The Views of Romanian Teachers on the Sexual Development and Education of Children

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Abstract

The topic of sexuality passes for a taboo in our country even today, there being no open treatment of the subject, not even in the closest family circle. There is no sexual education in schools, while sexual enlightenment is restricted to 1-2 hours, provided at the age of 13-14. Our goal is to determine the knowledge and views of Romanian teachers on the sexual development and sexual education of children. The survey was conducted in 2022-2023 as self-filling on-line questionnaire (N=455). Our research was aimed at exacting the knowledge of Romanian kindergarten teachers, elementary school teachers and teachers on the bodily and psychic safety of children, on the factors endangering these, on various topics of sexual education, on the openness of parents related to the sexuality of their children and the flexibility of kindergartens and schools in what pertains to the introduction of sexual education. Most of our responders consider sexuality to be a natural part of a healthy life and also that it should be tackled from the earliest possible ages both within the family and in educational institutions. According to the surveyed teachers, parents are reluctant to talk about sexuality to their own children and rely on sexual education in kindergartens and schools. If training on sexual education were to be introduced in Romania, most of the surveyed would gladly participate. They also recommended 27 related topics in 7 categories, all of which should all be covered by the said training. Our results called attention to the deficiency of education on reproduction.

Keywords: Sexual Education, Sexual Education Relevance, Teachers' Views



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Introduction

American sexual educator H. F. Kilander (1970) defined the essence of sexual education already in the 1970s, stating:

Sexual education consists of all educational proceedings meant to help young people prepare for all sorts of problems in life originating in one's sexual urges, which will inevitably occur in one way or another during the life of all normal people. These problems range across a huge variety of life experiences, from simple matters of sexual hygiene to extremely complex medical, social psychological and moral problems related to successful marriage and family life.

Sexual education is closely related to education furthering a healthy lifestyle, to family education but also to moral and civilizational education. Health and lifestyle education is closely related to sexual education, as knowledge and acceptance of our own body, a healthy sex life and a harmonious partnership are all parts of a healthy life. Several studies have emphasized the need for a sexual education among children and teenagers, and pointed out the fact that parents and schools are the most important sources for this type of knowledge. Health education in Romania merely touches upon sexuality, dealing only with sexual hygiene, reproduction and venereal diseases, while even this set of information only reaches pupils who choose Health Education as an optional subject (this is 6-9% of all pupils). Much like it happens in all other Eastern European countries, except for a few narrowly distributed and short-lived individual attempts, sexual education is not even today included in the curriculum of Romanian schools. There are isolated cases where physicians, psychologists or other health professionals are invited to deliver enlightening lectures to pupils at various schools, nevertheless this is far from sufficient and it cannot counterbalance the unfavourable influences young people are facing on a daily basis, through televised reality shows and series, in social media, pornographic papers and movies (Szilágyi, 2003).

In Romania, the Orthodox church is strongly against the introduction of sexual education programs. According to their stance, sexual education is "a form of manipulation and it mars children's innocence". Unfortunately enough, among European countries, Romanian has the second highest number of minor mothers. Statistics in 2019 revealed 16639 pregnancies among girls under 18 (based on a joint survey by UNICEF and SAMAS Association) (UNICEF, 2021). The number of early pregnancies is closely related to a low level of schooling and poor social conditions. Data in this study reflect the acuteness of the issue and the necessity for the introduction of a complex educational program.

The topic of sexuality still passes for a taboo in our country, not even in family would people openly talk about it. There is no such thing as sexual education at school, while sexual information is reduced to 1-2 hours for children 13-14 years old of age. The Ministry of Education is currently trying to introduce a subject called "Life Education" beginning with the fifth grade. Sexual Education is supposed to be a module of this subject. In June 2022, the Romanian House of Commons adopted a draft law that makes health education classes compulsory in schools beginning with the eighth grade (pupils of 14) and with the consent of parents, in order to avoid venereal diseases and teenage pregnancy.

Our research was meant to determine the knowledge, views and attitudes of Romanian teachers on the sexual development and sexual education of children.

Methodology

The survey was conducted in 2022-2023 as self-filling on-line questionnaire (via Google Forms) (N=456). The sampling was based on convenience, with the help of social media platforms, online groups dedicated to teachers, who have initially received a message with the invitation to participate in a study regarding aspects about sexuality and sexual education in Romania.

The questionnaire starts with informing participants on the study, then follow 7 questions/demographic items: gender, what kind of job you are working in and how many years have you been teaching, highest educational qualification, degree obtained in education, type of settlement where you teach, number of students in the institution. Following the demographic items, a number of 37 questions allow for the collection either of quantitative responses (5-point Likert scale a number of 7 questions, 7-point Likert scale a number of 10 questions), or of qualitative reflections (open, simple and multiple choice questions – 20 questions) on several aspects related to: the basic rights and needs of the child, the safe, free and joyful experience of its body, gender-related role behaviour, Underwear Rule, the importance of sex education and its sub-topics, the attitude of educators and parents towards sex education, sexually charged manifestations in the institution (kissing, display of genitals, masturbation, sexual harassment, etc.) needs assessment for participation in sexual education program.

The pre-processing of data was performed in Microsoft Excel (vers. 2019). During data pre-processing we cleaned the missing values. Data analysis was performed in R statistical environment (R Core Team 2019). We reshaped and summarized data using the *dplyr* package, while figures were generated with the *ggplot2* package.

Results

We distributed teachers as follows: 190 kindergarten teachers and primary school teachers (266 women, 1 man), 101 of which were primary school teachers. 139 teachers (119 women, 20 men), approx. majors, 75% of which had class teacher experience. The number of children taught varied between 6 and 2000.

Responses of Kindergarten and Primary School Teachers

51% of our respondents (n = 190) believe that sexuality is part of a healthy life and should be addressed from a young age, both in the family and in the educational setting. In contrast, 58% (n=190) of kindergarten and primary school teachers are not aware of the Underwear Rule. 47% of the respondents (n = 190) would emphasize the Underwear Rule in the future, 25% do not teach this rule to children, 15% think it is the responsibility of the parent to teach it, while 13% teach the Underwear Rule.

In 91% (n = 190) of the respondents' teaching practice, there were no cases of suspected sexual abuse of a child, while 9% had experienced such cases.

Respondents perceive different factors endangering children in varying degrees (Fig. 1). However, a large proportion of kindergarten and primary school teachers consider disparaging children's bodies and watching movies with sexual content to be very dangerous (Fig. 1). In the experience of kindergarten and primary school teachers, the most frequent

incidents include children kissing each other, telling sexually charged jokes or talking obscenely (Fig. 1).

Among kindergarten and primary school teachers, 69% (n = 190) would participate in sexual education training, 4% would not participate, while 27% are undecided. According to respondents, if age-appropriate sex education were provided in all educational institutions, risks would diminish, except for that of early sexual initiation, which based on the views of respondents would not be reduced by sex education (Fig. 1).

Responses of Teachers

44% of our respondents (n = 66) believe that sexuality is part of a healthy life and it should be addressed in different environments such as family or school from a young age. In comparison with kindergarten and primary school teachers, 62% (n = 66) of teachers are not aware of the Underwear Rule. 48% of the respondents (n = 66) would emphasize the Underwear Rule in the future, 12% do not teach this rule to children, 23% think it is the responsibility of the parent to teach it, while 17% teach the Underwear Rule.

Of all teachers asked in 2022 (n = 73), on being asked how they think parents feel about sexuality, 87% gave a response, while 13% declined to answer. The majority of teachers asked in 2022 (44%) believe that parents demand sex education at school and are open to discussing this topic. 15% of respondents suggest that parents are open and can accept the sexual behaviour of their child. 25% of respondents believe that parents are averse to, forbid, condemn and punish their child's sexual behaviour, while 3% believe that parents cannot accept the sexuality of their child.

In 2023, we asked the teachers (including kindergarten and primary school teachers) about the parents' opinion regarding sexuality. 55.1% of the respondents (n = 78) said that parents detest, forbid and condemn, punish the sexual behaviour of their child, 19.2% said that parents are open to and accepting their child's sexual behaviour, while 15.4% said that parents agree to the introduction of sex education in kindergarten and school and are open to discussions on such topics. 10.3% of the respondents gave no pheasible response.

The majority of our respondents (91%. n = 78) talk to children about sexuality, gender identity, sexual diseases, fertilisation, abortion, sexual hygiene and young people's physical and mental health.

The largest proportion of respondents said that adolescents are at high risk of unwanted physical contact and of being belittled, negatively commented on, or receive comments about their body or gender (Fig. 2). In a lower proportion, films and images with sexual content can also be very dangerous for adolescents (Fig. 2). According to teachers, the commonest sexual behaviour is obscene language, while a higher proportion of sexually charged jokes, body image problems and stripping and nudity occur side by side (Fig. 2). Most of the teachers agreed with the statement that if age-appropriate sex education were provided in all educational institutions, it would reduce the amount of misconceptions about sexuality, decrease adolescent body image problems, and reduce the number of abortions (Fig. 2). Similar to kindergarten teachers, teachers agreed in a lower proportion that sex education would reduce the early initiation of adolescent sexuality (Fig. 2).

In 82% (n = 139) of the respondents' teaching practice, there were no cases of suspected sexual abuse of a child, while 18% had experienced such cases.

If training on sexual education were to be introduced in Romania, 36% (n = 139) of the surveyed would gladly participate, also 36% would not participate, while 28% are undecided.

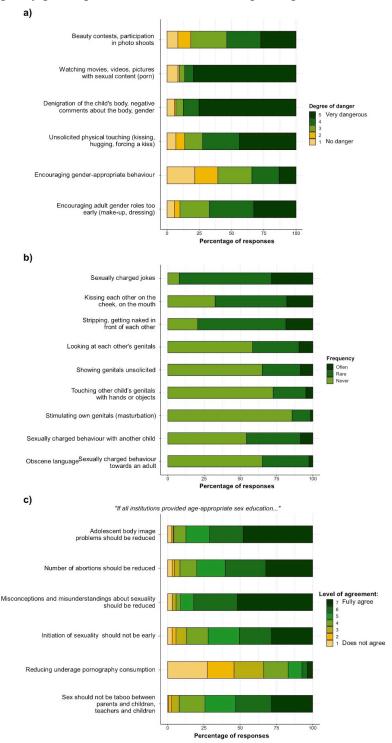


Figure 1: Panel a) Assessment by kindergarten and primary school teachers of certain factors that can be dangerous for children. Panel b) The frequency categories of different sexually charged behaviours perceived by kindergarten and primary school teachers.

Panel c) Attitudes of kindergarten and primary school teachers about possible outcomes of appropriate sexual education in school. The sample size for each question is 190.

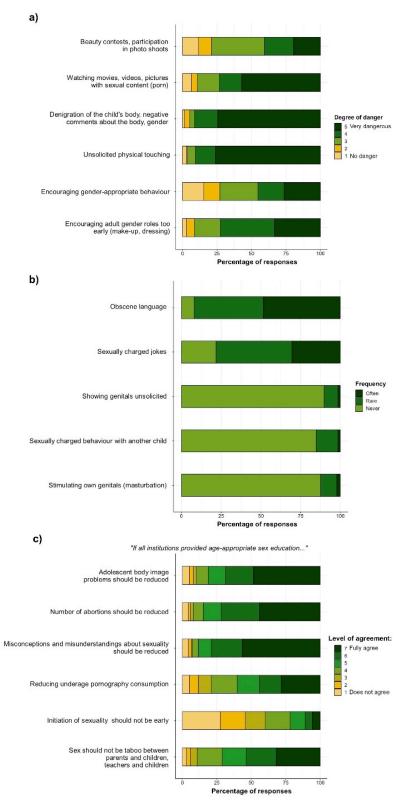


Figure 2: Panel a) Assessment by teachers of certain factors that can be dangerous for adolescents. Panel b) The frequency categories of different sexually charged behaviours perceived by teachers. Panel c) Attitudes of teachers about the possible outcomes of appropriate sexual education in school. The sample size for each question is 139.

They also recommended 27 related topics in 7 categories, that should all be covered by the said training (Table 1).

Table 1: Topics in sex education proposed by teachers for possible future training.

Proposed categories	Topics
Introduction to biological	conception, ovulation, menstruation,
processes	pregnancy, childbirth, body changes
	during adolescence
Preventions	contraception, unplanned pregnancy,
	consequences of early childbearing,
	disease prevention, importance of
	hygiene
Mate choice and family planning	how to choose the right partner,
	family planning, marriage
Sexual abuse	sexual abuse, implications of sex
	work
Sexual gratification	sexual intercourse and the
	corresponding level of emotional
	development, masturbation, the
	effects of pornographic content, body
	awareness, what happens in the body
	during sex
Communication and psychology	teaching assertive communication
	strategies, communicating with
	partners, developing good body image
Gender identity	gender identity, LGBTQ (+)
	propaganda and its dangers,
	acceptance of difference

Conclusion

In several countries and cultures, the question arises: who is the most competent person in providing sexual education for children and the young? According to Szilágyi (2013) sexual education is the task of all those who are charged with the education of children. The most proper solution would certainly be if parents could answer sensitive questions and thus help the development of a secure atmosphere at home, but everybody is not fit to do this. Parents know that the most important factors in the sexual education of their children are trust and open-mindedness. The age of children and parents, the personal experience accumulated by parents, their communication skills should be taken into consideration, and still, only a few are prepared to undertake these tasks (Iorga et al., 2021; Mocanu, L. 2018, Noorman et al., 2022). In most cases, parents delay sexual education, usually with the excuse of children being too young for the process, until the task is transferred to teachers, who are unable to find the necessary time within their kindergarten or school curriculum to perform the difficult task. A number of studies found that parents need information, motivation and strategies in order to reach optimal results. From among factors characteristic of individuals and families in relation to the sexual education of children, the literature considers the following important: genetic factors, social and economic status, family structure, family atmosphere, the gender of parents, their educational and communicational style, the sexual education level of parents, parent attitudes, values and convictions (Walker, 2004; Bersamin et al., 2008; Vidourek, Bernard & King, 2009; Goldman, 2008; Pop-Rusu, 2015). Shtarkshall et al. (2007)

concluded, that health and educational systems must provide sexual education for adolescents and young adults. This education is best provided in institutions by the end of the primary school section, while it most often begins in high school, at an age when young people have already begun their sex life. The question arises: where from, then, comes the knowledge of children on sex life and related techniques. Initiation is most often provided by and older friend, but it also can come from multi-media devices. The age of Internet and easily available porn allows early access to certain dimensions where young people can collect erroneous information and experience.

According to data in the literature, sexual education programs in schools are not properly implemented, they are less effective and lose their preventive character (by being introduced too late) (Pop-Rusu, 2015), and this is yet another argument for laying the bases of sexual education (attitudes, beliefs, behaviour, values) at an early age and in close cooperation with families (Colarossi et al., 2014). Some researches report how teachers are insufficiently or poorly educated within sexual education programs, consequently they cannot properly answer questions arising in class (Howard-Barr, Rienzo, Pigg & James, 2005). A positive approach is not enough to enable someone to teach information, attitudes, views on sexuality, teachers need the proper set of information at their disposal in this field, they need to develop skills and self-assurance as well (Mkumbo, 2012; Gonzales-Acquaro & College, 2009). According to Brown and Pirtle (2008) a set of factors determine the way sexuality is expressed and understood, such as culture, religion, social and economic situation, even history. In Romania, the Orthodox church has the greatest influence over political decision-making, in what pertains to sexual education and its specific topics (Turcescu & Stan, 2005). According to the results of another research (Ionescu et al., 2019), age and religiousness are negatively corelated to views on and attitudes toward sexuality. Older and more religious teachers are much more conservative. Depending on the personal views and individual experiences of teachers in the field of sexuality, the content and style of their teaching may vary. Even if teachers recognize the necessity of sexual education, their majority reports difficulties in the teaching process, either due to a lack of proper scientific or personal training, or because of worries related to the eventual reactions from the families of their pupils (Maia et al., 2015).

Contrary to the situation in Romania, in most European countries sexual education is compulsory at school (from 1955 in Sweden, 1970 in Austria, 1996 on Estonia, 1998 in France) and in certain countries the subject is taught in an interdisciplinary approach (the Netherlands, Finland) (BGZA, 2018). In Romania, in 2001 the optional subject "Health education in Romanian schools" was introduced, it was not compulsory, and it had to be opted for by schools, as it also depended on the expertise of teachers. Data show that only 7-9% percent of pupils have received health education. The last effective law (45/2020) required at least one session of "Life Education" per semester (which also includes sexual education) to prevent the spread of sexually transmitted diseases and teenage pregnancy.

According to the presently effective stance (decision reached in June 2022), sexual education within the frame of the subject "Life Education" can only be provided with parental consent and beginning from the age of 14 years, and the subject should ideally be taught by teachers of biology, psychologists or properly trained health workers. According to a survey performed in Romania (Oncioiu, 2021) 78% of the interviewed pupils would prefer the subject Sexual Education to be compulsory and also to be mainly taught at school. Pupils would like to know more on the prevention of pregnancy, venereal diseases and contraceptive methods. They would like to talk openly about the joys of the sexual act, the difficulties of

the first love-making, they would like to avoid being judged for beginning their sex life, and they would also prefer a safe space where to express their feelings, fears and curiosity.

Based on our results, the majority of teachers consider sexuality to be a natural part of a healthy life, and the subject should be approached both in family and in educational institutions from the earliest possible age. This is in accordance with the opinion of several professional fora (WHO, 2010) and with the results of other research as well (Varga-Tóth *et al.*, 2019, Hercz & Lassú, 2018). If training on sexual education were introduced in Romania, the majority of our respondents would gladly participate. Results called attention upon educational and pedagogical lacks in the field of reproductive life. The correction of this is a complex task. To solve this problem, a change of approach is needed within the educational system in the sense of accepting and following guiding lines based on scientific proof. Parents, teachers and educators need to be aware of the mental image children have of themselves, and the influence this image has upon the roles these children will adopt in society. Sexual education needs to be incorporated into the educational process with no delay, beginning from an early age (toddlers) and right until the age of young adults.

The conclusion reached here is the following: as sexual education is a multidimensional concept, it requires equally multidimensional and interdisciplinary approaches both in planning sexual education programs, in implementing them and in interpreting their results.

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