

The unhappy history of sex education policy in England and Wales is a story of conflict, reflected in confused legislation and, ultimately, confusion in the classroom.

Dr James Hampshire is a Research Officer in the Department of Social Policy and Social Work, University of Oxford.

I am grateful to the Arts and Humanities Research Board for financial support (Grant: MRG-AN6026/APN12632), and to Jane Lewis for guidance and help with the research.

James Hampshire

Sex education: politics and policy in England and Wales

Policy makers and lobby groups have perceived sex education in different ways during the post-war period, and the resultant struggle over ideas has prevented the development of a coherent sex education policy.

The politics of sex education in England and Wales is deeply controversial. As has been argued recently, the adversarial nature of political debate is based upon contested understandings of family change, sexual behaviour, and also on the proper relationship between parents, children and the state (Lewis and Knijn, 2002).

In this article I show how policy makers and lobby groups have perceived sex education in different ways during the post-war period, and argue that the resultant struggle over ideas has prevented the development of a coherent sex education policy. This requires a consideration of how the political landscape was drawn before sex education became a prominent public issue. It was not until the 1980s that Parliamentary attention was focused on the subject and legislation passed, but it would be a mistake to think that the politics of sex education began then.

History

I want to highlight two aspects of the history of sex education that have been largely overlooked and which help to explain why the subject is so politically divisive: first, the long-standing conflict between health and education over the issue; and second, the construction of sex education as a 'problem' during the conservative reaction to the 'permissive society' from the 1970s onwards. In addition, I want to suggest that insofar as the struggle over ideas has been decisive, in order

to understand contemporary politics we need to explain how perceptions of sex education have developed historically, shaping the contours of present debate. The summary arguments presented here are based on research undertaken for a project on the history of sex education in Britain funded by the Arts and Humanities Research Board. Drawing on a range of archival materials, the project has aimed to develop a contextualised analysis of sex education policy, locating it in terms of political debates and ideas about sexuality and morality.

Health versus education

Conflict between key policy actors with contrasting perceptions of the subject has been fundamental to the politics of sex education in the post-war period. In particular, the departmental conflict between the Departments of Health and Education¹ has had a profound effect on the development of policy. This first emerged in the context of debates over venereal disease during the 1940s and it resurfaced during the 1960s when venereal disease was increasing once again and enthusiasm for health education was at a peak. Up until the 1980s, lobbying for a national policy on sex education came largely from the medical and health establishment, which defined sex education in terms of its public health objectives and firmly located it within its broader health education agenda. Doctors and public health professionals tended to perceive sex education in

Drawing on a range of archival materials, the research has aimed to develop a contextualised analysis of sex education policy, locating it in terms of political debates and ideas about sexuality and morality.

¹ I will use these names as a shorthand. Administrative reforms have meant that the names of the central government departments responsible for health and education have changed several times. When the chronological context is clear I will use the appropriate name for that time.

narrowly instrumental terms - as an efficacious and appropriate policy for the reduction of sexually transmitted diseases - and their lobbying on the issue waxed and waned according to the epidemiology of those diseases. In contrast to the activism of these groups, which prompted the Department of Health to adopt a positive stance, the Department of Education was essentially inactive and was deeply reluctant to engage in policy-making in this area.

Traditional silence

What Lesley Hall (2000) has labelled the 'traditional silence' of the British government on sex education in schools was first broken during the Second World War. Increased rates of venereal disease led to pressure for more public education on sexual health. At an inter-departmental conference called to discuss the matter in 1942, the Board of Education was encouraged to make an investigation into the provision of sex education in schools.² Somewhat reluctantly, it agreed. The survey found that provision was patchy and in perhaps one third of the country 'practically nothing' whatsoever was done. The Board's lack of enthusiasm was apparent in the pamphlet it published in 1943. Whilst this contained a statement of support for those schools that chose to give sex education, it did not offer any concrete guidelines or stipulation that such education should be given (HMSO, 1943). Indeed, the Board was of the opinion that 'prior responsibility' lay with parents and that central government should not prescribe teaching in this area.

Hands-off approach

With the education department adopting a hands-off approach, provision of sex education in schools was left up to individual teachers and organisations such as the Central Council for Health Education (CCHE) and the National Marriage Guidance Council. These two organisations produced teaching materials and also provided lecturers to visit schools and youth clubs. Cyril Bibby, Education Officer of the CCHE, claimed that large numbers of teachers, social workers and youth leaders thought that 'something serious should be done about sex education,' but they were discouraged by the lukewarm attitude of the Department of Education and the leading teachers' organisations.³ Bibby considered the government as a whole, but especially Education, to have been obstructive: they 'wouldn't back up any teacher who did anything in the way of sex education in schools. The National Union of Teachers and the National Association of Teachers were

opposed to it.' Evidence from the National Archives indicates that on at least one occasion the Board of Education took exception to a health education booklet produced by the CCHE for children.⁴

Public health consensus

Sex education receded from the official mind in the early 1950s as the incidence of venereal diseases declined. When they picked up again during the late 1950s a new consensus emerged among doctors and public health professionals that sex education was a necessary part of any solution to this growing problem. Indeed, by the mid 1960s there was a clear and vocal opinion in favour of more and better sex education in schools. This was part of a general enthusiasm for health education, which reflected a shift from environmentalism in medicine towards an ethic of individual responsibility for personal health (Berridge, 1999; Holland and Stewart, 1998). The new mood was captured in a Ministry of Health circular which stated that 'publicity and other established means of health education have a valuable part to play in making generally known the increased incidence of venereal disease.'⁵ In 1962 a BMA report on health education stated that there was unanimous agreement among its local divisions on the need for improved sex education. Although 'the prime responsibility for sex education lies with parents,' given the widespread failure to meet this responsibility, schools had to play a role. The report recommended that all student teachers be given training in sex education and insisted that, at the very least, 'boys and girls should know of the danger to health of sexual promiscuity.'⁶

Two years later the BMA published an influential report on *Venereal Disease and Young People* which made a raft of recommendations on sex education.⁷ At a conference called to discuss the report a motion was passed calling for a comprehensive national policy. The Cohen Report on health education (HMSO, 1964) made similar demands which, significantly, were contested by the Department of Education. The Chief Medical Officer's report for 1965 complained of the 'conspiracy of silence' about sex education and argued that instruction of 'older schoolchildren' was a necessary part of the fight against venereal disease (HMSO, 1965). And when, following the Cohen recommendations, the Ministry of Health established a new Health Education Council (HEC) to promote and coordinate national programmes of health education, sex was at the top of its agenda. Particularly under its second

chairperson, Lady Alma Birk, the HEC placed a strong emphasis on sex education and embarked on a series of high profile campaigns.

Non-decision making

Despite the strong support for sex education in schools from doctors, health professionals and the Department of Health, no national policy was developed at this time. The Department of Education responded to the public health consensus for sex education with a strategy of inaction, what political scientists have described as 'non-decision making.'⁸ Just as the Board of Education had done in 1943, during the 1960s the Department of Education avoided having to make policy at all by keeping sex education off its policy agenda; insofar as it had a strategy it was both laissez-faire and reactive.

This stance was informed by a combination of pragmatism and principle: first, there was a pragmatic concern over the popular controversy that it was believed involvement in sex education would entail; second, many important figures, not least the Secretary of State for Education, Edward Boyle, had an ideological commitment to keep out of 'moral' issues; and third, the National Union of Teachers was opposed to direction from the centre and the department wanted to avoid conflict with the leading teachers' union on this sensitive matter. Underlying each of these reasons, to a greater or lesser degree, was a view of sex education as a morally loaded issue: any policy would raise awkward and possibly divisive questions about the state's role in a sphere that had traditionally been seen as the domain of parental responsibility.

Pamphlets

The department did publish a series of pamphlets on health education, each of which addressed sex to some extent, but these were advisory and their sex education content emphasised biological and health aspects of the subject. Sex education was defined as a public health issue and nested within a broader health education context. The pamphlets published in 1956, 1966 and 1968 each reflected the attempt to placate the growing public health lobby without antagonising traditionalists.

After 1943, sex education guidance was always published within broader health education guidance and the term sex education did not appear on the cover of any of the pamphlets. Even inside the covers there was a tendency towards euphemism: the chapter on sex

education in the 1956 pamphlet was entitled *School and the Future Parent* and *Moral Aspects of Health Education* in the 1966 pamphlet.⁹ Sex education was now firmly located within the ambit of health education, but the pamphlets placed great emphasis on the role of the family, with recommendations on sex education made very much with a view to the training of future parents.

Problematisation

Notwithstanding the conflict between the Departments of Health and Education, both sides nevertheless agreed that sex education could have a positive impact on venereal disease. The difference was one of orientation. The Department of Health held an instrumental view of sex education, arguing that because it was an efficacious way of reducing venereal disease it should be promoted by the government. The Department of Education did not challenge the premise of this argument; rather, its reluctance to make policy was based on an expressive orientation to the subject: it was concerned with the possible political and moral controversy that could surround any initiatives in this area.

The underlying idea that sex education offered a potential solution to the problems of sexual health came under sustained attack from the moral right during the 1970s. Martin Durham (1991) has shown how the rise of a moral lobby intent on reversing the progressive reforms of the 1960s created a climate in which sex education was problematised. Attacks upon the social change associated with the 'permissive society,' especially legislation on abortion, homosexuality and divorce, gave rise to a new social politics. A number of factors, including campaigns by right-wing groups with a conservative moral agenda and an increase in coverage by the press, combined to reconfigure the terms of what was an increasingly public and partisan debate.

The moral right argued that sex education did not reduce Sexually Transmitted Infections (STIs) and pre-marital sex, contrary to the views of its advocates, but in fact affected the sexual attitudes and behaviour of young people for the worse. The National Viewers and Listeners Association, under Mary Whitehouse, condemned sex education in schools as part of the moral degradation of British society, and in 1971 called for a right of parental withdrawal.

The Responsible Society

In the same year The Responsible Society

Increased rates of venereal disease led to pressure for more public education on sexual health.

2 PRO ED 121/491, Inter-departmental conference on venereal diseases record of discussion, 12 Dec. 1942.

3 CMAC GC/196, Interview with Cyril Bibby conducted by G.M. Blythe, 23 Aug. 1981, p. 7.

4 See PRO MH 82/8, Minutes of the Executive Committee of the CCHE, 17 Sept. 1942. Report of the Film and Publications Sub-Committee.

5 PRO MH 151/76, Circular 6/59, 27 Apr. 1959.

6 BMA 20/108/9, *Health Education*, 1962, p. 21 and Recommendations 19 and 20.

7 BMA B/324/2/1, *Venereal Disease and Young People: A Report by a Committee of the British Medical Association on the Problem of Venereal Disease, Particularly Among Young People* (London: BMA, March 1964).

Just as the Board of Education had done in 1943, during the 1960s the Department of Education avoided having to make policy at all by keeping sex education off its policy agenda; insofar as it had a strategy it was both laissez-faire and reactive.

8 The application of non-decision making to social policy is discussed by R. Lowe, *The Welfare State in Britain since 1945*. 2nd edition (London: Macmillan, 1999), p. 42.

9 *Health Education*, Pamphlet No. 31, (London: HMSO, 1956); *Health in Education*, Pamphlet No. 49 (London: HMSO, 1966). See also *A Handbook of Health Education* (London: HMSO, 1968), which was a revised version of the 1956 publication and retained the chapter heading, 'School and the Future Parent.'

was formed (later renamed Family and Youth Concern). Under Valerie Riches, its director from 1972, The Responsible Society developed as a high profile media campaign group. It levelled two main criticisms at the principle of sex education in schools: first, it argued that sex education was a parental duty; and second, it claimed that its provision in schools was a major cause of increases in the rates of STIs and teenage conception. The debate over whether sex education was a school or parental responsibility was hardly new - indeed, this was at the heart of disagreements during the previous thirty years. It was the second claim, that sex education was a major cause of permissiveness, and the vociferous way in which it was pressed, that marked a break with previous debates.

In pamphlets, press releases and interviews, The Responsible Society claimed that a liberal sex education lobby, comprised of organisations such as the Brook Advisory Centres, the International Planned Parenthood Federation, and the Family Planning Association, was attempting to change social attitudes towards sexual propriety and thus destroy the family. In 1986 Riches published *Sex and Social Engineering: How the Sex Education Lobby is Undermining Society*, which argued precisely this line. In addition, newspapers, particularly the tabloids, began to devote more attention to sex education from the late 1960s, and in 1971 there was a minor public scandal over a sex education film entitled *Growing Up*, which included a sequence on masturbation.¹⁰ In response to this growing attention, in 1976 the first major Parliamentary debate on sex education took place in the Lords. Baroness Elles introduced the debate by referring to 'the problems of sex education' and argued that one either believed sex education had to reinforce the 'rules' of moral conduct or else undermine them (Lords, 14/1/76, v. 367, c. 137).

Progressive agenda

Advocates of sex education responded to attacks from the moral right by developing a more consciously progressive agenda. The Family Planning Association (FPA) began its first major campaign for sex education in schools in 1974, and sex education moved to the centre of its national agenda. The FPA placed a new emphasis on personal and social relationships, something which was anathema to the moral right. Whereas early efforts had been narrowly biological and factual, the new pedagogies emphasised individuality, choice and personal responsibility. This was underpinned by new conceptions of children as active and interactive subjects rather than

passive objects of socialization processes. The new approaches had the effect of making sex education materials more rounded, but they also gave succour to those on the right who saw in this development a vindication of their claim that sex education was a form of social engineering, designed to change the attitudes and behaviour of young people and undermine the family. From this perspective empowerment was viewed as corruption.

The key point is that the intense controversy that surrounds sex education today has its origins in the fallout from the permissive society. The assumption that sex education is inherently divisive (e.g. Meredith, 1989) overlooks not only the consensus achieved in countries such as The Netherlands (Lewis and Knijn, 2002) but also the fact that the current contours of debate are traceable to the rise of the moral right in the 1970s. Although sex education was hardly uncontested prior to this, it was not the adversarial issue that it has become since then.

Making policy

During the 1980s and 1990s legislation on sex education was passed by Parliament, often after fiercely contested debates. Legislation was passed in 1981 obliging secondary schools to publish a statement on sex education. Then, in 1986, there was a major Parliamentary debate during the passage of the Education Bill, which in its final form required schools that gave sex education to do so 'in such a manner as to encourage ... due regard to moral considerations and the value of family life.' At this stage, the decision whether to give sex education was left up to individual schools (indeed, governors were given more control at the expense of Local Education Authorities), but the idea that government should stipulate what could be taught was broached. With the 1993 Education Act the state's reach was extended significantly. The Act required that biological reproduction be taught by every school as part of the basic curriculum; sex education was defined to include information about HIV/AIDS and other STIs; and parents were granted the right of withdrawal from all but the science aspects of sex education classes. Two types of sex education classes, each with a different legal status, were thus created. Basic human reproduction was made part of the National Curriculum that all schools must teach. All other aspects of sex education, including HIV/AIDS and STIs, are covered by classes to be decided by the school's governors. From these, parents can choose to withdraw their children. More recently, in 2000, the attempt to repeal Section 28 of the 1988 Local

Government Act, which forbade local authorities from 'promoting' homosexuality, as well as the passage of the Learning and Skills Bill, provided the occasion for lengthy and intensive debates over sex education. In the event, the attempt to repeal Section 28 failed, whilst the concessions that had been offered to moral conservatives became law.

For the first time, schools had to stress the importance of marriage in sex education and new rules to debar 'inappropriate' materials were established. The details of the how these Acts came to be passed and the Parliamentary wrangling that accompanied them is beyond the scope of this paper (see Thomson, 1994; Waites, 2001). Suffice it to point out here that the sections relating to sex education in the 1986, 1988 and 1993 legislation were all added as the Bills went through Parliament; they were not initiated by the government, thus it is inaccurate to speak of a new enthusiasm for sex education legislation from either the Thatcher or the Major governments. The provisions of the Learning and Skills Bill were introduced by the Labour government in 2000, but these were viewed as concessions to traditionalists who opposed the repeal of Section 28. In this final section I want to illustrate how the themes discussed in the sections above have continued to shape the politics of sex education since the 1980s.

The claim that sex education constitutes a problem and is to blame for greater teenage sexual activity has become a commonplace amongst moral conservatives, and has often been articulated in the Parliamentary debates.

Polarisation

The first thing to note is that during the last two decades of the twentieth century the polarisation of opinion about sex education continued apace. In the 1986 and 1993 debates, a fringe group of the Conservative Party, the Conservative Family Campaign (CFC), organised to give a Parliamentary voice to those hostile to the principle of sex education. According to its pamphlet, *Sex Education and Your Child*, current sex education affirmed an 'immoral ethos' and consisted of 'propaganda for promiscuity.'¹¹

Following the adversarial debate surrounding the 1986 Education Act, in 1987 the Sex Education Forum was established as an umbrella organisation for a variety of groups which aimed to promote a progressive approach to sex education. It soon became as much the subject of attack from the right as the FPA had been previously. Moreover, fiercely partisan newspaper coverage of the subject has become commonplace since the 1980s, as can be seen in the coverage of the Section 28 debates.

Shaping the debate

Both of the political fault-lines that I have

outlined in this article - the departmental conflict between health and education, and the dispute between those who view sex education as a problem and those who consider it to be part of the solution - continued to shape the debate in the 1980s and 1990s. For example, Rachel Thomson has argued that during the early 1990s the Department of Health was leaning on the Department of Education to move forward on sex education, but the latter actually withdrew funding from Health Education Coordinators (key providers of sex and HIV/AIDS education) at this time. The two departments' publications of that year, *The Health of the Nation* (HMSO, 1992a) and *Choice and Diversity: A New Framework for Schools* (HMSO, 1992b) certainly indicated a divergent approach. Thomson concludes that just at the same time as *Health of the Nation* had set targets for the reduction of under-16s' pregnancies by 50 per cent and gonorrhoea rates by 20 per cent, the Department for Education set about restricting the means by which this might be achieved (Thomson, 1994a and 1994b). Furthermore, during the 1980s and 1990s the FPA has generally enjoyed a better working relationship with the Department of Health than the Department of Education, although relations with the latter became more harmonious in the 1990s.

Sex education as problem

The claim that sex education constitutes a problem and is to blame for greater teenage sexual activity has become a commonplace amongst moral conservatives, and has often been articulated in the Parliamentary debates. In the Commons in 1986, for example, Peter Bruinvels MP alleged that sex education has a corrupting effect on young people. Although his amendment for censorship of materials failed, the 'morality' clause included in the final version of the Bill owed a great deal to the misgivings of traditionalists. In the Lords, Viscount Buckmaster, who tabled the amendment that introduced sex education into the debate, articulated the sex-education-as-problem argument when he claimed that it had amongst other things increased teenage pregnancies, STIs, rapes and sex attacks on children (Lords, 15/4/86, v. 475, c. 649). In 1993, this view was endorsed by a government minister, Baroness Blatch (Lords, 6/7/93, v. 547, c. 1320) and Baroness Elles described sex education as 'an encouragement to promiscuity' (Lords, 6/7/93, v. 547, c. 1103). Sex education was also attacked for promoting 'abnormal' or 'deviant' sexual behaviour, and for spoiling childhood innocence. 'Corrupting' materials were once again targeted in the 2000 debates (Lords, 23/3/00, v.

...it was the second claim, that sex education was a major cause of permissiveness, and the vociferous way in which it was pressed, that marked a break with previous debates.

¹⁰ Daily Telegraph (12.5.71).

¹¹ CMC SA/FPA 48/5, *Sex Education and Your Child*, 1986.

611, c. 439). Although the views of figures such as Viscount Buckmaster and Baroness Elles were in the minority, even in the Lords, they cannot be dismissed since they had a such major influence on the final content of the legislation, in terms of the 'morality' clause in 1986, the right of parental withdrawal in 1993, and the concessions to traditionalists in the Learning and Skills Act in 2000.

Conclusion

Throughout the post-war period, the politics of sex education has been caught up in wider controversies over changes in the family and sexual behaviour and the appropriate role of government in responding to these changes. Sex education is viewed as an essential part of sexual health strategy by its public health advocates, and attacked as a cause of moral malaise by its conservative detractors. These incommensurable positions are rooted in very different ideas about sex, sexuality, and the effects of sex education. The result is an apparently intractable political situation.

The major casualty of the adversarial politics of sex education has been policy itself. Without clear and coherent policy guidelines, provision in the classroom is unlikely to be effective. As Lewis and Knijn have pointed out in this journal (2001), personal and social education classes in England and Wales often adopt a negative approach to sex - focusing on how to say 'no' or on sex as risk or danger - and place an emphasis on prevention. Given the UK's comparatively high teenage pregnancy rates, it may be doubted whether such approaches are especially successful in their aim of discouraging teenage parenthood. There is also the problem of mixed messages, even incoherence, arising from the use of teaching materials produced by groups with very different agendas. Finally, the controversy surrounding sex education means that many teachers are worried about what and how they teach the subject.

Given the deep-seated moral and social issues with which sex education has become intertwined, practitioners should view the

possibility of political consensus as remote. Ever since attempts at legislation have been made, political debate has been partisan and divisive. The unhappy history of sex education policy in England and Wales is a story of conflict, reflected in confused legislation and, ultimately, confusion in the classroom.

References

- Berridge, V. (1999). *Health and Society in Britain since 1939*. Cambridge: Cambridge University Press.
- Durham, M. (1991). *Sex and Politics: The Family and Morality in the Thatcher Years*. Basingstoke: Macmillan.
- Hall, L. A. (2000). *Sex, Gender and Social Change in Britain since 1880*. Basingstoke: Macmillan.
- HMSO (1943). *Sex Education in Schools and Youth Organisations*.
- HMSO (1964). *Health Education. Report of a Joint Committee of the Central and Scottish Health Services Council*.
- HMSO (1965). *On the State of the Public Health: The Annual Report of the Chief Medical Officer of the Ministry of Health for the Year 1965*.
- HMSO (1992a). *The Health of the Nation. A Strategy for Health in England*.
- HMSO (1992b). *Choice and Diversity: A New Framework for Schools*.
- Holland, W., & Stewart, S. (1998). *Public Health: The Vision and the Challenge*. London: The Nuffield Trust.
- Lewis, J., & Knijn, T. (2001). 'A Comparison of English and Dutch Sex Education in the Classroom'. *Education and Health*, 19 (4): 59-64. Available at <http://www.sheu.org.uk/pubs/eh.htm>
- Lewis, J., & Knijn, T. (2002). 'The Politics of Sex Education Policy in England and Wales and The Netherlands since the 1980s'. *Journal of Social Policy*, 31 (4): 669-94.
- Lowe, R. (1999). *The Welfare State in Britain since 1945. 2nd edition*. London: Macmillan.
- Meredith, P. (1989). *Sex Education: Political Issues in Britain and Europe*. London: Routledge.
- Riches, V. (1986). *Sex Education and Social Engineering: How the Sex Education Lobby is Undermining Society*. London: Family Education Trust.
- Thomson, R. (1994a). 'Moral Rhetoric and Public Health Pragmatism: the recent politics of sex education'. *Feminist Review*, 48: 40-60.
- Thomson, R. (1994b). 'Prevention, Promotion and Adolescent Sexuality: the politics of school sex education in England and Wales'. *Sexual and Marital Therapy*, 9 (2): 115-26.
- Waites, M. (2001). 'Regulation of Sexuality: age of consent, Section 28 and sex education'. *Parliamentary Affairs*, 54 (3): 495-508.

Sex education is viewed as an essential part of sexual health strategy by its public health advocates, and attacked as a cause of moral malaise by its conservative detractors.