**CHAPTER I**

**INTRODUCTION**

In continuous technological innovation, today’s young generation undeniably finds themselves more connected to the world than ever before. However, these circumstances expose and become vulnerable particularly to the dangers of online pornography. Our country is a nation entrenched in a conservative value, there has been obstinacy to integrating sex education into the school curriculum. This study explored the readiness of every youth to engage with sex education, despite the cultural reluctance surrounding it. This research assessed The Level of Preparedness for Implementing Sex Education Programs: Quantitative Analysis for Grade 11 Students’ Knowledge and Awareness at King Thomas Learning Academy Inc. in receiving and engaging with sex education. By understanding their readiness, the study identified strengths and potential gaps in the current educational approach, providing insights that can inform future enhancements to the curriculum and support systems.

According to DepEd Order no.031 series of 2018 dated July 18, 2018, the Department of Education (DepEd) has implemented the Comprehensive Sexuality Education (CSE) Framework as part of its efforts to address the growing need for age-appropriate and culturally relevant sex education. The CSE framework is a curriculum-based process by teaching and learning about cognitive, emotional, physical, and social aspects of sexuality that is scientific, age-and-development approach, culturally and gender-responsive, and with a rights-based approach. It aimed to equip the learners with knowledge, skills, attitudes, and values that will empower them to realize their health, well-being, and dignity. This initiative also focuses on the importance of healthy relationships, consent, and life skills development, making sure that youth for today’s generation are equipped with the necessary tools to guide the difficulty of adolescence responsibly.

Sex education programs are important to provide the young generation with the knowledge and skills necessary to make informed decisions about their sexual health and relationships. Implementing sex education programs helps our youth for today to develop critical thinking about risky behavior related to poor reproductive health outcomes. This program will help the young generation to enhance their self-esteem which enables them to deal with different circumstances. By having precise information about sexual health, relationships, and consent, programs like this allow students to navigate complex issues related to sexuality, thereby promoting informed decision-making and reducing the rates of sexually transmitted infections (STIs) and unintended pregnancies. This also promotes healthy relationships by emphasizing respect, communication, and consent while helping to reduce the stigma surrounding sexual topics. Through enhancing self-esteem, encouraging critical thinking, and involving parents and the community, comprehensive sex education serves as a foundational component of holistic education, ultimately contributing to the well-being of individuals and society as a whole can help them prevent unwanted pregnancies and infections or diseases that can be passed through sexual intercourse.

**Statement of the Problem**

This study determined the level of preparedness and factors affecting the Level of Preparedness of Grade 11 students in Implementing Sexual Education Programs at King Thomas Learning Academy Inc.

Specifically, it sought to answer the following questions:

1. What is the level of preparedness of Grade 11 students at KTLA for implementing sex education programs?
2. What factors affect the level of preparedness in implementing sex education programs?
3. Human body and human development
4. Personhood
5. Sexual and reproductive health
6. Human culture and human ought
7. Is there any significant relationship between the level of preparedness and the factors that affect the level of preparedness of grade 11 students at KTLA?

**Objectives of the Study**

The following objectives guided the study:

1. Assess the current level of preparedness for sex education among Grade 11 students at KTLA.
2. Identify the factors that affect the level of preparedness for implementing sex education among Grade 11 students at KTLA, specifically focusing on the: Human body and human development, Personhood, Sexual and reproductive health, Human culture and human ought
3. Determine if there is a significant relationship between the factors influencing preparedness and the actual level of preparedness for sex education among Grade 11 students at KTLA.

**Scope and Limitations**

The study assessed the level of preparedness of Grade 11 students for the implementation of Sex Education Programs, focusing on the inadequate knowledge and awareness by understanding that assessing preparedness ensures that the programs are well-implemented and effectively equip students with necessary knowledge and skills. The respondents were 228 students at King Thomas Learning Academy Inc. selected through purposive sampling. This study's limitations are the unselected students from each section, grade 12 students, and junior high school and elementary students. Those who are absent are not included to avoid errors in the study.

**Significance of the Study**

Understanding the importance of considering this study to be helpful to everyone especially to grade 11 teenagers as it promotes preparedness for sexual education.

This benefited the following beneficiaries:

**Students.** This study can lead them to awareness of the possible results of unprotected sex.

**Parents and Guardians**. The result of this research may encourage them to start a sexual orientation with their children.

**Teachers in KTLA.** The result of this research may help them to know the scope of the content they need to teach.

**School.** The result can be used as a guide to implementing sexual education programs on Grade 11 students.

**DepEd**. This study can be used to implement sexual education programs in other schools.

**Future Researchers**. This study may encourage them to expand studies about sexual orientation among teenagers through the implementation of sex education programs.

**CHAPTER II**

**REVIEW OF RELATED LITERATURE AND STUDIES**

This chapter introduced the review of related research literature and studies that are highly significant to the present study.

**Related Literature**

According to the literature written by Wetzel and Sanchez, (2024). Comprehensive sex education (CSE) encouraged safer sex behavior for teens and young adults. However, young people recognized a gap between sex education as taught in the classroom and the reality of their sexual experiences. Thus, CSE should take into account the perspectives of its target population. This correlates as it focuses on sex education programs for safer sex behavior and preventing pregnancy and STIs.

According to Goldfarb, E. (2021), teenage pregnancy, unintended pregnancies, and unsafe abortions are all directly associated with reproductive health issues, including HIV and low sexual education and access to contraception. With the help of foreign organizations, Zambia has launched a comprehensive sex education (CSE) program that will be integrated into regular classroom activities by educators throughout the entire country. The curriculum is solidly grounded in a discourse on sexual and reproductive rights, which is uncommon in Zambian public discourse about sexuality. This correlates as it investigates how educators view the curriculum and use judgment when putting the CSE into practice in mid-level schools in Zambia's Nyimba district.

According to Zeller et al., (2020). Sex education presents a major dilemma for state-minority relations, reflecting a conflict between basic rights to education and religious freedom. Based on this ethnography of informal sex education among ultra-Orthodox Jews (Haredim) in Israel and England, we frame the critical difference between “age-appropriate” and “life-stage” (marriage and childbirth) models of sex education. This literature correlated in a way that this education has a difference between age appropriateness and life stages, conceptualizing these competing approaches as disputes over “knowledge responsibility”, we call for more context-specific understandings of how educational responsibilities are envisioned in increasingly diverse populations.

According to the literature written by Breuner et al., (2016), adolescents and young adults can benefit from formal sexuality education in schools, which taught about STI/HIV prevention and how to make good sexual decisions. Positive effects, such as a delay in the commencement and reduction in the frequency of sexual activity, a decrease in the number of sexual partners, and an increase in the use of condoms, can happen if comprehensive sexuality education programs are provided in the schools. Moreover, research has also indicated that individuals who have completed sex education classes exhibit lower rates of absenteeism and higher academic achievement. This correlates as it aims to demonstrate that through implementing sex education in school, adolescents like students can benefit from it and can be able to receive appropriate and accurate education about understanding how to practice healthy sexual behavior.

According to the literature written by Haeberland et al., (2015), comprehensive sexuality education (CSE) for adolescents and young people was a mandate that has been frequently called upon governments by the International Conference on Population and Development and related resolutions. It notes the recent trend toward this approach and presents the policy and evidence-based justifications for placing a strong emphasis on gender, power, and rights within programs. The study cited the higher likelihood of reducing rates of unintended pregnancy and STDs when this approach is implemented. This correlates as it aimed to give young people, particularly women and other marginalized youth the ability to see themselves and other people as equal partners in relationships, as capable of taking care of their health, and as individuals who can actively participate in society.

**Related Studies**

According to Cervantes et al., (2023), the implementation of sexual education can identify the effects if the students know about sexual education and most especially prevent the risks of teenage pregnancies and sexual health-related problems. The results indicated that sexual education must be and needed to be implemented in catholic schools. It will give students proper knowledge regarding sex. It also revealed the importance and possible effects of lack of knowledge about it as it wasn't discussed at home. Sex education is necessary for every school. It correlated as this agrees that the implementation of sex education is necessary because sex education is not often discussed inside our houses. Implementing this may also reduce the increasing rate of pregnancy and STDs.

According to Moreira, et al. (2023), it is common for the physical signs of sexual maturity and sexual contact to occur during adolescence. However, most adolescents are not adequately ready for this event leading to negative results. Males tend to have their first sexual relationship earlier while girls tend to contract STDs and infections worse. Sexual education must be constantly taught and should give adequate information about the issues that are connected to sexuality to adolescents. As a result, most adolescents were female and aged between 15 and 17 years. The worst results were found in the dimensions of first sexual intercourse and sexual concerns, with men scoring lower, and in the dimension of sexually transmitted infections and HIV/AIDS, where women performed better. This correlates because it affirms that adolescents are not mature enough to fully understand the acts and consequences of sexual activities hence, sexual education programs are needed to provide the necessary information to prepare them.

According to Sell, et al., (2023). Delivered globally to promote adolescents’ sexual and reproductive health, comprehensive sex education (CSE) is rights-based, and holistic, and seeks to enhance young people’s skills to foster respectful and healthy relationships. This correlates as it investigates underlying mechanisms of impact and factors affecting implementation and undertook a systematic review of process evaluation studies reporting on school-based sex education programs with a gender and power component.

In the study Development and effectiveness assessment of a sex education learning unit for Thai primary students of Chaiwongroj et al., (2020). Two phases were conducted, the development and implementation phase. In the development phase, they gathered students from three different schools and claimed they had prior knowledge about sexual education through different media. Moreover, during the Implementation phase, they provided three lessons, each focused on one serious sexual problem. The lesson plans help the students effectively develop attitudes, understanding, and sexual awareness. They expressed enjoyment while learning about sex with these sessions. Their study correlates in this study as it concludes the effective methods of learning through implementing sexual education programs in the institution.

According to Maimunah, (2019). Sex education is important from the perspective of an adolescent. It includes the avoidance of sex and promiscuity, improvements in knowledge on proper sex education, self-protection, and the effect of free sex that includes STDs. This study's results show that sex education is of utmost importance from the adolescents’ perspective. It correlates as it promotes the implementation of sex education, especially for adolescents. Sex education is necessary for both parents and teachers to provide to adolescents.

**Synthesis**

The gathered literature and studies showed the similarities, differences, and uniqueness of some related research in this study. These several studies and literature helped the researchers and the readers to further understand the present study.

Moreira (2023) and Cervantes (2023), stated that implementing sexual education identifies the effects if the students know about the pros and cons of sexual education, they also stated that implementing sexual education programs must be taught constantly as it will give students proper knowledge about the issues that are connected to the sexuality of adolescents.

The study of Maimunah (2019), differed in how they promote the implementation of sex education for both parents and teachers to provide to adolescents. However, this study showcases implementation to both teachers and students to provide the necessary information.

The unique aspect of this study is that it emphasized that the implementation of sex education programs, will cover all the necessary information needed by the students enabling them to have a higher knowledge and awareness they need to acquire to prevent and avoid the negative effects of lacking knowledge in sexual education. In addition, this study will focus on the parts where students have lesser understanding or information, this will be based on the survey that will be gathered.

**Sex Education as Health Promotion Theory**

(Schaalma et al., 2004)

**Theoretical View on Sex education in Adolescence**

(Freud et al., 1925)

**Adolescent School-Based Sex Education Theory**

(Suleiman et al., 2014)

**The Level of Preparedness in Implementing Sex Education Programs: Quantitative Analysis for Grade 11 Student’s Knowledge and Awareness**

Figure 1. Theoretical Framework

**Theoretical Paradigm**

**Theoretical Views on Sex Education in Adolescence** by Freud et al. (1925), human personality consists of three complementary components: the id, ego, and superego. These elements become integrated as a child progresses through five stages of psychosexual development: oral, anal, phallic, latency, and genital. At each stage, the id channels a child’s instinctual desires for pleasure toward specific areas of the body known as erogenous zones. Freud believed that all stages contribute to the development of behavior and personality. However, for this study, greater emphasis is placed on the last two stages—latency and genitalia—since adolescence begins in these phases, where sexuality becomes more central. These stages are considered more significant than the earlier ones.

**Sex Education as Health Promotion Theory** by Schaalma et al., (2004),health promotion provides students with the knowledge, skills, and attitudes they need to make informed decisions about sexual health and relationships, contributing to their overall emotional, and social well-being. Adopting new behaviors and giving up old habits involves common decision-making, planning, motivational control, and goal prioritization processes. Consequently, despite the particular nature of sexual behavior, models of cognitive change applied to other health-related behaviors also apply to the promotion of safer sex practice. Young people are less likely to have unprotected sexual intercourse if they have acquired a variety of social skills relevant to dealing with romantic and sexual relationships. Many of these social skills and the methods employed to facilitate their development are also important to the promotion of other health behaviors.

**Adolescent School-Based Sex Education Theory** by Suleiman et al., (2014). The school-based sex education remains an important tool to help improve adolescent health outcomes; new efforts are needed to improve its overall impact. A primary reason that school-based sex education falls short stems from the fact that the current theoretical foundation of many curricula asserts that sexual decision-making is primarily a rational, deliberative process. Far from being only a rational process, several affective (emotional and motivational) factors also influence adolescent sexual decision-making. The cognitive, hormonal, emotional, and physical changes that accompany the onset of puberty and occur throughout the teenage years play a significant role in aspects of adolescent sexual risk-t

**THE LEVEL OF PREPAREDNESS IN IMPLEMENTING SEX EDUCATION PROGRAMS: QUANTITATIVE ANALYSIS FOR GRADE 11 STUDENT’S KNOWLEDGE AND AWARENESS**

**OUTPUT**

The level of Preparedness for Implementing Sexual Education Programs: Quantitative Analysis of Grade 11 students at KTLA inc.

**PROCESS**

The following are the procedures the researchers used to gather the data.

1. Formulation of survey questionnaires.

2. Validation of survey questionnaires.

3. Selection of the respondents.

4. Data Gathering.

5. Tallying of responses.

6. Interpreting and evaluating the findings, conclusions, and the recommendation.

**INPUT**

1. What is the level of preparedness of Grade 11 students at KTLA for implementing sex education programs?

2. What factors affect the level of preparedness in implementing sex education programs?

1. Human body and human development
2. Personhood
3. Sexual and reproductive health
4. Human culture and human ought

3. Is there any significant relationship between the level of preparedness and the factors that affect the level of preparedness of grade 11 students at KTLA?

Feedback

Figure 2. Conceptual Framework

**Conceptual Paradigm**

The study's **input** determined the level of preparedness in implementing sex education programs among grade 11 students at King Thomas Learning Academy Inc. and its factors. In addition, it identified the significant relationship between preparedness and the factors that influence it.

To attain the study's goals, the researchers followed the necessary **procedures** to validate and gather data from Grade 11 students of KTLA. This stage consists of the following steps: formulation of survey questionnaires, validation of the survey questionnaires, selection of respondents, gathering the data, tallying the responses, and evaluating the findings, conclusions, and recommendations.

The **output** showed the title The Level of Preparedness in Implementing Sexual Education Programs: Quantitative Analysis for Grade 11 Students’ Knowledge and Awareness

**Definition of Terms**

The following were defined operationally and conceptually for understanding and clarity, to ensure the readers and respondents understand the specific meanings within the context of the study.

***Adequately.*** In a way that is sufficient, suitable, effective, or appropriate.

***Erogenous*.** It is sensitive to sexual stimulation. These correlates all about body awareness of students.

***Obstinacy***. This correlates as it has significant implications for the effectiveness of sex education programs.

***Promiscuity.*** This correlates as it explores its relationship with sexual behavior, attitudes, and the effectiveness of educational programs.

***Ethnography.*** This correlates as it observes the behavior of the students.

**Assumption of the Study**

The study focused on the preparedness level in implementing sexual education programs for Grade 11 students. The following assumptions were made:

* 1. The factors that influence the level of preparedness in sex education will be identified.
  2. The level of preparedness for sexual education will be determined and identified

**Hypothesis**

Ho: There is no significant relationship between the factors and the level of preparedness.

**CHAPTER III**

**METHODOLOGY**

The present chapter encompassed a comprehensive description of the methodology used by the researchers in conducting the study. It included a detailed account of the research design, research setting, research instrument, materials, and the validity and reliability implemented during the study. The chapter provided a succinct overview of the steps taken by the researchers in carrying out the study and their approach towards data analysis.

**Research Design**

The researchers analyzed the level of preparedness of grade 11 learners at King Thomas Learning Academy, Inc. using a quantitative analysis research design by interpreting the significant relationship between the level of preparedness of grade 11 students at KTLA for implementing sex education programs and the factors affecting the level of preparedness in implementing sex education programs through mathematical calculations and statistical tests.

**Research Setting**

This study is conducted within the campus of King Thomas Learning Academy, Inc. located in Malubago, Sipocot, Camarines Sur. It is a private educational institution started in 2010 and located in the first district of Camarines Sur, Bicol recognized by the Department of Education. It is 13.7694°N and 122.9868°E and is 2.2 kilometers away from Sipocot Central. The researchers chose this setting as it will give valid data the researchers needed.

**Research Respondents**

The respondents in this study are the random Grade 11 students of King Thomas Learning Academy Inc. A total of respondents that responded in this study are 228 students. The respondents are Grade 11 students since they are the ones who are affected by the implementation of the programs mentioned. The researchers used slovin’s formula and simple random sampling to compute the number of respondents in total. In this, the researchers randomly select a subset of respondents from a population.

**Table 1. *Respondents of the Study***

|  |  |
| --- | --- |
| **Strand** | **Number of Respondents** |
| STEM | 89 |
| HUMSS | 41 |
| GAS | 38 |
| ABM | 24 |
| TVL | 36 |
| **Total** | 228 |

**Research Instrument**

This study used survey questionnaires that were created by the researchers and validated by an expert. The researchers used a frequency Likert scale, and close-ended questions to evaluate the respondents’ perceptions and opinions survey.

In this study, prepared survey questionnaires that are coherent and relevant to the topic and highlight the objective and statement of the problem will be given to the 228 random students that are selected as respondents of King Thomas Learning Academy, Inc. The researchers provided the students with a brief introduction and overview to ensure that the information gathered will be confidential and for academic purposes only.

**Viability and Reliability**

This paper is thoroughly analyzed how reliability and validity are defined in educational research. Researchers understand reliability and validity concepts when creating research tools to improve the credibility and applicability of their findings.

**Statistical Treatment**

Statistics is defined as the presentation and interpretation of numerical data. It is a type of analysis in which the outcome of the data in the research is understood and analyzed. The researchers used the statistical treatment below as it is appropriate to be used in this study.

**Weighted mean.** Is used to represent the average of a given data.

**Ranking Technique**. Is used to identify the ranking of respondents.

**Pearson Product - Moment Correlation Coefficient and T-test.** Is used to find the significant relationship between the level of preparedness in implementing sex education programs and factors affecting the level of preparedness of grade 11 students on the implementation of sex education programs.

**Data Gathering Procedure**

The researchers randomly chose 228 students from Grade 11. The request letter was approved and administered to the advisers of Grade 11 students. The preparation of the questionnaires was checked and validated by the research adviser. As the letter was approved by and confirmed by the advisers, the validated questionnaires created by the researchers were conducted on the respondents through surveys.

**CHAPTER IV**

**RESULTS AND DISCUSSION**

This chapter presented the results and findings, analysis, and interpretation of data gathered by letting the respondents answer the survey checklists. The findings derived from the analysis of the data are examined for the understanding of the topic discussed.

***Table 2. Level of preparedness of grade 11 students at KTLA for implementing sex education programs***

|  |  |  |  |
| --- | --- | --- | --- |
| **Statement** | **Weighted Mean** | **Rank** | **Interpretation** |
| 1. I think that sex education programs should be culturally sensitive and respectful of different cultural beliefs regarding gender and sexuality. | **3.46** | **4** | Strongly Agree |
| 2. I am aware of resources available for sexual health information and support. | **3.04** | **10** | Agree |
| 3. I'd like to know more about concerns relating to sexual health. | **3.44** | **5** | Strongly Agree |
| 4. I think sex education is helpful towards prevention of teenage pregnancy among the youth. | **3.65** | **1** | Strongly Agree |
| 5. I believe that sex education is relevant and necessary for my personal development. | **3.50** | **2** | Strongly Agree |
| 6. I feel prepared to participate in and engage with sex education programs effectively. | **3.48** | **3** | Strongly Agree |
| 7. The school environment supports open discussions about sexual health and education. | **3.18** | **8** | Agree |
| 8. My parents or guardians support discussions about sexual health and education. | **3.16** | **9** | Agree |
| 9. I think I'm mature enough to handle sensitive topics in sexual education. | **3.32** | **6** | Strongly Agree |
| 10. I feel at ease talking to classmates and teachers about issues related to sexual health. | **3.25** | **7** | Agree |
| **General Weighted Mean** | **3.35** |  | **Strongly Agree** |

**Legend:**

**Numerical Scale: Interpretation:**

3.26 - 4.00 Strongly Agree

2.51 - 3.25 Agree

1.76 – 2.50 Disagree

1.00 – 1.75 Strongly Disagree

Data on the table 2 show the level of preparedness of grade 11 students at KTLA for implementing sex education programs. Engagement in sex education programs is and relevant to their personal development— cognitive and physical development, helpful to the avoidance and prevention of early pregnancy.

The three highest ranked responses were: sex education is helpful towards the prevention of teenage pregnancy (WM, 3.65); sex education is relevant and necessary to their personal development (WM, 3.50); and feel prepared to participate in and engage with sex education programs effectively (3.48).

The three lowest ranked responses were: aware of resources available for sexual health information and support (WM, 3.04); parents or guardians support discussions about sexual health and education (WM, 3.16) and school environment supports open discussion about sexual health and education (WM, 3.18).

In the theory of Schaalma et., (2004), health promotion provides students with the knowledge and skills they need to make healthy informed decisions that contributes to their overall social well-being. However, both students and guardians should support discussions and be aware of the resources available in their area that can enhance their awareness and knowledge.

These data obtained the average weighted mean of 3.35 interpreted as strongly agree. This result interprets that grade 11 students are prepared for implementing sex education programs. The two shows the connection in the overall outcome.

**Factors that affect the level of preparedness of grade 11 students at KTLA for implementing sex education programs.**

***Table 3. Human body and Human Development***

|  |  |  |  |
| --- | --- | --- | --- |
| **Statement** | **Weighted Mean** | **Rank** | **Interpretation** |
| 1. I have a good understanding of the physical growth stages from infancy to adulthood. | **3.42** | **5** | Strongly Agree |
| 2. I am knowledgeable about key physical development milestones (e.g., crawling, walking, puberty). | **3.30** | **9** | Strongly Agree |
| 3. I feel prepared to engage in discussions about physical human development and its various aspects. | **3.32** | **7.5** | Strongly Agree |
| 4. I understand the progression of gross and fine motor skills during early childhood. | **3.23** | **10** | Agree |
| 5. I am aware of the physical changes that occur during puberty for both males and females. | **3.49** | **3** | Strongly Agree |
| 6. I recognize the importance of nutrition in supporting healthy physical development. | **3.51** | **2** | Strongly Agree |
| 7. I understand how regular physical activity contributes to healthy growth and development. | **3.52** | **1** | Strongly Agree |
| 8. I believe that physical development continues throughout the entire lifespan, not just during childhood | **3.46** | **4** | Strongly Agree |
| 9. I believe that genetic factors significantly influence physical development. | **3.32** | **7.5** | Strongly Agree |
| 10. I am aware of how health issues (e.g., chronic illnesses) can affect physical development. | **3.41** | **6** | Strongly Agree |
| **General Weighted Mean** | **3.40** |  | **Strongly Agree** |

**Legend:**

**Numerical Scale: Interpretation:**

3.26 - 4.00 Strongly Agree

2.51 - 3.25 Agree

1.76 – 2.50 Disagree

1.00 – 1.75 Strongly Disagree

Data shown on the table 3 is all about the factors affecting the level of preparedness of grade 11 students at KTLA for implementing sex education programs. Being aware of your physical development and your engagement in your environment will enhance your open mindedness and promote diverse perspectives as an individual.

The three highest ranked responses were: understand how regular physical activity contributes to healthy growth and development (WM, 3.52); recognize the importance of nutrition in supporting healthy physical development (WM, 3.51); aware of physical changes that occur during puberty for both males and females (WM, 3.49).

The three lowest ranked responses were: understand the progression of gross and fine motor skills during early childhood (WM, 3.23); knowledgeable about key physical development milestones (WM, 3.30); and engage in discussions about physical human development and its various aspects, genetic factors significantly influence physical development (WM, 3.32).

In the study of Moreira, et al. (2023), the physical signs of sexual maturity to occur during adolescence. However, it is necessary to know and be aware of the changes happening in your body. These data obtained an average weighted mean of 3.40 interpreted as strongly agree.

This result interprets that human body and human development is a factor that affects grade 11 students’ preparedness for implementing sex education programs. The two shows the connection in the overall outcome.

***Table 4. Personhood***

|  |  |  |  |
| --- | --- | --- | --- |
| **Statement** | **Weighted Mean** | **Rank** | **Interpretation** |
| 1. I believe that the sex education includes concept of personhood and its relevance to sex education. | **3.46** | **1** | Strongly Agree |
| 2. I think that the preparedness of every person well emphasizes the importance of individual autonomy and personal boundaries. | **3.42** | **2.5** | Strongly Agree |
| 3. I believe that the educators are prepared to discuss values and ethical considerations related to personhood in sex education. | **3.33** | **6** | Strongly Agree |
| 4. I think that the sex education addresses diverse perspectives on personhood, including cultural, religious, and social viewpoints. | **3.29** | **8.5** | Strongly Agree |
| 5. I believe that the sex education includes information on the emotional and psychological aspects of personhood in relation to sexual health. | **3.41** | **4** | Strongly Agree |
| 6. I believe that the sex education includes information on the emotional and psychological aspects of personhood in relation to sexual health. | **3.29** | **8.5** | Strongly Agree |
| 7. I think that the educators receive adequate training on how to teach personhood concepts within sex education. | **3.27** | **10** | Strongly Agree |
| 8. I believe that the parents are engaged and informed about discussions on personhood included in the sex education program. | **3.32** | **7** | Strongly Agree |
| 9. I think that the students are open to exploring discussions related to personhood in the context of sex education. | **3.39** | **5** | Strongly Agree |
| 10. I think that there are effective methods to assess students' understanding of personhood in relation to sex education. | **3.42** | **2.5** | Strongly Agree |
| **General Weighted Mean** | **3.36** |  | **Strongly Agree** |

**Legend:**

**Numerical Scale: Interpretation:**

3.26 - 4.00 Strongly Agree

2.51 - 3.25 Agree

1.76 – 2.50 Disagree

1.00 – 1.75 Strongly Disagree

Data on the table 4 shows the factors affecting the level of preparedness of grade 11 students at KTLA for implementing sex education programs. It was given that different perspective contributes to the personhood of the students through their interaction in their community.

The three highest ranked responses were: the sex education includes concept of person hood and its relevance to sex education (WM, 3.46); the preparedness of every person well emphasizes the importance of individual autonomy and personal boundaries. (WM, 3.42); there are effective methods to assess student's understanding of personhood in relation to sex education (WM, 3.42);

The three lowest ranked responses were; students are open to exploring discussions related to context of sex education (W, 3.27); sex education addresses diverse perspectives on personhood, including cultural, religious, and social viewpoints. (WM, 3.29); sex education includes information and emotional and psychological aspects of personhood in relation to sexual health (WM,3.29); the educators are prepared to discuss values and ethical considerations related to personhood in sex education (WM, 3.33).

In the study of Maimunah, (2019), sex education is important from the perspective of an adolescent. It is necessary to have a discussion about psychological aspects that is related on personhood's viewpoints.

These data obtained an average weighted mean of 3.36 interpreted as strongly agree. This result interprets that sexual and reproductive health is a factor that affects grade 11 students’ preparedness for implementing sex education programs. The two shows the connection in the overall outcome.

***Table 5. Sexual and Reproductive Health***

|  |  |  |  |
| --- | --- | --- | --- |
| **Statement** | **Weighted Mean** | **Rank** | **Interpretation** |
| 1. I believe that the sex education includes comprehensive content on sexual and reproductive health. | **3.58** | **1** | Strongly Agree |
| 2. I believe that the educators possess adequate knowledge and understanding of sexual health topics. | **3.47** | **2.5** | Strongly Agree |
| 3. I think students are engaged and active participants in discussions around sexual and reproductive health. | **3.27** | **10** | Strongly Agree |
| 4. I believe that there are sufficient resources (books, pamphlets, online materials) available for teaching sexual and reproductive health. | **3.47** | **2.5** | Strongly Agree |
| 5. I believe that the sex education well informs students about available sexual and reproductive health services in the community. | **3.44** | **4.5** | Strongly Agree |
| 6. I believe that the sex education is culturally sensitive and respects diverse beliefs regarding sexual and reproductive health. | **3.38** | **8** | Strongly Agree |
| 7. I believe that parents are informed and involved in the sexual and reproductive health education provided in schools. | **3.32** | **9** | Strongly Agree |
| 8. I think that there are effective assessment tools to measure students' understanding of sexual and reproductive health topics. | **3.44** | **4.5** | Strongly Agree |
| 9. I believe that the school environment is supportive and encourages open conversations about sexual and reproductive health. | **3.40** | **7** | Strongly Agree |
| 10. I believe that the sex education includes effective strategies for preventing sexually transmitted infections (STIs) and unintended pregnancies. | **3.42** | **6** | Strongly Agree |
| **General Weighted Mean** | **3.42** |  | Strongly Agree |

**Legend:**

**Numerical Scale: Interpretation:**

3.26 - 4.00 Strongly Agree

2.51 - 3.25 Agree

1.76 – 2.50 Disagree

1.00 – 1.75 Strongly Disagree

Data shown on the table 5 is all about the sexual and reproductive health. It is given that the environment of the teenagers and having their access to different materials relating to their sexual health is beneficial and necessary to deepen the knowledge and understanding of teenagers.

The three highest ranked responses were; the sex education includes comprehensive content on sexual and reproductive health (WM. 3.58); the educators possess adequate knowledge and understanding of sexual health topics (WM. 3.47); there are sufficient resources (books, pamphlets, online materials) available for teaching sexual and reproductive health (WM 3.47) and the sex education well informs students about available sexual and reproductive health services in the community (WM 3.44).

The three lowest ranked responses were; students are engaged and active participants in discussions around sexual and reproductive health (WM. 3.27), parents are informed and involved in the sexual and reproductive health education provided in schools (WM. 3.32), and the sex education is culturally sensitive and respects diverse beliefs regarding sexual and reproductive health (WM 3.38).

The study of Sell, et al., (2023), comprehensive sex education seeks to enhance and promote reproductive health for young people's skills. However, both sides must respect diverse beliefs, improve the discussion to adolescents and parents. These data obtained an average weighted mean of 3.42 interpreted as strongly agree.

This result interprets that sexual and reproductive health is a factor that affects grade 11 students’ preparedness for implementing sex education programs. The two shows the connection in the overall outcome

***Table 6. Human Culture and Human Ought***

|  |  |  |  |
| --- | --- | --- | --- |
| **Statement** | **Weighted Mean** | **Rank** | **Interpretation** |
| 1. I think that sex education programs should be culturally sensitive and respectful of different cultural beliefs regarding gender and sexuality. | **4** | **1** | Strongly Agree |
| 2. I think that teaching about consent is a crucial component of sex education and reflects human decency. | **3.42** | **7.5** | Strongly Agree |
| 3. I believe that teaching human decency is essential in sex education to promote respectful relationships. | **3.42** | **7.5** | Strongly Agree |
| 4. I believe that creating a supportive learning environment is essential for effective discussions on gender, culture, and human decency within sex education. | **3.49** | **4** | Strongly Agree |
| 5. Cultural attitudes toward gender influence how comfortable students feel discussing sex and relationships. | **3.51** | **3** | Strongly Agree |
| 6. Sex education should be taught that all genders have equal rights in relationships and decision making. | **3.29** | **10** | Strongly Agree |
| 7. I believes that promoting human decency is an essential goal of sex education in senior high schools. | **3.44** | **6** | Strongly Agree |
| 8. I feel prepared to engage in challenging discussions about gender, culture, and human decency in the context of sex education. | **3.40** | **9** | Strongly Agree |
| 9. I believe that sex education for senior high school students should include discussions on diverse gender identities and expressions. | **3.45** | **5** | Strongly Agree |
| 10. Teaching respect in relationships is a fundamental aspect of sex education. | **3.55** | **2** | Strongly Agree |
| **General Weighted Mean** | **3.49** |  | Strongly Agree |

**Legend:**

**Numerical Scale: Interpretation:**

3.26 - 4.00 Strongly Agree

2.51 - 3.25 Agree

1.76 – 2.50 Disagree

1.00 – 1.75 Strongly Disagree

Data on the table 6 shows the factors affecting the level of preparedness of grade 11 students at KTLA for implementing sex education programs. Recognizing diverse gender identities and cultural values ensures that sex education is inclusive and relevant to all students.

The three highest ranked responses were: Sex education programs should be culturally sensitive and respectful of different cultural beliefs regarding gender and sexuality. (WM, 4); Teaching respect in the relationship is a fundamental aspect of sex education. (WM, 3.55); Cultural attitudes towards gender influence how comfortable students feel discussing sex and relationship. (WM, 3.51).

The three lowest ranked responses were; Sex education should be taught that all genders have equal rights in relationship and decision making. (W, 3.29); the preparedness to engage in challenging discussions about gender, culture, and human decency in the context of sex education. (WM,3.40); teaching human decency is essential in sex education to promote respectful relationship (WM, 3.42) and teaching about consent is a crucial component of sex education and reflects human decency (WM, 3.42)

According to Zeller et al., (2020). Sex education presents a major dilemma for state-minority relations, reflecting a conflict between basic rights to education and religious freedom. Literature reflects based on this comparative ethnography of informal sex education among ultra-Orthodox Jews (Haredim) in Israel and England, we frame the critical difference between “age-appropriate” and “life-stage” (marriage and childbirth) models of sex education.

This result interprets that ender culture and human ought to be a factor that affects grade 11 students’ preparedness for implementing sex education programs. The two shows the connection in the overall outcome.

***Table 7. Significant Relationship between level of preparedness of students in implementing sex education programs.***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Variance of Relationship** | **Correlation**  **r-test value** | **Interpretation** | **T-test value** | **T-critical value** | **Decision** | **Interpretation** |
| Human Body and Human Development | 0.36 | Moderately low correlation | 5.88 | 1 | Reject Ho | Significant |
| Personhood | 0.42 | Moderately low correlation | 6.91 | 1 | Reject Ho | Significant |
| Sexual and Reproductive Health | 0.48 | Moderately low correlation | 8.33 | 1 | Reject Ho | Significant |
| Human Culture and Human Ought | 0.43 | Moderately low correlation | 7.08 | 1 | Reject Ho | Significant |

**Legend of correlation:**

± 1.00 Perfect Correlation

±0.76-±0.99 Very High Correlation

±0.51-±0.75 High Correlation

±0.26-±0.50 Moderately Low Correlation

±0.01-±0.25 Very Low Correlation

1.0 No Correlation or Negligible Correlation

Table 7 opened the relationship between the level of preparedness and factors affecting the level of prepared in implementing sex education programs. As revealed, the computed t-value are (5.88, 6.91, 8.33 and 7.08) was under the tabular t-value (1,1,1,1) at significant. The degree of relationship is moderately low correlation. Therefore, reject the null hypothesis. The study revealed that the level of preparedness can or cannot be dependent on the factors affecting the level of preparedness of grade 11 students.

According to Cervantes et al., (2023), the implementation of sexual education can identify the effects if the students know about sexual education and most especially prevent the risks of teenage pregnancies and sexual health-related problems. It correlates as this agrees that the implementation of sex education is necessary because sex education is not often discussed inside our houses. Implementing this may also reduce the increasing rate of pregnancy.

It implies that the indicators can affect the students' preparedness in engaging the programs related to sex education if their awareness and knowledge is high and less if low. But, whatever the range of knowledge they have, it also depends on how they will engage in sex education. Consequently, a student's awareness can be significant for their preparedness. In addition, awareness and knowledge can give the students the firsthand experience of handling their personal health, healthy-informed decision making and mistakes, allowing them to learn more about their good personal health.

The t-statistic is greater than the t-critical which means that the null hypothesis was rejected, therefore, there is significant relationship between Human Body and Human Development to the level of preparedness of the students.

The t-statistic is greater than the t-critical which means that the null hypothesis was rejected, therefore, there is significant relationship between Personhood to the level of preparedness of the students.

The t-statistic is greater than the t-critical which means that the null hypothesis was rejected, therefore, there is significant relationship between Sexual and Reproductive Health to the level of preparedness of the students.

The t-statistic is greater than the t-critical which means that the null hypothesis was rejected, therefore, there is significant relationship between Human Culture and Human Ought to the level of preparedness of the students.

**CHAPTER V**

**SUMMARY, CONCLUSION, AND RECOMMENDATION**

This chapter presents the summary findings, conclusions, and recommendations of the study. From the findings, conclusions were drawn from which the recommendations were based.

**SUMMARY**

The researchers sought to answer the following questions; 1.) What is the level of preparedness of Grade 11 students at KTLA for implementing sex education programs? 2.) What factors affect the level of preparedness in implementing sex education programs? In terms of a). Human body and human development, b). Personhood, c). Sexual and reproductive health, d). Human culture and human ought, and 3.) Is there any significant relationship between the level of preparedness and the factors that affect the level of preparedness of grade 11 students at KTLA?

This study used a descriptive-quantitative analysis method of research. The total number of respondents were 228 from all sections of grade 11 students at King Thomas Learning Academy, Inc. The researchers used the Slovin's formula to calculate the total number of respondents needed in the study. Random sampling technique was also used to select the subset population that gives everyone an equal chance of being chosen. Determined the level of preparedness of grade 11 students in implementing sex education, the factors that affect its level and its significant relationship through the use of survey questionnaires. The result of their responses is used to identify and analyze the level of the students Preparedness. Pearson Product - Moment Correlation Coefficient and T-test are used to determine if there is any significant relationship between the actual level and the factors affecting it. Also, weighted mean was used to represent the average of a given data. Moreover, the ranking technique was used to identify the ranking of the data.

**Problem 1**

***What is the level of preparedness of Grade 11 students at KTLA for implementing sex education programs?***

**Findings**

This study finds that students think sex education helps avoid teenage pregnancy, and is important for their personal growth, and they feel ready to participate in these programs successfully. Students feel confident in their abilities to interact with the subject matter and understand the significance of sex education. KTLA Grade 11 students are generally well-prepared to implement sex education programs, based on the data, with an average weighted mean of 3.35, which is interpreted as "strongly agree." Nevertheless, for the programs to be fully effective, the gaps in resources, parental involvement, and school support must be filled. Improving these elements could increase students' sense of empowerment and boost the efficacy of sex education initiatives.

**Conclusion**

Based on the findings, the result on the questionnaires suggests that Grade 11 students strongly agree and are already prepared for the implementation of sex education programs. The researchers also draw to the conclusion that implementing sex education will be effective for all the students as it will provide additional knowledge, information, and support regarding their concerns related to sexual health. Implementation of Sex Education comes out to be more essential, and will be helpful to the avoidance and prevention of early pregnancy.

**Recommendation**

Provide handbook for teachers that provides tips for managing sensitive discussions, addressing student questions, and creating an inclusive learning environment. Include strategies for navigating cultural sensitivities and fostering open communication in the classroom. Provide visual tools such as diagrams, posters, and anatomical models to help students grasp complex concepts more easily. Interactive Learning Tools, Incorporate engaging elements such as role-playing activities, quizzes, case studies, and multimedia presentations. These tools foster active participation and encourage students to think critically about real-world scenarios.

***Problem 2***

***What factors affect the level of preparedness in implementing sex education programs?***

1. ***Human body and human development***
2. ***Personhood***
3. ***Sexual and reproductive health***
4. ***Human culture and human ought***

**Findings**

The study shows the level of preparedness for implementing sex education among Grade 11 students at KTLA is influenced by several factors across various domains. The level of preparedness of implementing sex education was found effective in addressing the key factors, such as Human Body and Human Development, Personhood, Sexual and Reproductive Health, and Gender and Human ought. The effectiveness of these factors to their education depends heavily on the preparedness of teachers and the quality of teaching materials, which can either enhance or limit their comprehension.

**Conclusion**

The findings highlight that the level of preparedness for implementing sex education among Grade 11 students at KTLA is shaped by a complex interplay of factors across multiple domains. Inadequate knowledge about human body development, limited self-awareness in personhood, restricted access to accurate sexual and reproductive health information, and entrenched cultural attitudes toward gender roles all contribute to varying levels of readiness. These challenges are further compounded by insufficient teacher training, a lack of inclusivity in curricula, and limited community support.

**Recommendation**

A comprehensive approach is needed to enhance student preparedness, including culturally sensitive and well-designed curricula, effective teacher training, accessible resources, and active collaboration with parents and the wider community. Addressing these factors holistically can create a supportive environment that equips students with the knowledge, skills, and values necessary to navigate issues related to sex education confidently and responsibly. Integrate Holistic Physical Development Education Schools including activities and discussions emphasizing the importance of regular physical activity and nutrition in promoting healthy growth and development. Providing workshops and hands-on activities can help students better internalize these concepts.

**Problem 3**

*Is there any significant relationship between the level of preparedness and the factors that affect the level of preparedness of grade 11 students at KTLA?*

**Findings**

Results of the study revealed that the relationship between human body and human development and the level of preparedness represented by r= (HB&HD vs. LP) denotes a moderately low correlation, the Personhood vs. level of preparedness with r= (P vs. LP) has a moderately low correlation, and the sexual and reproductive health vs. level of preparedness with r= (S&RH vs. LP) indicates a moderately low correlation. Significance tests represented by t= 5.88 (HB&Hd vs. LA), t= 6.21 (P vs. LP), t= 8.33 (S&RH vs. LP) and t= 7.08 (HC&HO vs. LP). All relationship factors and level of preparedness reject the null hypothesis.

**Conclusion**

As findings revealed, it can be inferred that the factors have an impact on the level of acceptability on sexual identity of grade 11 students because the correlated data were paved to reject the null hypothesis, thus have a significant relationship with each other. Their human body and development, personhood, sexual and reproductive health as well as their human culture and human ought to influence their perceptions, understanding and attitudes towards their preparedness about the implementation of new sex education programs.

**Recommendation**

Conduct Targeted Workshops for Students. Organize interactive workshops specifically designed to address areas with moderately low correlations. Include activities like guided discussions on anatomy and development, using engaging visual aids, facilitate exercises that help students explore self-identity, emotions, and relationship dynamics through role-playing and storytelling. Include expert-led sessions on contraception, STIs, and reproductive rights, paired with Q&A opportunities.