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"Sex Education - Does Mother Know Best?"

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Sex Education - Does Mother know best?

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Abstract

There has been widespread public and professional concern regarding the rights of young people under the age of sixteen to sex education and confidential contraceptive advice. It has been argued that sex education encourages promiscuous sex and that teachers and doctors should not discuss sexual matters with teenagers.

In order to discover the influence of sex education on sexual activity and the feasibility of confining all teaching on sexuality to parents, a group of 122 pregnant schoolgirls were investigated. These girls had experienced sexual intercourse from a relatively early average age of 13.5 years. More than a quarter of girls had no sex education prior to their pregnancies and 95% had not been taught the facts of life by their parents.

It was therefore concluded that sex education does not encourage young people to indulge in early sex, that girls in deprived areas do not obtain sexual advice from their

parents and that there is a desperate need for confidential counselling services for these young people.

Introduction

There has been widespread public controversy over the issue of under sixteens and their rights to contraceptive advice and sex education. The crux of the argument would appear to be whether or not young people, particularly young girls are able to discuss sexual matters with their parents.

Opponents of school sex education lessons have argued that it is a parent's responsibility to teach their children about sexual matters, but how many parents actually attempt to talk to their children about sex? American studies have consistently found that children receive little sex education in the home. "The family doesn't tell and the girls don't ask" (Ref 1). In fact, 1 in 3 mothers in the United States have not even talked to their daughters about menstruation (ref 2). ".. (young people) are haphazardly prepared for sex. Few get timely information from their families" (ref 3).

Girls who have good relationships with their mothers are less likely to have early sex however provision must be made for those adolescents who do not (ref 3). These girls and boys are most likely to obtain their sexual knowledge from peers who are often equally misinformed (ref 4, 5).

Method

It has been argued that sex education encourages early sexual activity. It was therefore decided to investigate a group of teenagers who had indulged in early sex in order to ascertain the degree of sex education which they had received and its source. This study was part of a wider research project submitted to London University as an MD thesis.

All girls falling pregnant while still at school or while of statutory school age and resident in Camberwell district were included in the sample population. The study covered the period 1980-1983 during which time 122 pregnant schoolgirls were identified the mean age of whom was 15.5 years (range 12-17). Baseline information regarding family and social history was obtained at first contact and a data sheet was completed including information regarding their sexual history, sex education and the degree to which they were able to talk to their mothers about sexual matters. This first interview was the entry point to a longitudinal study extending to two years after delivery; baseline information was obtained from all 122 girls.

Girls were asked at what age they first had sexual intercourse, whether they knew what to expect at that time and whether they knew anything of the facts of life. They were asked if they had ever had any sex education and specifically whether they had learned the facts of life from their parents, friends, or other sources such as books or television or whether they had sex education lessons in school. They were then asked to consider whether they had learned 'a little' or 'a lot' from each source. As an additional guide to how well they were able to

communicate with their parents, girls were asked whether they had told their mothers about their pregnancies.

Questions regarding sexual experience were interspersed with questions of a more general nature in order to present a less 'threatening' approach to the young girls. The interview was conducted in as informal a manner as possible and girls were encouraged to make spontaneous comments. Girls were seen in their own homes and in cases where first contact had been made elsewhere, such as at an antenatal clinic or in school, a home visit was made soon afterwards. All girls were given entirely confidential interviews and arrangements were made to see them in the absence of their parents, although with parental permission.

Results

The general level of knowledge of sexual matters among pregnant schoolgirls was found to be appallingly low. More than a quarter of girls had received no sex education whatever prior to their pregnancies and none of the younger girls aged under 14 had received any sex education at all.

Girls in the sample had their first experience of sex at an average age of 13.5 years. One girl was only 10 when she began to be sexually active and six were aged 11. Most reported that they had not known about the 'facts of life' when they first had sex. Many stated that they 'learned by experience' or that their 'boyfriends told them'.

The most commonly cited source of sex 'education' was information picked up from friends, this was often

unreliable. "My mate told me you can't get pregnant the first time"; "He said it was OK 'cos he was too old"; "You can get pregnant if you get in the swimming pool after the boys". 37% of girls said that they had gained a little knowledge from their friends and 14% thought that they had learned a lot from them. School was the next source but several girls said that they had fallen pregnant before the school sex education course or had missed it through truancy (Table 1).

95% of pregnant schoolgirls had not learned anything from their parents about the facts of life and 67% reported that their parents had never even tried to talk to them about sex (Table 2). Conversely girls found it equally difficult to talk to their parents about their pregnancies. One third of girls never told their parents that they were pregnant, half of these parents found out for themselves and the others were told by a third party (Table 3).

Discussion

School sex education has its limitations but nevertheless it is clear that young people are not obtaining accurate knowledge elsewhere and are certainly not receiving information from their parents. The Camberwell girls were from deprived backgrounds and only 29% actually lived with both natural parents. 11% lived with neither parent and 16% had no mother. These young people are desperately in need of a source of health education and counselling. They must have professional support agencies which they can approach in full knowledge that they will be treated with compassion, understanding and complete

confidentiality.

Teenagers sexual knowledge is bedevilled by misinformation, wrongly timed information, information given with the wrong emphasis and information supplied in such a way that its significance cannot be appreciated. How can this situation be remedied? Sex education often focusses on an adult perception of problems and not on the teenagers'. The message can therefore fail to be appreciated by the young people. Teenagers are often taught about the mechanics of sex and contraception but are unable to relate it to their circumstances. "We learned about periods and how babies were born but I did not understand how easily I could get pregnant", "I never thought I could get pregnant, I thought I was too young" these are typical remarks made by girls in Camberwell.

Sex education is too often seen negatively as a method of preventing early pregnancy rather than in a positive way of informing and encouraging the adolescent to live a happy life, comfortable with his or her sexuality. Too much emphasis on avoidance of pregnancy alienates the young person who, feeling that 'that could never happen to me' is unable to relate to the content of the lesson. Emphasising avoidance of pregnancy may also alienate a disadvantaged teenager who "with no hopes or aspirations cannot understand how having a baby will adversely affect her life" (ref C).

The emphasis on pregnancy tends to involve girls more than boys. Boys are often left out of sex education programmes although they need to be included equally. A boy often has stress placed upon him before he is comfortable with his own

sexuality. He needs to be reassured that great sexual conquests and a 'macho' image is not a necessary part of growing up. Boys should be encouraged to adopt a responsible attitude towards their sexual partner and to feel included in decisions relating to pregnancy (ref 7, 8).

Sex education should be part of general education in 'living'. Teenagers need help and guidance in order to discuss relationships openly and to thus clarify for themselves what their personal values are. They then require support in order to be able to behave in a manner appropriate to their personal 'morals' rather than being influenced by outside pressures, whether from peers, society or their professional 'helpers'. Emphasis should be placed on planning and making choices about future life style and pregnancy.

There are those who argue that teaching young people about contraception and abortion encourages early sex and allowing the young to make their own choices enables them to choose promiscuity. All the available evidence points to the opposite, "that it is those young people most in ignorance who tend to experiment early and to suffer the consequences of unwanted pregnancies and sexually transmitted diseases" (ref 9). Certainly Camberwell girls who have early sex are very poorly informed, school sex education has had no influence on their sexual activity. It is only by enabling young people to make their own choices that we may achieve a reduction in the incidence of unwanted pregnancy "thus closing the opportunity gap between poor and non poor women". (ref 6).

It is to Sweden that we must look for the 'coup de

grace' to the argument that school sex education encourages promiscuity. Sex education has been compulsory in Swedish schools since 1956. In 1977 the system was reviewed in the light of criticism that the curriculum was based too much on biology and physiology and did not place enough emphasis on personal and emotional factors (ref 10). In 1974 in Sweden there were 70 pregnancies per thousand girls aged 15-19, one of the highest rates in a developed country, comparing with 40.5 in England and Wales and 101 in the USA. By 1980 it had dropped to 43, a 38% fall (compared to a 24% fall in England and Wales and a rise of 12% in the USA). This marked fall in Swedish rates is attributed to improved sex education the emphasis of which is "to equip (young people) to experience sexual life as a source of happiness and joy in fellowship with others and to strive for relationships characterised by responsibility, consideration and concern" (ref 11).

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TABLE 1

SEX EDUCATION SOURCES

GIRLS HAVING NO SEX EDUCATION AT ALL		26%				
SEX EDUCATION SOURCES FOR OTHER 74%						
FROM PARENTS	LOT	5%	LITTLE	8%	NONE	87%
FROM FRIENDS	LOT	14%	LITTLE	37%	NONE	49%
FROM SCHOOL	LOT	10%	LITTLE	26%	NONE	64%
FROM OTHER SOURCES	LOT	5%	LITTLE	12%	NONE	83%

TABLE 2

SEX EDUCATION
 %age of girls receiving little or no sex education
 from various sources

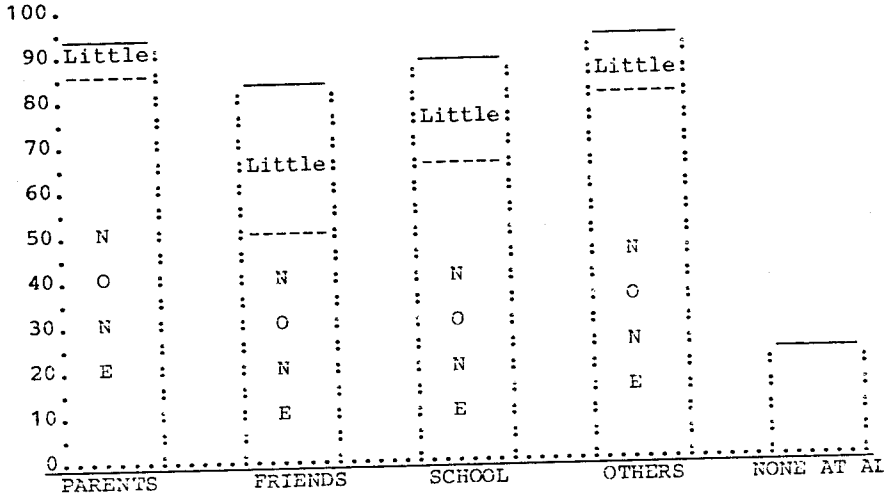


TABLE 3

WHO TOLD THE PARENTS?

77/122 girls told their parents eventually	<u>63%</u>
32/122 girls did not tell their parents	<u>26%</u>
13/122 girls had no parents	<u>11%</u>

PARENTS LEARNED OF PREGNANCY VIA:-

GIRL TOLD THEM	77
NOTICED THEMSELVES	18
SOCIAL WORKER	4
SISTER	3
EDUCATION WELFARE	2
CLINIC	1
BOYFRIEND	1
HEALTH VISITOR	1
FOUND A NOTE	1
SAW CLINIC CARD	1