

Sex education: parent + teacher?

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The mention of 'sex education' ensures immediate attention from pupils, parents, and staff. However, the wide range of interpretations of what 'sex education' means adds to the difficulty of debating the issues involved. By determining what these different components might be, and measuring levels of support for their inclusion in the work of schools, the groundwork is laid for more informed curriculum development.

In the light of the recent debate about parents' rights to influence children's sex education in school, I would like to try to clarify the meaning of 'sex education' and to examine, from the evidence in our extensive questionnaire data banks, the answers to the following questions:

1. What is sex education? (How precise can the debate be?)
2. What are young people's major sources of sex information?
3. What would they like to be their major source?
4. What do parents think about the school's potential contribution compared with their own?
5. How may parents and schools contribute and co-operate?

How precise can the debate be?

Behind the debate lie a number of anxieties, which include

- Unwanted pregnancy
- Contraceptive knowledge (will it lead to promiscuity?)
- Sexually transmitted diseases
- Homosexuality
- Premarital sex
- Extramarital sex

- The code of conduct a parent might want for a child, if indeed this is clear in their mind.

To what extent is it possible to identify those components of an understanding of sexual relationships to which teachers could acceptably contribute, and those which are solely the province of the parent? Should the framework for sex education in school be one of the following:

1. Sexual intercourse, contraception, and sexually transmitted diseases, including AIDS?
2. Human reproduction — conception, pregnancy, and birth?
3. Friendships, boy/girl relationships, responsibility, marriage, and family life?

Teachers do not take on a role in sex education lightly, and a clarification of what they may acceptably attempt would help them enormously. This enlightenment is one of the aims of the *Just A Tick* questionnaire package developed at Exeter University, and our data banks provide an important baseline of information from which to proceed, since *Just A Tick* reveals the priorities attached by pupils,

parents, teachers, and health-care professionals to individual curriculum topics. Results from two such surveys are given here. The first is from the very recent national survey (1985) of the views of primary pupils and their parents for the HEC Primary Schools Health Education Project (Director, Trefor Williams). The sample comes from 11 regions throughout the UK, and the survey forms the basis for a major curriculum planning project, due to report early in 1987.

Parents A sample of 10,076 were asked to consider the importance of each of 43 topics as part of the school curriculum for 8-12 year olds. Regarding two of the 'sex education' topics in the list:

68% were positive regarding

Menstruation

71% were positive regarding

Human reproduction

10-11 year old children A sample of 3,670 were asked to select the three most interesting topics out of a checklist of 23 topics.

23% of boys and 37% of girls said that **Human reproduction** was one of the three 'most interesting' topics

Another survey of parental views from three comprehensive schools in one Health District, using the *Just A Tick* survey method in June 1986 (sample size 570 parents) showed the following percentages responding positively to the inclusion of these 'sex' topics in the school curriculum:

Human reproduction	92%
Menstruation	87%
Sexually transmitted diseases	86%
Contraception	83%
Parenthood and child care	75%

These more precise components of sex education, and the levels of response to them, can be used as an agenda for debate. There is clearly a lot of approval amongst parents for schools addressing at least some issues. However, the statistics do not resolve such questions as

- Which staff members should contribute? Are special qualities or qualifications useful?

- In which curriculum subject or subjects should it be addressed — i.e., in which context?
Should it be factual (in 'science')?
Should it be in a social context (in 'humanities')?
Should it be in both?
- At what ages should different aspects be introduced?

To clarify these points would require further discussion: one value of figures such as those quoted is to inspire such debate.

Sources of 'sex education' for young people

We all receive a sex education, and from a variety of sources — some fact, some fantasy. During the eight years of development behind the latest version of the Health Related Behaviour Questionnaire, the other major curriculum planning enquiry method developed at Exeter, a variety of sources have been identified by the teenage population surveyed. These are now used as a check-list for two of the questions. The questions and the answers selected by 4,700 14-15 year old boys and girls in 1985 are displayed in Table 1 overleaf.

It is important to keep in mind that individual boys and girls recognise several sources, but have been required to identify just one as the present major source. These pupils are in the 4th year of secondary schooling, mainly in comprehensive schools, throughout the UK. The pattern of response for this 1985 sample is similar to the 1986 sample still being gathered, but there are differences in patterns at different ages, not examined here.

Differences between these 4th-year girls' and boys' results are immediately obvious in connection with who *is* their main source — more girls than boys select 'parents', and more boys than girls select 'Books, TV, etc.' When comparing the responses to the two questions, the large swing towards parents as the desired source is extremely obvious. The swing is noticeably away from 'friends' and 'books, TV, etc.'. Teachers, as a desired

source, make some 'gains' over the actual source from the boys' responses.

The survey data is used by schools to aid curriculum planning, and sometimes statistics are taken back to classes to generate debate, test their validity, and clarify the situation. From this practice we know that this large swing in favour of the parent can be misinterpreted – it can mean that some boys and girls would like their parents to be able to discuss sexual matters with them, but that as things are they would find it too embarrassing.

One observation from this data must be remembered – most children at the age of 14 do not regard their parents as a major source of information.

The parents' view of 'sex education' in the curriculum

Over many years, I have discussed a variety of health issues with parents in connection with planning the social education component of the curriculum of the school that serves their sons and daughters. Typically it has been following the use of the *Just A Tick* enquiry method and the results it has produced from themselves, their children, the teachers, and on occasion from health-care professionals.

First of all, parents are pleased to be consulted, and the response to the enquiry

is very often over 80% or even 90%, and very rarely less than 70%. They do not assume that they are 'taking over' the curriculum. In fact, what rapidly emerges from these meetings is that parents share a lot of common anxieties, and gain reassurance from realising this. Teachers are not necessarily experts in 'parentcraft', and do not wish to tell parents how to bring up children, but they do experience the children going through the same stages of development over many years, and can take an objective view. Observation and interpretation made by them on normal growth and development of young people can be enormously helpful to parents. As parents we are inexperienced, having only '2.4' children per family, and what one learns from the first may not apply to the remaining '1.4'! A very predictable comment which arises from parents' evenings is that "we are the ones who need this health education – just as much as the children".

A personal view

At an anecdotal level, concerning my own efforts at being a responsible parent (which I believe I am), I offer the following observations and history. I should be well-equipped with accurate information and teaching skills to make effective contact with children of secondary-school age, and in the classroom setting I have

achieved this. I have two sons and two daughters, and my relationship with them through their teenage years was, to say the least, exciting. My wife and I care enormously about their wellbeing and progress, and do not necessarily agree with each other over the best course of action. My relationship with my teenage daughters fluctuated from being extremely positive to occasional periods of hostility. This was a family component to their personal and social education in which objectivity and rationality are sometimes hard to discern. Without doubt, through our own behaviour, our values are interpreted by our children, but some issues may be poorly explored and one or two never mentioned. My relationship with my two sons showed fewer extremes, but one observation I will make which is highly relevant is that I could talk to one of them about a wide range of sensitive issues, but I know I was too shy to address the other on some of these issues and they never cropped up in conversation between us. The point I am making is that even with high levels of insight and training, handling one's own family can usefully profit from outside professional help.

I am grateful to the caring and experienced teachers who provided a classroom situation in which aspects of personal development could be viewed objectively and seen in a social context, where the bolder children can ask questions that shyer ones would have liked to ask, and where, particularly, factual matters can be clarified and myths dispelled. Here, too, an important dimension for me has been that vocabulary has been built up, which helps parents contribute if and when they find the opportunity. I remember well one comment from a parent in this area, that when she broached the subject of menstruation to her maturing daughter she was greeted with the response "Oh, Miss Berry told us all about that in the primary school!" Obviously, Miss Berry had not told her 'all' about it, but the subject had been raised and the parent could build on a prepared platform. A further comment I would make is that teachers can help

by providing a common, accurate vocabulary to sex education, where a wide range of names and terms may be in use in the community the school serves.

Conclusion

The Unit in Exeter University, sponsored by the HEC, aims to promote and support good practice in health & social education in schools. This has brought us into contact with a large number of teachers throughout the country, and we have worked in depth with many of them. In all this work I have never felt that any of the teachers were trying to impose their own values on the children, but rather that one of the major underlying themes of their work has been the support of the relationship between the child and his or her parent.

At the beginning of this article I suggested the concept of a demarcation of responsibilities between parents and teachers might be attempted, but that overall one should complement the other. In general terms it might be, for example,

Teachers	Parents
Facts in context	Morality
	Code of practice

and it may be that within a particular school teachers should have approval to introduce topics within the scope of 'sex education'. It might be supposed that parents and governors create a check-list of components for sex education, and then against this request that the school shall provide adequate teaching on a number of topics but not all of them.

It must be remembered that most pupils do *not* see their parents as the major source of information, and that the alternatives may be less desirable, without the clarification which good school teaching can provide.

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Who or what IS your main source of sex information?

	Parents	Teachers	Friends	Siblings	TV etc.	Other sources
Boys %	19	12	39	1	21	8
Girls %	35	13	33	7	9	3

Who or what SHOULD BE your main source of sex information?

	Parents	Teachers	Friends	Siblings	TV etc.	Other sources
Boys %	51	17	20	1	6	5
Girls %	68	11	16	1	2	2

Table 1. Perceived and desired sources of information about sexual matters, from questionnaire responses from about 4,700 4th-year pupils in 1985.