

Sex Education: Understanding the Western Model

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Abstract

Sex education, loosely refers to some form of information pertaining to human sexuality which may include the sexual anatomy, sexual activity, reproduction, reproductive health, reproductive rights, safe sex, age of consent, birth control and sexual abstinence, etc. Sex education may encompass some or all of the above mentioned areas of study. Traditionally, some sexual information was provided to the adolescents, mostly prior to their marriage by their parents. In the late 19th century, sex education in some form was initiated in the schools in the western world. However, the sex education so imparted not only lacked proper structure and factual information but also was provided inconsistently. With the outbreak of AIDS and a staggering rise in the number of teenage pregnancies in the west, increased importance was started to be laid on sex education. Since then, various countries have adopted various models of sex education with various levels of success and failure.

Introduction

Sex education has been a major concern in the recent past in the west due to a number of issues like teenage pregnancy and the spread of sexually transmitted diseases including HIV/AIDS. These conditions galvanized support towards spreading awareness among the people, placing increased emphasis on the need for sexuality to become a part of school curriculum.

Coming to India, although we are endowed with rich ancient literature on sexuality in the form of Vatsyayana's 'Kamasutra', the current Indian scenario shows we are still far behind in providing basic sex education to most adolescents in the country, whether formally or informally [1]. The situation in India is quite grave as there has been little provision in place for imparting formal training to healthcare providers and faculties dealing with this, which makes the condition more challenging [2].

In the west, the overall situation is much better as there has been a provision in place for imparting sex education in schools. In some western countries such as Belgium, Denmark, Ireland, Netherlands, Sweden, etc., it has been made compulsory and has become a part of the school curriculum, whereas in England, and the federal states of the USA, though it is not compulsory, they have preformed guidelines to be followed. The role of the parents and the family as a whole has also been duly defined by the states, so as to involve the family as a whole in sex education.

Sex education has been called by different names in different countries such as Family Life Education, Sexuality Education, Sexual Health Education, Sex and Relationship Education etc. These different terminologies reflect certain interest and values specific to the geographies.

Sex education is thought to be limited to the basic anatomy, physiology and reproduction [3]. Sexuality education seems to be more comprehensive and takes into account the broader context in which sexuality is experienced, on the other hand some view it with suspicion as it also provide information regarding homosexuality [3].

In the European countries, they permit as 'Sex and Relationship Education' that has a more comprehensive approach with additional emotional touch, involvement of parents and teaching wide range of subjects without taboo [4].

In India, where till date, the stigma associated with sex education still persists, the term Family Life Education has been used to define roles of different genders in various social contexts and in further providing knowledge to maintain good sexual health in various stages of life [5].

There has been no clear definition of sexuality. WHO dubs it as an integral part of personality of everyone, man, woman and child. It is a basic need and aspect of being human that cannot be separated from other aspects of life and it influences thoughts, feelings, actions and interactions, and thereby our mental & physical health [6].

In the USA, the sexuality information and education centre (SIECUS) defines sexuality as a lifelong process of acquiring information and forming attitudes, beliefs, values about identity, relationships and intimacy [7].

Likewise, sexuality is explained in different domains which include cultural, social and political domains across the globe and the younger generation is taught accordingly the concept of sex education in various forms.

Sources of Sex Education

Sex education can be obtained formally or informally. Informally, a person can receive sex education from parents, friends or religious leaders. It can also be received from books, magazines or from sex education websites.

Schools and healthcare providers provide formal sex education. Even in schools, sex education may be a part of certain subjects like biology, health, home economics or physical education or it may be a fully separate course in the curriculum in high school or junior school.

Sex Education in the West

USA

The surge in teenage pregnancies in the early sixties followed by the spread of HIV/AIDS pandemic led to the acceptance of formal sex education in the USA. Sex education in the USA has been broadly based on two distinct models – Abstinence Only Until Marriage (AOUM) and Comprehensive Sex Education (CSE) [8]. Also, there have been newer concepts added to these programs like Planned Parenthood and the use of IT for dissemination of knowledge among adolescent population in the manner that is most acceptable and understandable to this group.

Abstinence only until marriage which remains the most commonly practiced program till date in the USA is driven by political & religious mandates. These are mainly funded programs by government and various agencies. The implementation of these programmes are through guidelines formed by SIECUS wherein education is imparted from Kindergarten to 12th grade [7].

At the federal level, the US congress has continued to substantially fund AOUM. In FY 2016, funding was hiked to \$85 million per year [9]. This was approved despite the opposition and concern from medical and public health professionals, sexuality educators, and the human rights community that AOUM withholds information about condoms and contraception, promotes religious ideologies and gender

stereotypes, and stigmatizes adolescents with non-heteronormative sexual identities [7,8,10, 11, 12].

Therefore, the major chunk of sex education lies in the abstinence-only program which is based on the concept of complete abstinence before marriage. It urges young people to say 'No' but lacks in diversifying the knowledge in preventing high-risk behaviour, the use of contraception, sexual orientation, etc. AOUM still continues to be the main programme to teach the adolescents, although the parents also desire that their wards should receive a more comprehensive knowledge of the subject as shown by various reviews done in California-2007, Carolina-2006, Texas-2011, Mississippi-2011 [13-16].

European Countries

Sexuality education is mandatory by law in nearly all the countries of the European Union. The content and quality varies as per social, cultural and political backgrounds. As stated in the Safe Project (IPPF European Network) in 2007, sexuality education aims at “disseminating general and technical information, facts and issues which create awareness and provide young people with the essential knowledge and training in communication and decision making skills they need to determine and enjoy sexuality both physically and emotionally, individually as well as in relationships” [17].

Sexuality education is mandatory in most Member States of the European Union, except Bulgaria, Cyprus, Italy, Lithuania, Poland, Romania and the United Kingdom [18]. However, the knowledge and attitudes towards sexuality education varies between different states as well as within the states themselves, i.e., in rural and urban provinces.

For example, in Austria, sex education is mandatory in schools since 1970 and regulated by the Ministry of Education; the lessons start from the primary school level being imparted by teachers, with the inclusion of parents [4]. In Denmark, along with the formal education, external experts such as prostitutes, homosexuals or HIV-positive persons are invited to speak in schools about their experience [4]. In the Netherlands, sexuality education begins at the age of four [1]. The Dutch consider that sex education is necessary to instil a sense of responsibility in youth regarding sexual activity and to make them independent in decision making and set their own sexual boundaries [19]. The Netherlands model also ranked top in sexual health rating among industrialized countries. The Netherlands have the lowest rate of unplanned pregnancy, abortion, and teen pregnancy in the western world [20]. Rate of contraception used at first intercourse touches 85% here [21]. However, in Poland, discussion on sexuality is a taboo at school as well as at home. In Spain, the subject is hardly ever taught in schools in rural areas.

In the United Kingdom, sex education is better known as Sex and Relationship Education, which is imparted in schools and starts at the age of 11, through a nationwide biological curriculum known as Sex and Relationship Guidance published in 2000. However, it provides freedom to the parents to withdraw their children from such courses but not from the curriculum itself.

According to the report, 'Sexuality Education in Europe' Sweden is a pioneer as far as sexuality education is concerned as they have a teen birth rate of 7 per 1000 lower than France, Canada and Great Britain [22] and lower teenage abortion of 17.2 per 1000 [23]. It follows a national curriculum for sexuality education and follows

guidelines and policies by the Swedish National Agency for Education. Their aim is to promote awareness and openness and to avoid ignorance and risky behaviours among young people by providing teaching methods like group education, individual counselling as well as awareness campaigns on condoms and other activities.

Overall, the best practises are observed in Benelux, Nordic countries, France and Germany [21]. Though, there have been great variations and disparities observed among the European states, the overall provision of sex education has proven an uphill task and improving.

Implication and Success

Around the globe, there have been multiple ways of teaching and various programmes are ongoing to teach the important aspect of sexuality and its implications in life. However, there have been mixed opinion regarding the need to impart it in schools, age of starting the education, what to teach, how to convey the information. Family and cultural values, religious restriction and political mandates still remain to be the major factors which guide sex education in any country.

The success of any programme depends on the acceptance of the people for whom it is being targeted and the people who are being affected. Thus, after having an outlook of the various programmes and policies of the various states, it can be presumed that the adolescent group of population requires that, such information, should be provided in a cordial environment and that the programme should understand the needs and interests of this group of population apart from the information being medically accurate. Getting

accepted by the parental population also is a major factor which affects their outcome. Also, making the parents a part of such programmes, undoubtedly, adds to the success. To be in unison with the states' cultural, religious and political sentiments too adds to the future progress of any such policies. However, if the conflict of interest arises, the effect could be the other way round. So, this has to be well understood by the policy makers.

Conclusion

Health is a basic human right, so is sexual health. The vital years of the adolescence pave the future path of any nation. That's why,

providing righteous and necessary knowledge on sexuality becomes all the more essential. The need of the hour is to understand that imparting knowledge on sexual health is not only necessary in the early adolescent days but also in their later life, relationships, decision-making and many future endeavours. Currently, there is also a rising need of roping in information technology to impart such education. Also, any states that aims to target maximum population cannot do so only by formal education schemes, there has to be groups, NGO's, community programmes to target maximum audience, through both formal and informal way of communication.

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