. (2009). Guide to organizing semi-structured interviews with key informant, available online at http://www.crpspc.qc.ca/Guide_entretien_versionWEB_eng.pdf.

LAFRANIERE, S., FLAHERTY, M., STEPHENS, J. (2000). The Dilemma: Submit or

LANDOR, A., SIMONS, L. G., SIMONS, R. L., BRODY, G. H. & GIBBONS, F. X. (2011). The role of religiosity in the relationship between parents, peers, and adolescent risky sexual behavior. *J Youth Adolescence,* 40**,** 296–309.

LANGEN, T. T. (2005). Gender-power imbalance on women's capacity to negotiate self-protection against HIV/AIDS in Botswana and South Africa. *African Health Sciences*. 5(3), 188-197.

LAPOINTE, L & RIVARD, S. (2005). A multilevel model of resistance to information technology implementation. *MIS Quarterly*, 29, 461–491.

LEADBEATER, B., BANISTER, E., BENOI, C., JANSSON, M., MARSHALL, A., & RIECKEN, T. (2006). Ethical Issues in Community-Based Research with Children and Youth. Canada: University of Toronto Press Incorporated.

LEE, R. (1993). *Doing research on sensitive subjects*. London: SAGE.

LEE-TREWEEK, G., & LINKOGLE, S. (2000). Risk and Ethics in Social Research: Danger in the field. USA: Routledge.

LEMOS, G. (2009). Reducing teenage pregnancies and their negative effects in the UK. London: Lemos & Crane.

LEWIS, A., & LINDSAY, G. (2000). Researching Children's Perspectives. USA: Open University Press.

LEWIS, J (2001). 'A comparison of English and Dutch sex education in the classroom', *Education and Health*, 19 (4), 59-64 (for parents).

LEWIS, J., & KNIJN, T., (2003). Sex Education Materials in The Netherlands and in England and Wales: A comparison of content, use and teaching practice. Oxford Review of Education, 29(1), 113-150.

LEWIS, J., and KNIJN, T. (2002). The Politics of Sex Education Policy in England and Wales and The Netherlands since the 1980's. *Journal of Social Policy,* 31 (4), 669-694.

LI, X., STANTON, B. & FEIGELMAN, S. (2000). Impact of perceived parental monitoring on adolescent risk behaviour, *Journal of Adolescent Health*, 27, 49-56.

LINDSAY, J. (2005). *Daily Life in the Medieval Islamic World.* USA, Greenwood Publishing Group, Inc.

LIVESEY, C. (2006). Revision Sociological Methods: "The Relationship between Positivism, Interpretivism and Sociological Research Methods." Available online: http://www.sociology.org.uk/revgrm5.pdf

LONG, R. (2016). Sex and Relationships Education in Schools (England). Briefing Paper, House of Commons Library. 1 – 23.

LOW, W-Y., NG, C-J., FADZIL, K., S., & ANG, E-S. (2007). Sexual issues: Let's hear it from the Malaysian boys. *The Journal of Men's Health & Gender*, 4 (3), 283-291.

LUCASSEN, L. & LAARMAN, C. (2009). Immigration, intermarriage and the changing face of Europe in the post war period. *History of the Family,* 14, 52–68.

MABUD, S., A. (1998). An Islamic View of Sex Education. In Sex Education and Religion, edited by M. Reiss and S. Mabud, 98–135. Cambridge: Islamic Academy.

MACEOIN, D. (2006). Why do Muslims execute innocent people? Islamist ideology. *The Middle East Quarterly***,** 15-25.

MAHDAVI, P. (Sep. - Oct., 2007). Passionate Uprisings: Young People, Sexuality and Politics in Post-Revolutionary Iran. *Culture, Health & Sexuality,* 9 (5), 445-457.

MAKOL-ABDUL, PUTE R. AND NURULLAH, ABU SADAT AND IMAM, SYED S. AND RAHMAN, SAODAH A. (2009). Parents' Attitudes Towards Inclusion of Sexuality Education in Malaysian Schools. *International Journal about Parents in Education*, 3 (1), 42–56. Available at SSRN: http://ssrn.com/abstract=1557319

MANDERSON, L., KELAHER, M., WOELZ-STIRLING, N., KAPLAN, J. & GREENE, K. (2002). Sex, contraception and contradiction among young Filipinas in Australia. *Culture, Health & Sexuality,* 4 (4)**,** 381-391.

MAPADIMENG, M. S. (2009). Culture versus religion: a theoretical analysis of the role of indigenous African culture of Ubuntu in social change and economic development in the post apartheid South African society. Politics and religion, 1,

MARSCHAN-PIEKKARI, R. AND WELCH, C. (2004). Handbook of Qualitative Research Methods for International Business. Edward Elgar Publishing.

MARSH, D. & FURLONG, E. (2002). Ontology and Epistemology in Political Science in Marsh, David and Stoker, Gerry.

MASHHOUR, A. (2005). Islamic Law and Gender Equality – Could There be a Common Ground? A study of divorce and polygamy in Sharia Law and Contemporary Legislation in Tunisia and Egypt. *Human Rights Quarterly*, 27 (2): 563-582.

MATERNAL AND CHILD HEALTH (MCH) SERVICES, MINISTRY OF HEALTH. (2006-2010). Number of pregnant mothers aged < 20 years attending MCH for antenatal care services. Brunei Darussalam.

MATSUMOTO, D. (1996). *Culture and Psychology*. Pacific Grove, CA: Brooks/Cole.

MAY, T. (2011). *Social Research: Issues, Methods and Research*, (4th ed.). Berkshire: Open University Press.

MCCLAIN, L., C. (2006). Some ABCs of feminist sex education, in light of the sexuality critique of legal feminism. *Columbia Journal of Gender and Law,* 15**,** 63-88.

MCDERMOTT, E., GRAHAM, H. & HAMILTON, V. (2004). Experiences of being a teenage mother in the UK: A Report of the systematic review of qualitative studies. UK, ESRC.

MCKEON, B. (2006). Effective Sex Education. Washington: Advocates for Youth.

MEASOR, L. (2000). *Young People's Views on Sex Education,* London, Routledge.

MERRIAM, S. (2009). *Qualitative Research: A Guide to Design and Implementation,* San Francisco: CA, Jossey Bass.

MESTON, C., M. & AHROLD, T. (2008). Ethnic, Gender and Acculturation Influences on Sexual Behaviours. *Arch Sex Behav*.

MINISTRY OF EDUCATION. (2008). *National Report MOE Brunei Darussalam*.

MINISTRY OF EDUCATION. (2010). *Education Statistics Brunei Darussalam*.

MINISTRY OF EDUCATION. (2011). *The Education Statistics Brunei Darussalam Handbook*.

MINISTRY OF HEALTH BRUNEI DARUSSALAM. (July 2010) Code of Ethics and Standards of Practice for Registered Nurses and Midwives in Brunei Darussalam. Available from http://www.moh.gov.bn/bruneinursingboard/downloads/ethics.pdf. Accessed online on 23rd May 2012.

MINSTRY OF EDUCATION. (2008). National Report MOE Brunei Darussalam. Brunei Darussalam.

MIR-HOSSEINI, Z. (2010). Criminalizing sexuality: zina laws as violence against women in Muslims context. the global campaign to stop killing and stoning women and women living under Muslim laws. Available from http://www.violenceisnotourculture.org/files/Mir_Hosseini.pdf. Accessed on 02nd August 2015

MITCHELL, P., J. (2014). Making Sex Education Work: Tips for Ontario and Other Provinces Revising their Curricula-and Tips for Parents. Ottawa, Canada: Institute of Marriage and Family Canada.

MOHAMMADI, N., JONES, T., EVANS D. (2008). Participant Recruitment from Minority Religious Groups: the Case of the Islamic Population in South Australia. *International Nursing Review*, 55 (4), 393 – 398.

MOHD YUNOS, M. R. (2005). *Social Problems in Brunei Darussalam*. Paper presented at the Executive Development Program for Senior Government Officers 2005.

MOHSIN, D. M. (2011). National Cervical Cancer Prevention and Control Programme Brunei Darussalam. Brunei Darussalam: Ministry of Health.

MOLLA, M., BERHANE, Y. & LINDTJORN, B. (2008). Traditional values of virginity and sexual behaviour in rural Ethiopian youth: results from a cross-sectional study. *BMC Public Health* 2008, 8 (9), 1-10.

MOORE, J. R. (2006). Teaching about Islam in Secondary Schools: Curricular and Pedagogical Considerations. *Equity & Excellence in Education*, 39, 279–286.

MOORE, J. R. (2007). Curriculum Wars Regarding Islam. *Curriculum & Teaching Dialogue*, 9 (1/2), 131.

MOORE, K., MASON, P. & LEWIS, J. (2008). *Images of Islam in the UK: The representation of British Muslims in the National Print News Media 2000-2008*, UK, Cardiff School of Journalism, Media and Cultural Studies.

MORRISON, K. (2002). *School Leadership and Complexity Theory*. London, Routledge Falmer,

MORTON-WILLIAMS, J. (1993). *Interviewer Approaches*. Aldershot, England: Dartmouth Publishing Co.

MOTHIBA, T. M. & MAPUTLE, M. S. (2012). Factors contributing to teenage pregnancy in the Capricorn district of the Limpopo Province. *Curationis,* 35 (1), Article 5. Available online: http://www.curationis.org.za/index.php/curationis/article/view/19/63. Access on 03rd August 2015.

MUNDLE, C., NAYLOR, C. & BUCK, D. (2012). *Volunteering in health and care in England: A summary of key literature*. UK: The Kings Fund.

MURCOTT, A. (1980). The social construction of teenage pregnancy: a problem in the ideologies of childhood and reproduction. *Sociology of Health & Illness*, 2, 1–23.

MUSLIM WELFARE HOUSE TRUST. (2004). Understanding the Educational Needs of Muslim Pupils: Guidance for schools, teachers & local education authorities. London, Muslim Welfare House Trust.

NCB. (2003a) Sex and Relationships Education Framework. Available from: http://www.ncb.org.uk/media/229338/sex_and_relationships_education_framework.pdf, Online on 29th December 2011.

NCB. (2003b) Sex and Relationships Education: support for schools governors. Available from: http://www.ncb.org.uk/media/183641/sre_and__school_governors.pdf, online on 29th December 2011.

NCB. (2010). Does Sex and Relationship Education work? A Sex Education Forum evidence briefing. Available from: http://www.ncb.org.uk/media/494585/sef_doessrework_2010.pdf. Online on 29th December 2011.

NEUMAN, W.L. (2006). *Social Research Methods: Qualitative and Quantitative Approaches.* Toronto: Pearson.

NHS. (Last Reviewed 15/07/2014) Infertility. Available online: http://www.nhs.uk/conditions/Infertility/Pages/Introduction.aspx [Access online: 30th July 2015].

NICE. (2010). Public Health draft guidance; School, college and community-based personal, social, health and economic education focusing on sex and relationships and alcohol education. http://www.nice.org.uk/guidance/ indevelopment/gid-phg0

NOBELIUS, A.-N., KALINA, B., POOL, R., WHITWORTH, J., CHESTERS, J. & POWER, R. (2010). Sexual and reproductive health information sources preferred by out-of-school adolescents in rural southwest Uganda. *Sex Education,* 10 (1)**,** 91-107.

NOIBI, D. (1993). An Islamic perspective. In: (ED.), R. T. (Ed.) *Religion, Ethnicity and Sex Education: exploring the issues.* London, National Children's Bureau.

NOIBI, D. (1998). The Islamic concept of sex, sexuality and 'sex education': a theological perspective, in M. J. Reiss & A. A. Mabud (Eds) *Sex Education and religion*. Cambridge: The Islamic Academy.

NOLAND, C. M. (2012). Institutional barriers to research on sensitive topics: Case of sex communication research among university students. *Journal of Research Practice*, *8*(1), Article M2. Retrieved from http://jrp.icaap.org/index.php/jrp/article/view/332/262

NOOR, Z. (2007). Gender justice and Islamic family laws reform in Malaysia. *Kajian Malaysia,* XXV (2), 121-156.

NORD, W., A. and HAYNES, C., C. (1998). Taking Religious Seriously Across Curriculum. USA: ASCD.

NOTZER, N., et al. (1984). Effect of religiosity on sex attitudes, experience and contraception among university students. *Journal of Sex and Marital Therapy,* 10 (1), 57-62.

NUNDY, K. (2004). The Global Status of Legislative Reform Related to the Convention on the Rights of the Child. New York: UNICEF.

Nurullah, A. S. (2008). Globalisation as a Challenge to Islamic Cultural Identity. *The International Journal of Interdisciplinary Social Sciences.* 3 (6), 45-52.

OCHBERG, R. L. (1996). Interpreting Life Stories. In R. JOSSELSON (Ed.), *Ethics and Process in the Narrative Study of Lives* (pp. 97-113). California: USA: SAGE Publications.

OCHS, E. (1979). “Transcription as Theory.” Pp. 43–72. Developmental Pragmatics. Elinor Ochs and Bambi Schieffelin, editors. Academic Press.

OFSTED. (2002). Sex and Relationships. Northants: Ofsted.

OFSTED. (2005). *Personal, social and health education*. London: Ofsted.

OFSTED. (2007). Time for Change? Personal, social and health education. London: Ofsted.

OFSTED. (2010). Personal, social, health and economic education in schools. London: Ofsted.

OLAYIWOLA, A. R. O. (1993). Interpersonal communication human interaction and societal relationships in Islam. *African Media Review,* 7 (3), 91-104.

OLLIS, D. and MITCHELL, A. (2001). Talking sexual health: National framework for education about HIV/AIDS, STDs and blood borne viruses in secondary schools. Canberra, Australian Committee on AIDS and Related Diseases.

ORGOCKA, A. (2004). Perceptions of communication and education about sexuality among Muslim immigrant girls in the US. *Sex Education,* 4 (3), 255-271.

OSHI, D. C. and NAKALEMA, S. (February 2005). The role of teachers in sex education and the prevention and control of HIV/AIDS in Nigeria. *Sex Education,* 5 (1), 93 - 104.

OTT M. A., PFEIFFER E.J., FORTENBERRY, J.D. (2006). Perceptions of sexual abstinence among high-risk early and middle adolescents**.** *Journal of Adolescent Health* 2006, 39**,** 192-198.

OTTAWAY, M. (2004). Women's Rights and Democracy in the Arab World. *Carnegie Papers*, 42. 3-12.

PANCHAUD, C. S., SINGH, D. FEIVELSON. & DARROCH J. E. (2000). Sexually-Transmitted Diseases among Adolescents in Developed Countries *Family Planning Perspectives,* 321 (1), 24- 32.

PANGKAHILA, W. (1997). Perkembangan Seksual Remaja: Masalah dan Upaya Mengatasinya.) *Seminar Nasional Kesehatan Reproduksi Remaja [National Seminar on Adolescent Reproductive Health].* Yayasan Lembarga Konsumen Indonesia, Bukit Tinggi.

PARKER, R., WELLINGS, K. & LAZARUS, J. V. (2009). Sexuality education in Europe: an overview of current policies, Sex Education, *Sex Education,* 9 (3)**,** 227-242.

PATON, D. (2009). Exploring the evidence on strategies to reduce teenage pregnancy rates. *Nursing Times*, 105 (42, 22nd Oct), 22-25.

PATTON, M., Q. (1990). Qualitative evaluation and research methods. (2nd ed). Newbury Park, CA: Sage.

PATTON, M., Q. (2002). Qualitative Research and Evaluation Methods. 3rd edition. Sage Publications, London.

PENSTATE UNIVERSITY (2007) IRB Guideline 1: Parental Consent and Child Assent. Available from: http://www.research.psu.edu/policies/researchprotections/irb/documents/guide1.pdf. Accessed online on 29th May 2012.

PETRE, J. (2005). Fears Over Christians Attending Faith Schools. The Daily Telegraph, 2.

PG. HAJI MUHAMMAD, D. N. (November 2009). *A Critical Study of the Educational System in Brunei Darussalam in the Lights of Al-Attas' Philosophy of Education.* Doctor of Philosophy, University of Birmingham, United Kingdom.

PHASHA, N. (2012). Sexual abuse of teenagers with intellectual disability: An examination of South African literature. *Procedia - Social and Behavioral Sciences*, 69, 1693-1699.

PHILLIPS, A. (2010). *Gender & Culture*. Cambridge: UK, Policy Press.

PHILPOTT, A., KNERR, W. & BOYDELL, V. (2006). Pleasure and Prevention: When Good Sex Is Safer Sex. *Reproductive Health Matters,* 14 (28)**,** 23-31.

PLANNED PARENTHOOD FEDERATION OF AMERICA. (2013). *Birth Control*. New York: Planned Parenthood Federation of America. [Online]. http://www.plannedparenthood.org/health-topics/birth-control-4211.htm. Accessed online 22nd March 2013.

PLANNED PARENTHOOD FEDERATION OF AMERICA. (2013). *Reducing Teenage Pregnancy.* New York: Planned Parenthood Federation of America. [Online].http://www.plannedparenthood.org/files/6813/9611/7632/Reducing_Teen_Pregnancy.pdf, accessed July 29, 2015.

PLATZER, H. & JAMES, T. (1997). Methodological issues conducting sensitive research on lesbian and gay men's experience of nursing care. *Journal of Advanced Nursing*, 25, 626-633.

POWELL, L. H. & JORGENSEN, S. R. (1985). Evaluation of a church-based sexuality education program for adolescents. *Family Relations,* 475-482.

PRIGOGINE, L. and STENGERS, I. (1985). Order out of Chaos London: Flamingo.

PUCHTA, C. & POTTER, J. (2004). Focus Group Practice. London: SAGE Publications Ltd.

PURI, J. (1999). Woman, body, desire in post-colonial India. Narratives of gender and sexuality. New York, Routledge.

RADDON, A. (2010). Early stage research training: Epistemology & ontology in social science research. *Generic Skills Training for Research Students.* Available from: https://www2.le.ac.uk/colleges/socsci/documents/research-training presentations/EpistFeb10.pdf [Accessed on 15th August 2014].

RAFFERTY, A.E., JIMMIESON, N.L. & ARMENAKIS, A.A. (2013). Change readiness: a multilevel review. *Journal of Management*, 39, 110-135.

REISS, M. J. (2003). Sex and relationships education. In: Key Issues in Secondary Education: Introductory Readings, 2nd edn, Beck, J. & Earl, M. (Eds), Continuum, London, 172-181.

RESEARCHER,C. (2010). *Issues for Debate in Sociology,* USA, SAGE Publications Inc.

Richardson, J. G. & Cranston, J. E. (1981). Social Change, Parental Values, and the Salience of Sex Education. *Journal of Marriage and the Family*, 43:547–558.

RICHARDSON, K. (ed.) (2005). *Managing Organisational Complexity: Philosophy, Theory and Application*. IAP, Greenwich.

RICHMOND, S. & HARPER, D. (2006). *Malaysia, Singapore & Brunei*. Available online: https://books.google.co.uk/books?id=9a02sRJKFhMC&printsec=frontcover&source=gbs_ge_summary_r&cad=0#v=onepage&q&f=false. [Accessed on 03rd August 2015].

RICHTER, M.S. & *MLAMBO, G. T.* (2005). *Perceptions of rural teenagers on teenage pregnancy. Health Sa Gesonheid*, 10 (2), 61-70.

RILEY, J. (1990). *Getting the Most From Your Data: A Handbook of Practical Ideas on How To Analyse Qualitative data*. Bristol: UK: Technical and Educational Services Ltd.

ROGSTAD, J. (2009). Towards a Success Story? Turkish Immigrant Organizations in Norway. *Turkish Studies,* 10 (2), 277-294.

ROLSTON, B., SCHUBOTZ, D. & SIMPSON, A. (2005). Sex education in Northern Ireland schools: a critical evaluation. *Sex Education,* 5 (3)**,** 217-234.

ROSEN, J.E., MURRAY, N.J. AND MORELAND, S. (2004). 'Sexuality Education in Schools: The International Experience and Implications for Nigeria', Policy Working Paper Series, No. 12.

RØTHING, A. and SVENDSEN, S. H. B. (2010). Homotolerance and Heterosexuality as Norwegian Values. *Journal of LGBT Youth,* 7 (2), 147-166.

ROUDI-FAHIMI, F. (2013). Achieving MDG 1 in the Arab region: Gender equality and role of the families 1. DIFI Family Research and Proceedings, 2013(1).

RUNEBORG, A. (2004). Sexuality - A super force. Young People, sexuality and rights in the era of HIV/AIDS.) Stockholm, Sida: Department for Democracy and Social Development.

RYAN, J. (2000). A guide to teaching international students. Oxford: Oxford Centre for Staff and Learning Development.

SAHU, B. (2010). *Religion, minority status and reproductive behaviour among Muslims and Hindus in India and Bangladesh.* Rozenberg Publishers: Amsterdam.

SANJAKDAR, F. (2004). Developing Appropriate Sexual Health Education Curriculum Framework for Muslim Students. In B. van Driel (Ed.), Confronting Islamaphobia in educational practice (pp. 143-162). Sterling, Staffordshire: Trentham Books.

SANJAKDAR, F. (2009) 'Teacher talk': the problems, perspectives and possibilities of developing a comprehensive sexual health education curriculum for Australian Muslim students. *Sex Education,* 9 (3), 261-275.

SANJAKDAR, F. (2013). Educating for sexual difference? Muslim teachers' conversations about homosexuality. *Sex Education*, 13 (1), 16-29.

SARWAR, G. (2004). Sex Education: The Muslim Perspective. London: Muslim Educational Trust.

SAUNDERS, G. E. (1994) A History of Brunei. Available from: http://books.google.co.uk/books?id=SQ4t_OJgSjAC&pg=PA129&lpg=PA129&dq=school+health+program+Brunei&source=bl&ots=ozNmpyQDG4&sig=_NI9Q8t-ootTN7j6UMq5V3nbxQM&hl=en&ei=O8WxTvzACcn28QOGm-ygAQ&sa=X&oi=book_result&ct=result&resnum=8&ved=0CGUQ6AEwBw#v=onepage&q&f=false. Accessed online on 5th November 2011.

SCALES, P. (Oct. 1981). Sex Education in the '70s and '80s: Accomplishments, Obstacles and Emerging Issues. *Family Relations,* 30 (4, Family Life Education), 557-566.

SCHOOL HEALTH PROMOTION. (2008). *Report of an Inter-country Workshop Bangkok, Thailand, 12–15 December, 2006*, New Delhi.

SCHOOL HEALTH PROMOTION. (2008). *Report of an Inter-country Workshop Bangkok, Thailand, 12–15 December, 2006*. New Delhi.

SCHUBOTZ, D. and O'HARA, M. (2011). A shared future? Exclusion, stigmatization and mental health of same-sex-attracted young people in Northern Ireland. *Youth Society,* 43 (2), 488-508.

SEIDMAN, I. (2006). *Interviewing as Qualitative Research*. New York: Columbia University.

SEIFFGE-KRENKE I. (2003).Testing theories of romantic development from adolescence to young adulthood: Evidence of developmental sequence. International Journal of Behavioral Development. 27 (6), 519–531.

SENG PIEW LOO. (2009). Ethnicity and educational policies in Malaysia and Brunei Darussalam. *SA-eDUC JOURNAL, 6 (2), 146-157.*

SENN, C. Y., GEE, S. S. AND THAKE, J. (2011). Emancipatory Sexuality Education and Sexual Assault Resistance: Does the Former Enhance the Latter? *Psychology of Women Quarterly*. 35(1):72-91.

SEX EDUCATION FORUM (1998). Forum Factsheet 17: Talking about sex and relationships with children and young people in public care. London: NCB.

SEX EDUCATION FORUM. (1994). “Forum factsheet 1: Religion, ethnicity and sex-education issues for teachers.”. London: Sex Education Forum & National Children's Bureau.

SEX EDUCATION FORUM. (1996). “Forum factsheet 10: Developing partnerships in sex education: A multi-cultural approach.”. London: Sex Education Forum & National Children's Bureau.

SEX EDUCATION FORUM. (2008a) Key findings; Teachers’ survey on sex and relationships education. London: NCB.

SEX EDUCATION FORUM. (2008b) Key findings; Young people’s survey on sex and relationships education. London: NCB.

SEX EDUCATION FORUM. (2010a) Does sex and relationships education work? A sex Education Forum evidence briefing. NCB. http:// http://www.ncb.org.uk/media/494585/sef_doessrework_2010.pdf

SEX EDUCATION FORUM. (2010b). Understanding Sex and Relationships Education (London: National Children’s Bureau)
Read more at http://www.fpa.org.uk/factsheets/sex-and-relationships-education#ltJBkoxt2hJbvReZ.99

SEX EDUCATION FORUM. (2011) Parents and SRE: A Sex Education Forum evidence briefing. London: NCB.http:// http://www.ncb.org.uk/media/333401/parents___sre.pdf

SEX EDUCATION FORUM. (2013) Survey findings: young people, consent and SRE in The Consent Issue (2014), NCB. http:// www.sexeducationforum.org.uk/resources/sex-educationalsupplement.aspx

SEX EDUCATION FORUM. (2014) Survey findings: teachers and SRE, media release 06-06-14 http://www.sexeducationforum. org.uk/policy-campaigns/sre-its-my-right-media-release.aspx

SHAHRUR, M. (2009). *The Qur'an, Morality and Critical Reason*. Boston, Brill.

SHAIKH, B.T., AZMAT, S.K. & MAZHAR, A. (2013). Family planning and contraception in Islamic countries: a critical review of the literature. *J.Pak Med Assoc.,* 63 (4), S67-72.

SHAMSUL, A., B. (2005). Islam embedded: Religion and plurality in Southeast Asia as a mirror for Europe. *Asia Europe Journal*, 3(2), 159–178.

SHARMA, S. AND PASHA, A. (2011). Are Muslim Women Behind in their Knowledge and of Contraception in India? *Journal of Public Health and Epidemiology,* 3 (13), 632 – 641.

SIECUS — Sexuality Information and Education Council of the United States. (n.d.). *State Profiles 2010: A Portrait Of Sexuality Education And Abstinence- Only-Until-Marriage Programs In The States. Fiscal Year 2010 Edition.* New York: SIECUS. [Online]. http://www.siecus.org/index.cfm?fuseaction=Page. ViewPage&PageID=487, accessed June 25, 2015.

SIECUS (1999). Sexuality Education in the Schools: Issues and Answers, SIECUS Report, 27, 6.

SIECUS (2009). What the Research Says: Comprehensive Sex Education, SIECUS Fact Sheet. Available at: http://www.siecus.org/_data/global/images/What%20the%20Research%20Says-CSE-1.pdf Access online: 3rd June 2015.

SIMMONS, E., & WILMOT, A. (2004). Incentive Payments on Social Surveys: a Literature Review. *Social Survey Methodology Bulletin*, 53: 1-11.

SIMONS, L. G., et al. (2009). The effect of religion on risky sexual behavior among college students. *Deviant Behaviors,* 30 (5), 467–485.

SINGH, S., et al. (2005) Evaluating the need for sex education in developing countries: sexual behaviour, knowledge of preventing sexually transmitted infections/HIV and unplanned pregnancy. *Sex Education,* 5 (4), 307 – 331.

SINHA, J. W., CNAAN, R. A. & GELLES, R. J. (2009). Adolescent risk behaviors and religion: Findings from a national study. *Journal of Adolescence,* 30**,** 231–249.

SKIRSTAD, B. & HANSTAD, D., V. (2013). Gender matters in sport event volunteering. Managing Leisure, 18 (4), 316-330.

SMITH, C. (2013). Anti-Islamic sentiment and media framing during the 9/11 decade. *Journal of Religion and Society*, 15, 1-15.

SMITH, C., DENTON, M. L., FARIS, R. & REGNERUS, M. (2002). Mapping American adolescent religious participation. *Journal for the Scientific Study of Religion,* 41 (4)**,** 597–612.

SMITH, G., KIPPAX, S., AGGLETON, P., & TYRER, P. (2003). HIV/AIDS School-based Education in Selected Asia-Pacific Countries. *Sex Education,* 3 (1), 3-21.

SMYTH, M. (2004) Using participative action research with war-affected populations: lessons from research in Northern Ireland and South Africa. In: Smyth, M. & Williamson, E. (eds.) *Researchers and their 'Subjects': Ethics, Power, Knowledge and Consent.* Bristol: Policy Press.

SOCIAL EXCLUSION UNIT (1999). *Teenage Pregnancy: Report by the Social Exclusion Unit*. London: Stationery Office.

SOLOMON-FEARS, C. (2015). *Teenage Pregnancy Prevention: Statistics and Programs.* USA: Congressional Research Service.

SORENSEN, S. (2007). Adolescent Romantic Relationships Fact Sheet. Act for Youth Center of Excellence. *New York, 1-4*. Available online: https://www.dibbleinstitute.org/Documents/reasearch_facts_romantic_0707.pdf Accessed on 02nd August 2013.

SPENCER-OATEY, H. (2012). *What is culture? A compilation of quotations. Global PAD Core Concepts*. Available at Global PAD Open House http://go.warwick.ac.uk/globalpadintercultural. [Accessed online on 17th February 2016].

SPERBER, A. D. (2004). Translation and validation of study instruments for cross-cultural research. *Gastroenterlogy*. 126 (1): S124 -128.

SPRATT, J. ET. AL. (2010). We are the ones that talk about difficult subjects: nurses in schools working to support young people's mental health, *Pastoral Care in Education*, 28 (2), 131-144**.**

SPRECHER, S., TREGER, S. & SAKALUK, J. K. (2013). Premarital sexual standards and sociosexuality: Gender, ethnicity and cohort differences. *Archive of Sexual Behavior.* Available at: http://www.researchgate.net/publication/248396901_Premarital_Sexual_Standards_and_Sociosexuality_Gender_Ethnicity_and_Cohort_Differences Access on 03rd August 2015.

SPRUYT, B. & ELCHARDUS, M. (2012). Are anti-Muslim feelings more widespread than anti-foreigner feelings? Evidence from two split-sample experiments. Ethnicities, 12(6), pp.800–820.

SRIKANTHAN, A. AND REID, R. L. (2008). Religious and Cultural Influences on Contraception, Women's Health.

STACEY, R. D., GRIFFIN, D. and SHAW, P. (2000). *Complexity and Management: fad or radical challenge to systems thinking?* London: Routledge (658.4 STA)

STAFFORD, A. & SMITH, C. (2009). Practical Guidelines on Consulting, Conducting Research and Working in Participative Ways with Children and Young People Experiencing Domestic Abuse. Scottish Government Social Research. Available from http://www.scotland.gov.uk/Resource/Doc/284756/0086482.pdf. Accessed online on 29th May 2012.

STANGER-HALL, K.F. & HALL, D.W. (2011). Abstinence-Only Education and teen pregnancy rates: Why we need Comprehensive Sex Education in the U.S. *PLoS ONE*, 6 (10), 1-11.

STANLEY, B. & SIEBER, J. E. (1992). *Social Research on Children and Adolescents: Ethical Issues*. USA: SAGE Publications.

STATE OF CANADA. (2006). Violence against Women in Canada by the Numbers. Ottawa, Canada.

STATTIN, H. & KERR, M. (2000). Parental monitoring: A reinterpretation. Child Development, 71, 1072 – 1085.

STEUTEL, J. & SPIECKER, B. (2004). Sex education, state policy and the principle of mutual consent. *Sex Education*, 4(1), 49–62.

STRABAC, Z. & LISTHAUG, O. (2008). Anti-Muslim prejudice in Europe: A multilevel analysis of survey data from 30 countries. *Social Science Research,* 37**,** 268-286.

STRABAC, Z. & LISTHAUG, O. (2008). Anti-Muslim prejudice in Europe: A multilevel analysis of survey data from 30 countries. *Social Science Research,* 37, 268-286.

STRAUSS, A. L. & CORBIN, J. (1998). Basics of Qualitative Research. London: Sage.

STRAUSS, A. L., & CORBIN, J. (1990). Basics of Qualitative Research: Grounded Theory Procedures and Techniques. London: GBR: SAGE.

SWANN, C., BOWE, K., MCCORMICK, G. & KOSMIN, M. (2003) Teenage pregnancy and parenthood: a review of reviews: Evidence briefing; Health Development agency.

SWANN, C., BOWE, K., MCCORMICK, G., & KOSMIN, M. (2003). Teenage pregnancy and parenthood: a review of reviews. London: Health Development Agency.

TABATABAIE, A., (2014). Childhood and adolescent sexuality, Islam, and problematics of sex education: a call for re-examination. *Sex Education*, 15(3), 276–288.

TALIB, N. S. (December 2002). 'A Resilient Monarchy: The Sultanate of Brunei and Regime Legitimacy in an Era of Democratic Nation-States', *New Zealand Journal of Asian Studies,* 4(2), 134-147.

TANIGUCHI, H. (2006). Men's and women's volunteering: Gender differences in the effects of employment and family characteristics. *Non-profit and Voluntary Sector Quarterly*, 35 (1), 83-101.

TAVAKOL, M., TORABI, S. & GIBBONS, C. (2003). A Quantitative Survey of Knowledge of Reproductive Health Issues of 12-14-year-old Girls of Different Ethnic and Religious Backgrounds in Iran: Implications for education, *Sex Education,* 3 (3)**,** 231-239.

TEENAGE PREGNANCY UNIT (August 2006). Under 18 conception data for top tier local authorities LAD1 1998–2004 [online]. Available from: www.dfes.gov.uk/teenagepregnancy/dsp_showDoc.cfm?FileName=ACF58FC%2Exls Accessed online on 3rd August 2015.

TEENAGE PREGNANCY UNIT. (2003). Teenage pregnancy strategy evaluation: Annual synthesis report no 2: 2002, London: TPU.

THE SCOTTISH GOVERNMENT. (December 2014). Conduct of Relationships, Sexual Health and Parenthood Education in Schools. Edinburgh: The Scottish Government.

THOMPSON, N. (1993). *Anti-Discriminatory Practice*. London: Macmillan.

THURSTONE, L. L. (1928). Attitudes can be measured. *American Journal of Sociology*, 33, 529–554.

TIFFANY, J. (2011). A Sexuality Education Discourses Framework: Conservative, Liberal, Critical, and Post-Modern. *American Journal of Sexuality Education,* 6**,** 133-175.

TOBIN, G., & BEGLEY, C. (2004). Methodological rigour within a qualitative framework. *Journal of Advanced Nursing*, 48, 388-396.

TOFT, A. (2014). Re-imagining bisexuality and Christianity: The negotiation of Christianity in the lives of bisexual women and men. *Sexualities,* 17 (5/6), 546-564.

TOSEY, P. (2002). Teaching on the Edge of Chaos: Complexity Theory, Learning Systems and Enhancement. University of Surrey. UK. Available from: http://epubs.surrey.ac.uk/1195/1/fulltext.pdf [Accessed online on 23rd February 2016].

TRIVEDI, D., BUNN, F., GRAHAM, M. & WENTZ, R. (2007). Update on review of reviews on teenage pregnancy and parenthood , submitted as an Addendum to the first evidence briefing 2003.

TURNBULL, T., Van WERSCH A., Van SCHAIK, P. (2008). A review of parental involvement in sex education: The role for effective communication in British families. *Health Education Journal*, 67, 182 – 195.

TZAMOURANI, P. & LYNN, P. (2000). Do Respondents Incentives Affect Data Quality? Evidence from an Experiment. *Survey Methods Newsletter* 20(2): 3-7.

UK YOUTH PARLIAMENT. (2007). Sex and Relationships Education: Are You Getting It?, London: UK Youth Parliament.
Read more at http://www.fpa.org.uk/factsheets/sex-and-relationships-education#ltJBkoxt2hJbvReZ.99

UK YOUTH PARLIAMENT. (2014). BYC and Leading Youth Organisations Call for Statutory Sex Education in all Party Manifestos. London: UK Youth Parliament Org. Available at: http://www.ukyouthparliament.org.uk/2014/news/byc-leading-youth-organisations-call-statutory-sex-education/ [Access online on 30th July 2015].

ULLEBERG, I. (2009). The role and impact of NGOs in capacity development: From replacing the state to reinvigorating education. Paris, International Institute for Educational Planning, UNESCO.

UMBERSON, D. & MONTEZ, J. K. (2010). Social relationship and health: A flashpoint for health policy. J Health Soc Behav. 2010 ; 51(Suppl): S54–S66.

UN Committee on the Rights of the Child. (2008). 49th session, Consideration of reports submitted by states parties under Article 44 of the Convention, Concluding observations: United Kingdom and Northern Ireland. Geneva: United Nations.

UN. (2014). Special Rapporteur on violence against women finalizes country mission to the United Kingdom and calls for urgent action to address the accountability deficit and also the adverse impacts of changes in funding and services. Statement accessed from http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=14514&LangID=E 17 November 2014.

UNESCO (2009) International guidelines on sexuality education; an evidence informed approach to effective sex, relationships and HIV/STI education. Paris: UNESCO. Available at: http://unesdoc.unesco.org/images/0018/001832/183281e.pdf Accessed online 3rd August 2015.

UNESCO et al., International Technical Guidance on Sexuality Education: An Evidence-Informed Approach for Schools, Teachers, and Health Educators: Vol. 1, UNICEF At a Glance: Brunei Darussalam.

UNESCO. (2009). The Rationale for Sexuality Education. Paris: UNESCO.

UNESCO. (2011) Costs and cost-effectiveness analysis of school-based sexuality education programmes in six countries. Paris: UNESCO. http://unesdoc.unesco.org/ images/0021/002116/211604e.pdf, Accessed online on 25th July 2015.

UNESCO. (2011). School-Based Sexuality Education Programmes: A Cost and Cost-Effectiveness Analysis in Six Countries. Paris: UNESCO.

UNESCO. (2014) Comprehensive sexuality education; the challenges and opportunities of scaling up. Paris: UNESCO. http://unesdoc.unesco.org/images/0022/002277/ 227781E.pdf, Accessed online on 25th July 2015.

UNESCO. (December 2009). International Technical Guidance on Sexuality Education: An evidence-informed approach for schools, teachers and health educators. Paris: UNESCO.

VALENTINE, G., BUTLER, R. & SKELTON, T. (2001). The ethical and methodological complexities of doing research with 'vulnerable' young people. *Ethics, Place and Environment.* 4:117-178.

VARMA, P. K. (1999). *The Great Indian Middle Class.* New Delhi: Penguin Books.

VISSER, M.J., J.B. SCHOEMAN, AND J.J. PEROLD. (2004). Evaluation of HIV/AIDS prevention in South African schools. *Journal Health Psychology*, 9 (2), 263–80.

WAHBA, M. & ROUDI-FAHIMI, F. (2012). The Need for Reproductive Health Education in Schools in Egypt. Washington, DC: Population Reference Bureau.

WALDROP, M.M. (1992). *Complexity: The Emerging Science at the Edge of Chaos.* Penguin, Harmondsworth.

WALKER, J. L. (2001). A qualitative study of parents' experiences of providing sex education for their children: The implications for health education. *Health Education Journal,* 60, 132 – 146

WAMOYI, J., FENWICK, A., URASSA, M., ZABA, B., AND STONES, W. (2010). 'Parentchild Communication about Sexual and Reproductive Health in Rural Tanzania: Implications for Young People's Sexual Health Interventions', *Reproductive Health*, 7 (6), Available online at: http://www.reproductive-healthjournal.

WASSERHEIT, J. N., ARAL, S. O., & HOLMES, K. (Eds.), & HITCHCOCK (associate Ed.) (1991). Research issues in human behavior and sexually transmitted diseases in the AIDS era. Washington, DC: American Society for Microbiology.

WEAVER, H., SMITH, G. & KIPPAX, S. (2005). School-based sex education policies and indicators of sexual health among young people: a comparison of the Netherlands, France, Australia and the United states. *Sex Education,* 5 (2)**,** 171-188.

WEIL, F. D. (1985). The variable effects of education on liberal attitudes: A comparative-historical analysis of anti-Semitism using public opinion survey data. American Sociological Review, 50, 458-474.

WEINER, B.J. (2009). A theory of organisational readiness for change. Implementation Science, 4 (1), 67.

WELLINGS K., NANCHAHAL K., MACDOWALL W., MCMANUS S., ERENS B. & MERCER C.H. (2001). Sexual behaviour in Britain: early heterosexual experience. *Lancet,* 2001, 358 (9296):1843-1850.

WELLINGS, K., WILKINSON, P., GRUNDY, C., KANE, R., LACHOWYCZ, P. J., STEVENS, M., GERRESU, M., STEPHENSON, J., FRENCH, R., KINGORI, P., BROOKER, S., WILLIAMS, B., SIMPSON, C. & LAM, P. (2005). Teenage pregnancy strategy evaluation report: Teenage Pregnancy Unit.

WELLS, N. (2009). Too Much, Too Soon: The government's plans for your child's sex education. Available from: http://www.famyouth.org.uk/publications/too-much-too-soon.pdf. Accessed online on 16th June 2012.

WHELLAN-BARRY, K.S., GORDON, J.R. & HININGS, C.R. (2003). Strengthening organizational change processes: recommendations and implications from a multilevel analysis. *Journal of Applied Behavioral Science*, 39, 186-207.

WHITEHEAD, B.D., WILCOX, B.L., ROSTOSKY, S.S., RANDALL, B., & WRIGHT, M.L.C. (2001). *Keeping the Faith: The Role of Religion and Faith Communities in Preventing Teen Pregnancy*. Washington, DC: National Campaign to Prevent Teen Pregnancy.

WIESNER-HANKS, M. E. (2010).*Christianity and Sexuality in the Early Modern World: Regulating Desire, Reforming Practice*. (2nd Ed.), UK: Routledge.

WIGHT, D., PLUMMER, M.L., MSHANA, G., WAMOYI, J., SHIGONGO, Z.S., & ROSS, D.A. (2006). Contradictory sexual norms and expectations for young people in rural Northern Tanzania**.** *Soc Sci Med*, 62 (4), 987-997.

WILES, R., CROW, G., HEATH, S., & CHARLES, V. (2005). Informed Consent in Social Research: A Literature Review. ESRC National Centre for Research Methods. http://eprints.ncrm.ac.uk/85/1/MethodsReviewPaperNCRM-001.pdf, Accessed online on 25th May 2012.

WILES, R., CROW, G., HEATH, S., & CHARLES, V. (2008). The Management of Confidentiality and Anonymity in Social Research. *International Journal of Social Research Methodology*, 11 (5), 417-428.

WILLIAMS, M. (2000). Interpretivism and generalisation. *Sociology***,** 34 (2), 209-224.

WILLIG, C. (2001). *Introducing Qualitative Research in Psychology: Adventures in Theory and Method*. Buckingham: UK: Open University Press.

WILSON, C. (2001). The changing face of social service volunteering: A literature review. Available online: https://www.msd.govt.nz/documents/about-msd-and-our-work/publications-resources/archive/2001-changingfaceofsocialservice.pdf. [Access online on 02nd August 2015].

WONG, L. P. (2012). An exploration of knowledge, attitudes and behaviours of young multiethnic Muslim-majority society in Malaysia in relation to reproductive and premarital sexual practices. *BMC Public Health*, 12, 865.

WORLD HEALTH ORGANISATION. (2006). Defining sexual health: report of a technical consultation on sexual health, 28-31 January 2002. Switzerland, World Health Organisation

WORLD HEALTH ORGANISATION. (2010). Developing sexual health programmes: A framework for action. Geneva, World Health Organisation.

YAZDANPANAH, M., ESLAMI, M. & NAKHAEE, N. (2014). Effectiveness of the premarital educational programme in Iran. *ISRN Public Health*, 1-5.

YEKINI, A., O. (2008). Women and Intestate Succession in Islamic Law. SSRN Electronic Journal.

YIP, A. K. T., M. KEENAN, and S. PAGE. (2011). Religion, Youth and Sexuality: Selected Key Findings from a Multi-Faith Exploration. Nottingham: University of Nottingham. http://www.nottingham.ac.uk/sociology/pdfs/rys-research-report.pdf

YOUNG, K. and NATHANSON, P. (2003). Answering advocates of gay marriage - Part 1. *The Australian Family Association*.

ZAINUDDIN, H. AND MOORE, R. A. (2003). Audience Awareness in L1 and L2 Composing of Bilingual Writers. *The Electronic Journal for English as a Second Language.* 7 (1). Available online: http://www.tesl-ej.org/wordpress/issues/volume7/ej25/ej25a2/ [Access on 30th July 2015].

APPENDICES

APPENDIX A: GLOSSARY OF ISLAMIC TERMS

This glossary is included as an aid to explain some of the Arabic and Islamic terms that are used in this thesis. It is not designed to be exhaustive and predominantly presents the terms that are used either by the scholars that I have cited, or by the respondents in the study.

Allah	Only God
Akhlak	Practice of virtue, morality and manners in Islamic philosophy
Aqidah	Creed or belief
Aurat	Parts of woman's body and genital that are required to be clothed by Islam
Ghusul	Obligatory bath either after sexual intercourse, ejaculation, completion of menstruation, giving birth and death by natural cause
Hadith	A collection of the accounts of Prophet Muhammad teachings, sayings and doings
Haram	Forbidden
Hijrah	Migration
Hudud	Bounds of acceptable behaviour and punishments for serious crime
Ijtihad	Independent reasoning
Imam	Religious Head
Iman	Faith
Islam	Muslims beliefs by submitting to the Only God which is articulated by a religious text called Qur'an
Maksiat	Immorality or vices
Munakahat	Teaching of marriage and family laws
Nikah	Marriage
Qada'	Certain belief that everything happens by the decree of Allah
Qadar	Concept of divine destiny according to Allah great knowledge and wisdom
Qur'an	The holy book of the Muslims
Shari'a	The body of Islamic religious law based on the Quran

Sirah	Life History of the Prophet
Tabii’	The norm
Tarbiyyah	Moral education and upbringing
Taqwa	Piety
Toharah	Cleanliness
Ummah	The whole community of Muslims bound together by the ties of religion
Ustaz	Male religious teacher/head
Ustazah	Female religious teacher/head
Zina	Adultery or unlawful sexual intercourse

APPENDIX B: INITIAL CONSENT FORM

This informed consent form is for participants in the research titled:
'What are the cultural and religious barriers of Sex and Relationship Education in a Muslim Country'/*/Apakah halangan budaya dan agama dalam Pendidikan Seks dan Perhubungan di Negara Islam? '*

Researcher's name/ *Pengkaji* **:** NAIYIRAH BINTI HAJI TAHAMIT

Supervisors' name/ *Penyelia* **:** DR TEELA SANDERS AND DR SHARON ELLEY

	Add your initials next to the statements you agree with *Tambah singkatan nama di sebelah kepada penyata yang dipersetujui*
I confirm that I have read the Participant Information Sheet dated _____ and the nature and purposes of the research project has been explained to me. I understand and agree to take part. *Saya mengesahkan bahawa saya telah membaca Risalah Peserta Maklumat yang bertarikh _____ dan sifat dan tujuan projek penyelidikan telah diterangkan kepada saya. Saya faham dan bersetuju untuk mengambil bahagian.*	
I understand that I may withdraw from the research project at any stage and that this will not affect my status now or in the future. In addition, should I not wish to answer any particular question, I am free to decline. *Saya faham bahawa saya boleh menarik diri dari projek penyelidikan di mana-mana peringkat dan ini tidak akan menjejaskan status saya sekarang atau pada masa akan datang. Di samping itu, sekiranya saya tidak mahu menjawab soalan yang tertentu, saya bebas untuk menolak.*	
I understand that I will be audiotaped during the focus group/interview. I agree for the data collected from me to be used in relevant future research. *Saya faham bahawa saya akan dirakam secara audio semasa kumpulan fokus/ temubual. Saya bersetuju data yang dikumpul daripada saya akan digunakan dalam kajian yang berkaitan di masa hadapan.*	

I understand that data will be stored in hard and electronic copies of transcripts, or any audiotapes used will be stored. I give permission to authorised individuals from the University of Leeds will have access to it and no one other than research colleagues, supervisors or examiners will have to any of the data collected. I understand that while information gained during the study may be published, I will not be identified and I will be able to check my personal views before it is being published in the thesis. *Saya faham bahawa data akan disimpan dalam salinan kertas dan salinan transkrip secara elektronik, atau mana-mana rakaman suara yang digunakan akan disimpan. Saya memberi kebenaran kepada individu yang diberi kuasa dari University of Leeds mempunyai akses kepada maklumat itu dan tiada seorang pun selain daripada rakan sekerja penyelidikan, penyelia atau pemeriksa akan mempunyai mana-mana data yang dikumpul. Saya faham bahawa manakala maklumat yang diperolehi semasa kajian boleh diulang terbit, saya akan dikenal pasti dan saya akan dapat melihat pandangan peribadi saya sebelum ini yang disiarkan dalam tesis.*	
I agree to take part in the above research project and will inform the lead researcher should my contact details change. *Saya bersetuju untuk mengambil bahagian dalam projek penyelidikan di atas dan akan memaklumkan kepada ketua penyelidik jika terdapat perubahan dalam butiran peribadi saya.*	
I understand that I may contact the researcher if I require further information about the research, and that I may contact the research supervisor, University of Leeds, if I wish to make a complaint relating to my involvement in the research. *Saya faham bahawa saya boleh menghubungi penyelidik jika saya memerlukan maklumat lanjut mengenai penyelidikan, dan saya boleh menghubungi penyelia penyelidikan, University of Leeds, sekiranya saya ingin membuat aduan berkaitan dengan penglibatan saya dalam penyelidikan ini.* **Contact details/*Maklumat Perhubungan*** Researcher/*Penyelidik*: *ssnht@leeds.ac.uk, +6738991319* Supervisor/*Penyelia*: *T.L.M.Sanders@leeds.ac.uk +44 113 343 4714*	

Name of participant/*Nama Peserta*	
Participant's signature/ *Tanda Tangan Peserta*	
Date/ *Tarikh*	
Name of lead researcher/ *Nama Ketua Kajian*	
Signature/ *Tanda Tangan*	

Date/ *Tarikh*	

Once this has been signed by all parties the participant should receive a copy of the signed and dated participant consent form, the letter/ pre-written script/ information sheet and any other written information provided to the participants. A copy of the signed and dated consent form should be kept with the project's main documents which must be kept in a secure location.

Apabila ini telah ditandatangani oleh semua pihak, peserta harus menerima satu salinan Borang Keizinan peserta yang ditandatangani dan bertarikh, surat / pra-penulisan skrip / lembaran maklumat dan mana-mana maklumat lain yang bertulis diberikan kepada peserta. Satu salinan borang persetujuan yang ditandatangani dan bertarikh perlu disimpan dengan dokumen-dokumen utama projek dan mesti disimpan di lokasi yang selamat.

This informed consent form is for young girls and boys participating in the research titled:

What are the cultural and religious barriers of Sex and Relationship Education in a Muslim Country?'/*Apakah halangan budaya dan agama dalam Pendidikan Seks dan Perhubungan di Negara Islam? '*

Please complete and return to me: Naiyirah Tahamit
Sila lengkapkan dan kembalikan kepada saya

Name/Nama: _____

Please read the following statements and tick the appropriate boxes.
Sila baca pernyataan berikut dan tandakan kotak yang sesuai.

	YES	NO
I have read the information sheet attached and understand what this project is about. *Saya telah membaca lembaran maklumat yang dilampirkan dan memahami projek ini mengenai apa.*	□	□
I will be able to ask questions about the project before reaching my decision. *Saya dapat bertanya soalan mengenai projek ini sebelum membuat keputusannya.*	□	□
I understand that I can change my mind at any point and decline to be involved in this research. *Saya faham saya boleh mengubah fikirannya pada bila-bila masa dan menolak untuk terlibat dalam kajian ini.*	□	□
I understand that I will be audio taped during the discussions and interviews. *Saya faham suara saya akan dirakam di dalam perbincangan dan temubual.*	□	□
I understand that the information/opinions I give during the project will be kept securely and confidentially and that I will not be named in any research publications. *Saya faham bahawa maklumat / pendapat yang saya berikan semasa projek akan disimpan dengan selamat serta sulit dan responden tidak akan dinamakan dalam mana-mana penerbitan penyelidikan.*	□	□
I agree to taking part in an interview/focus group discussion as part of this research . *Saya bersetuju/bersetuju untuk mengambil bahagian dalam temubual / perbincangan berkumpulan sebagai sebahagian daripada kajian ini.*	□	□

Your signature: _____ Date: _____
Tandatangan biskita *Tarikh*

This informed consent form is for parents of young girls and boys participating in the research titled, "Barriers of Setting up Sex and Relationship Education in a Muslim Country."

Naiyirah binti Haji Tahamit
University of Leeds
[Sponsored by Brunei Government Scholarship]

This Informed Consent Form has two parts:
• Information Sheet (to share information about the study with you)
• Certificate of Consent (for signatures if you agree that your child may participate)

*Your child will be given a **separate copy** of Project Information Sheet and Informed Consent Form*

Part I: Information Sheet

Introduction

I am a student from the University of Leeds supervised by Dr. Teela Sanders and Dr. Sharon Elley and I am working on a project about the barriers to set up a Sex and Relationship Education in a Muslim country. An important part of this study is to explore the barriers, but also recognising that there may be different perceptions and attitudes of the sexual health and relationship education issues in the country. In my research, I will talk to teenagers, both girls and boys, and ask them a number of questions.

Whenever researchers study children, we talk to the parents and ask them for their permission. After you have heard more about the study, and if you agree, then the next thing I will do is to ask your daughter/son for their agreement as well. Both of you have to agree independently before I can begin.

You do not have to decide today whether or not you agree to have your child participate in this research. Before you decide, you can talk to anyone you feel comfortable with. There may be some words that you do not understand. Please do not hesitate to ask me if you have any question.

Purpose

It is possible that the public schools, clinics and the hospital in this country are not providing some of the information and services that are important for teenagers. In this study, I will discuss with teenage girls and boys on what they know about Sex and

Relationship Education which includes the discussion of caring for their bodies in a healthy way including sexual and reproductive health. I will invite them to share their knowledge and understanding with us about teenage pregnancy as a social issue in Brunei Darussalam and other sexual health related topics such as HIV AIDS, STD's etc, so that I can find ways of meeting their needs at public schools, clinics and hospital.

Selection of Participants

We want to talk to 20 teenagers about their attitudes and perceptions towards sexual health and what information or services they want for themselves. One part of health that we want to talk to them about is sex and sexuality. They will gain self-acknowledgment, sense of purpose, self-awareness and providing a voice for them to say during which their perceptions and attitudes will be valued and used in the research to develop concepts and methods appropriate to the investigation of young people's sexual and reproductive health in Brunei that suits with the national philosophy: Malay Islamic Monarchy.

Voluntary Participation

You do not have to agree that your daughter/son can participate in the study. You can choose to say no and your decision will not affect your child's position in school. We know that the decision can be difficult when it involves your children. And, it can be especially hard when the research includes sensitive topics like sexuality. You can ask as many questions as you like and I take the time to answer them. You don't have to decide today. You can think about it and tell me what you decide later.

Protocol

The research will take place sometimes in March and will take place at XX Secondary School.

1) the following applies only to interviews:

Your daughter/son will participate in an interview with me. If your son/daughter does not wish to answer any of the questions during the interview, he/she may say so and the interviewer will move on to the next question. The interview will take place in his/her school and your child is not required to travel. No one else but the interviewer will be present. If your daughter/son does not wish to answer some of the questions in the interviews, she/he may choose to withdraw from the study at any point. The information recorded is confidential, and no one else except me will have access to the information documented during the interview. The tapes will be destroyed after 3 years period of time.

Duration
There is 1 activity that your child will be involved in: 1) Individual interview. Please be informed that interviews will be conducted at different times and dates and you are required to ensure that your child present at school.

I will ask your child to participate in an individual interview which will take about 1 hour of her/his time. I am doing this inside of school hours.

Altogether, we are asking for about **1 hour** of your child's time.

Risks and Discomforts

There is a slight risk that your son/daughter may share some personal or confidential information by chance or that he/she may feel uncomfortable talking about some of the topics. However, I do not wish this to happen, and he/she may refuse to answer any question or not take part in a portion of the discussion/interview if he/she feels the question(s) are too personal or if talking about them makes him/her uncomfortable. Your daughter/son may choose to tell you about the interview but she does not have to do this. I will not be sharing with you either the questions I ask or the responses given to us by your child.

Benefits
There will be no immediate and direct benefit to your child or to you, but your child's participation is likely to help us find out more about the sexual health needs and information of teenage girls and boys and we hope that these will help the country's schools, clinics, hospitals and policymakers to meet those needs better in the future.

Incentives
Your daughter/son will not be provided with any payment to take part in the research. However, she/he will be given gifts at the end of the research.

Confidentiality
Because something out of the ordinary is being done through research in your child's school community, it will draw attention. If your daughter/son participates, she and you may be asked questions by other people in the community.

We will not be sharing information about your son or daughter outside of the research team. The information that we collect from this research project will be kept confidential. Information about your child that will be collected from the research will be put away and no-one but the researchers, research colleagues, supervisors or examiners will be able to see it. Any information about your child will have a pseudonym name on it instead of his/her real name. Only the researchers will know what his/her pseudonym

is and the data will be stored in hard and electronic copies of transcripts, or any audiotapes used will be stored and will be destroyed after 3 years period.

Sharing of Research Findings

At the end of the study, results will be published in my thesis, feature in published articles and will also be presented at conferences in order that other interested people may learn from my research. Neither your child's name nor any information that can identify you child will ever appear in any reports or articles. I am happy to send you a summary of the study's results. The results summary will be expected to be available after October 2014.

Right to refuse or withdraw

You may choose not to have your child participate in this study and your child does not have to take part in this research if she/he does not wish to do so. Choosing to participate or not will not affect either your own or your child's position in school in any way. Your child may stop participating in the discussion/interview at any time that you or she/he wish without either of you losing any of your rights here.

Who to Contact

If you have any questions you may ask them now or later, even after the study has started.

If you wish to ask questions later, you may contact any of the following:

Contact me: Naiyirah binti Haji Tahamit

Phone: +44 7405047504 (U.K) /+6738991319 (Brunei)

Email: ssnht@leeds.ac.uk

This proposal has been reviewed and approved by research Ethics Committee of University of Leeds, which is a committee whose task it is to make sure that research participants are protected from harm. If you wish to find about more about the research, contact the following:

Contact Details of the Supervisor:

Dr Sharon T. Elley

Phone: +44 113 343 4717

Email: S.T.Elley@leeds.ac.uk

PART II: Certificate of Consent

Certificate of Consent

I have been asked to give consent for my daughter/son to participate in this research study which will involve her completing one individual interview. I understand that she/he will also be asked to give permission and that her/his wishes will be respected. I have been informed about the potential benefit and risk of the study. I am aware that there may be no benefit to either my child or me personally and that we will not be compensated beyond travel expenses. I have been provided with the name of a researcher who can be easily contacted using the number I was given for that person.

I declare that:

- I have read or had read to me this information and consent form and that it is written in a language with which I am fluent and comfortable.
- I have had a chance to ask questions and all my questions have been adequately answered.
- I understand that taking part in this study is **voluntary** and I have not been pressurised to let my child take part.
- I may choose to withdraw my child from the study at any time and my child will not be penalised or prejudiced in any way.
- My child may be asked to leave the study before it has finished if the study doctor or researcher feels it is in my child's best interests, or if my child does not follow the study plan as agreed to.
- By signing this, I am allowing the researcher to audio tape my child as part of this research. I also understand that this consent for recording is effective until the following date: _____. On or before the date, the tapes will be destroyed.
- I agree to send my child to the focal school which is located at XX Secondary School.

Print Name of Parent or Guardian _____
Signature of Parent of Guardian_____
Date _____
Day/month/year

APPENDIX C: INFORMATION SHEETS

Research Project Title:

Barriers of Setting up Sex and Relationship Education in a Muslim Country

Researcher: Naiyirah Haji Tahamit

Information Sheet

I am a student from the University of Leeds and am working on a project that is about the barriers to set up a Sex and Relationship Education in a Muslim country. An important part of this study is to explore the barriers, but also recognizing that there may be different perceptions and attitudes of the sexual health and relationship education issues in the country.

The aims of the study are as follows:

- It explores what the Bruneian young people feeling about sex, relationship and health. Such as what are the lists of topics that should be included in Bruneian SRE.

- To fill key knowledge gaps relating to the nature, magnitude and consequences of reproductive and sexual health problems among young people.

- To develop concepts and methods appropriate to the investigation of young people's sexual and reproductive health in Brunei that suits with the national philosophy: Malay Islamic Monarch.

- To identify culturally-appropriate means by which barriers to good sexual and reproductive health can be overcome.

I would very much like to talk about these issues and hear your views. Respondents will be asked to take part in interviews/focus group discussions. The individual/group discussion will discuss sensitive and embarrassing topics/questions such as sex and relationship, contraception, teenage pregnancy etc. With your permission, your views will be tape-recorded and I will put your views together with those of other respondents in order to gain a better understanding of the research key questions. No respondent will be named at any point in the writing up of this research and the views of all respondents will be treated confidentially. However, anonymity cannot be guaranteed where there is a duty of care, for example disclosing abuse. If you wish to know more about the research before you make your decision, please contact me or my dissertation supervisor. The contact details will be attached below:-

Contact Details of the Researcher	
Name of the Researcher	Miss Naiyirah Haji Tahamit
Telephone number	+44 7405047504 (U.K) +6738991319 (Brunei)
University of Leeds email address	ssnht@leeds.ac.uk

Contact Details of the Supervisors	
Supervisor's name	Dr Sharon T. Elley
Supervisor's telephone number	+44 113 343 4717
Supervisor's email address	S.T.Elley@leeds.ac.uk

I do hope that you will be taking part in this research and thank you in advance for your attention to this matter.

APPENDIX D: ETHICS APPROVAL LETTER

Performance, Governance and Operations
Research & Innovation Service
Charles Thackrah Building
101 Clarendon Road
Leeds LS2 9LJ Tel: 0113 343 4873
Email: j.m.blaikie@leeds.ac.uk

UNIVERSITY OF LEEDS

Naiyirah Tahamit
Sociology & Social Policy
University of Leeds
Leeds, LS2 9JT

AREA Faculty Research Ethics Committee
University of Leeds

14 October 2016

Dear Naiyirah

Title of study: **Barriers of Setting up a Sex and Relationship Education in a Muslim Country – Case Study in Brunei Darussalam.**

Ethics reference: **AREA 11-146**

I am pleased to inform you that the above research application has been reviewed by the ESSL, Environment and LUBS (AREA) Faculty Research Ethics Committee and following receipt of your response to the Committee's initial comments, I can confirm a favourable ethical opinion as of the date of this letter. The following documentation was considered:

Document	Version	Date
AREA 11-146 Letter to the Ethics CommitteeTS.docx	1	13/06/12
AREA 11-146 Project Information Sheets.docx	1	13/06/12
AREA 11-146 participant-consent-forms.doc	1	13/06/12
AREA 11-146 Ethical_Review_Form_V3.doc	2	13/06/12
AREA 11-146 information sheet.docx	1	30/04/12
AREA 11-146 participant-consent-form 2012.doc	1	30/04/12
AREA 11-146 fieldwork-ra-template-jan2010-web-v.doc	1	30/04/12
AREA 11-146 Examples of Questions.docx	1	30/04/12
AREA 11-146 Appendices.docx	1	30/04/12

The Committee made the following comments:

- C1 addresses the potential ethical issues in great detail. Thank you for the thorough work undertaken for this.

- C2, 3, 4, 6 all ok

- C7 position is now that incentives won't be used in first instance. If recruitment is problematic they may be used but with the emphasis on retention of participants. This is OK.

- C15 The difference between criminal acts in UK and Brunei is discussed. It is difficult to negotiate around this - what is ok in the UK is not in Brunei and the consequences may be severe and considered unjust from a British perspective. Given this crimes and activity that involves risk of significant harm to the young person (abuse, rape etc) are to be reported. Activity considered of little risk is to be ignored (sex outside of marriage for example). This seems an entirely reasonable position for the researcher to adopt.

- C17, 19 OK

- Consent form ok

- Info sheet OK

Please notify the committee if you intend to make any amendments to the original research as submitted at date of this approval, including changes to recruitment methodology. All changes must receive ethical approval prior to implementation. The amendment form is available at www.leeds.ac.uk/ethics.

Please note: You are expected to keep a record of all your approved documentation, as well as documents such as sample consent forms, and other documents relating to the study. This should be kept in your study file, which should be readily available for audit purposes. You will be given a two week notice period if your project is to be audited.

Yours sincerely

Jennifer Blaikie
Senior Research Ethics Administrator
Research & Innovation Service
On behalf of Prof Anthea Hucklesby
Chair, AREA Faculty Research Ethics Committee

CC: Student's supervisor(s)

APPENDIX E: INTERVIEW SCHEDULE

Interview Schedule for Policy Makers (One-on-One Interview)

1. What does the term “sex” and relationship [education?] mean to you?
2. Why do you think young people’s sexual health and behaviour is important [to you? to young people? or both]
3. Some people think SRE does not encourage early sexual experimentation. What is your opinion on this?
4. Do you think that marriage should be included in SRE programmes? If yes – why? If no – why not?
5. Do you think SRE programme link with other related health promotion activities? If yes – how?
6. What jobs or government sectors do you think should be involved in setting up sex and relationship education?
7. Do you think that schools that tend to have a strong religious ethos choose to reflect that in their sex and relationship education policy?
8. In general, are there any implications to introducing SRE in Muslim countries? (negative and positive aspects)
9. Do you think it is culturally and religiously appropriate to have SRE in Brunei, why and why not?
10. Do you foresee any possible resistance? If so, how can this be overcome?
11. How do you see your role as a policy maker in developing policies and services in the country?
12. Do you have a vision for how the teaching and learning of Sex and Relationship Education in the country may align with the national philosophy?
13. If so, how would this vision be conveyed and demonstrated to teachers and parents in the community? Do you feel that your vision is shared by other ministries?
14. Is there anything you would like to add about what we have been discussing which you think is important and I may have missed?

Interview Schedule for Senior Health Officers (One-on-One Interview)

1. What do you understand about the role(s) of SRE in a Muslim country?
2. What kind of health information and services do you think should be available in Brunei?
3. Do you think SRE can link with other related health promotion activities?
4. What do you think of SRE in Bruneian schools?
5. What are the positive and negative aspects of SRE?
6. Who do you think should be involved in delivering SRE?
7. Do you think there are any implications to the introduction of SRE in Muslim countries?
8. Are there any particular incidents that you would like to share that illustrate how you feel about your job or the programme or what you are doing?
9. Is there any collaboration amongst government agencies, for example Ministry of Health with Ministry of Education, to deliver information about sexual health?
10. Do you want to add anything else which I may not have covered but you think is important to our discussion?

Interview Schedule for Representatives from BDAC (One-on-One Interview)

1. In general, what is your opinion on Sex and Relationship Education in Bruneian schools?
2. What kind of particular programme do you offer young people in your organisation?
3. How do you think young people respond to your programme?
4. Do you think that your organisation is important in supporting young people's sexual health?
5. Please describe some of the initiatives/support being carried out by your organization to address social problems (sex outside wedlock, teen pregnancy, sexual health related problems such as AIDS/HIV) among the teenagers in the country?
6. What does your organisation tell young people about 'contraceptives' and 'sex outside wedlock'?

7. What sorts/types of messages do you think your programme gives to young people?
8. Do you feel your programme is successful? If so, why?
9. Have you faced any particular challenges in delivering information on sexual health and behaviour?
10. Are there any improvements you would like to see made to your particular SRE programme?
11. Are there any particular incidents that you would like to share that illustrate how you feel about your job or the programme or what you are doing?
12. Do you think your programme can link with other health promotion activities?
13. Is there any government involvement/support offered to your programme?
14. Is there anything you would like to add about what we have been discussing which you think is important and I may have missed?

Interview Schedule for Religious Heads (One-on-One Interview)

1. What does the term “sex” and relationship [education] mean to you?
2. How do you see the true nature of Islam and sex? And the meaning of sex in religion?
3. Where do you think young people should learn about sex and relationships?
4. Why do you think Sexually Transmitted Infection’s STIs) and teenage pregnancy is increasing amongst youth?
5. What Muslim students should be taught about Sex and Relationship?
6. Can Muslim countries establish SRE? Why, why not?
7. Do you recall any Quranic verse or Prophets Hadith that is related to sexual health and behaviours?
8. What are the implications of SRE considering that Brunei is integrated with Malay Islamic Monarchy as a national philosophy?
9. How can sexual health be promoted to Bruneian young people?
10. Is there anything you would like to add about what we have been discussing which you think is important and I may have missed?

Interview Schedule for Teachers (One-on-One Interview)

General Views on SRE

1. What does SRE mean to you?
2. Where do you think young people learn about sex and relationships?

Teaching SRE in Schools

3. What do you think to teachers delivering sex and relationships education considering they are in a position of trust?
4. What roles does Malay Islamic Monarchy play in helping you achieve your overall curricular objectives? Can you share your experiences? Prompt Question: Is there a problem? If yes, do you think the problems will affect the Malay Islamic Monarchy?
5. Do you think teachers and students will face any obstacles in achieving SRE in the country?
6. Do you think that there will be any particular parallels or differences between schools in students' attitudes towards SRE?
7. What do you think the strategies for teaching about HIV/AIDS and STIs should include?

Discussion on Social Issues in Brunei Darussalam

8. What do you think about today's issues on pre-marital sex, teenage pregnancy, early incidences of marriage among youths?
9. In your opinion, does a strong religious and cultural background affect social issues in the country?
10. As a result, do you think anything needs to be done in the education system, religious or health?
11. Is there anything you would like to add about what we have been discussing which you think is important and I may have missed?

Interview Schedule for Young People (One-on-One Interview)

1. I would like to begin by understanding the kind of knowledge you learn during school-based sex education. Could you describe something you have learned in your class? Prompts: sex; relationships; contraception

Sex Education in Schools

2. What do you think about having SRE in schools? Prompts Do you agree or disagree, why and why not?
3. Do you think it is appropriate to have SRE in Brunei, why and why not?
4. Do you think SRE is helpful to you? Prompts: benefits and drawbacks

Sex Education Outside School

5. Outside of school, do you learn about sex, relationships and contraception? Prompt: where from?
6. And how do you think these are influenced by Islam?
7. What do you understand about healthy/unhealthy relationship?
8. Can you recall any project/activity that promotes awareness of sexual health?
9. Do you have any personal experience of someone being stigmatized because of risky sexual behaviours/teen pregnancy/sexual abused/HIV AIDS?
10. Is there anything you would like to add about what we have been discussing which you think is important and I may have missed?

APPENDIX F: DEMOGRAPHIC INFORMATION

NO	NAME **	AGE	SEX	MARITAL STATUS	RACE/ ETHNIC	FAITH/ RELIGION	OCCUPATION**	CURRENT ACADEMIC RANK	KNOWLEDGE OF LANGUAGE
1	A	Between 50 - 60	Female	Married	Bruneian Malay	Islam	Deputy Minister	MA	Malay/English
2	B	Between 50 - 60	Male	Married	Bruneian Malay	Islam	Minister	PhD	Malay/English/Arabic
3	C	Between 50 - 60	Female	Married	Malaysian Malay	Islam	Religious Head	PhD	Malay/English/Arabic
4	D	Between 20 - 25	Male	Single	Bruneian Malay	Islam	Secondary School Art Teacher	BA	Malay/English
5	E	Between 25 - 30	Female	Married	Bruneian Malay	Islam	Secondary School Social Studies Teacher	BA	Malay/English
6	F	Between 25 - 30	Female	Single	Iban	Muslim convert	Secondary School Social Studies Teacher	BA	Malay/English
7	G	Between 25 - 30	Male	Single	Bruneian Malay	Islam	Secondary School Art Teacher	BA	Malay/English
8	H	Between 30 – 35	Male	Single	Chinese	Non-muslim	Secondary School Science Teacher	BA	Chinese/English/Malay
9	I	Between 25 – 30	Female	Single	Chinese	Muslim convert	Primary School English Teacher	BA	Chinese/English/Malay
10	J	Between 25 – 30	Female	Single	Bruneian Malay	Islam	Primary School Teacher/School Counsellor	Diploma	Malay/English
11	K	Between 30 - 40	Female	Married	Bruneian Malay	Islam	Secondary School Economic Teacher	BA	Malay/English
12	L	Between 30 – 40	Female	Married	Bruneian Malay	Islam	Secondary School Teacher	BA	Malay/English
13	M	Between 40 – 50	Female	Married	Bruneian Malay	Islam	Secondary School Religious Teacher	BA	Malay/English
14	N	Between 25 - 30	Male	Single	Bruneian Malay	Islam	Volunteer/University Student	BA	Malay/English
15	O	Between 25 - 30	Female	Single	Bruneian Malay	Islam	Volunteer/University Student	BA	Malay/English

16	P	Between 25 - 30	Male	Single	Bruneian Malay	Islam	Volunteer/University Student	BA	Malay/English
17	Q	Between 40 – 50	Female	Married	Bruneian Malay	Islam	Gynecologist	Associate Professor	Malay/English
18	R	Between 25 – 35	Male	Married	Bruneian Malay	Islam	Division of Disease Control and Prevention	Medical	Malay/English
19	S	Between 25 – 35	Female	Married	Bruneian Malay	Islam	Handling first-hand HIV/AIDS cases in RIPAS	Medical	Malay/English
20	T	Between 14 - 16	Male	Single	Bruneian Malay	Islam	High School Student	Secondary School Year 8	Malay/English
21	U	Between 14 - 16	Male	Single	Bruneian Malay	Islam	High School Student	Secondary School Year 8	Malay/English
22	V	Between 14 - 16	Male	Single	British-born/ Bruneian Malay	Islam	High School Student	Secondary School Year 8	Malay/English
23	W	Between 19 – 24	Female	Single	Bruneian Malay	Islam	University Student	University Year 2	Malay/English
24	X	Between 19 – 24	Female	Single	Bruneian Malay	Islam	University Student	University Year 2	Malay/English
25	Y	Between 19 – 24	Female	Single	Bruneian Malay	Islam	University Student	University Year 2	Malay/English
26	Z	Between 17 – 19	Female	Single	Bruneian Malay	Islam	Pre-University Student	Pre-University/ College	Malay/English
27	AA	Between 25 – 30	Female	Married	Bruneian Malay	Islam	Welfare Officer	BA	Malay/English
28	AB	Early 60’s	Male	Married	Bruneian Malay	Islam	Counsellor	MA in Counselling	Malay/English
29	AC	Early 20’s	Female	Single	Bruneian Malay	Islam	University Student	University Year 3	Malay/English
30	AD	Early 20’s	Female	Single	Bruneian Malay	Islam	University Student	University Year 3	Malay/English
31	AE	Between 20 - 25	Male	Single	Bruneian Malay	Islam	University Student	University Year 3	Malay/English

Note: ** Name and occupation will be changed in my thesis to uphold confidentiality. This is exclusively for me and my research team’s references only.