

Sexual Health Education in the Classroom

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Each person who attended a public school has a memory of sexual health education from his or her elementary or high school years. For many people, the memory more than likely involves feelings of embarrassment, awkwardness, and the desire to run out of the room and go back to math class. According to Gegenfurtner and Gebhardt in *Sexuality Education Including Lesbian, Gay, Bisexual, and Transgender (LGBT) Issues in Schools* (2017), “Sexual education is education about sexual anatomy, reproduction, birth control, sexual health and well-being, sexual orientation, gender identities, and gender roles” (p. 216). For many students, the topics covered in sexual health education are limited to sexual anatomy, reproduction, birth control, and sexually transmitted infections. Diagrams of the body are shared, body parts are named, and menstrual and birth control products circulate the room. It is time for our sexual health education program to change and provide a full education on sexual health, relationships, reproduction, and pleasure. If students are provided with an honest and complete sexual health education the stigmas around sexuality and bodies will begin to change, and we will have a group of students entering into the world and becoming adults who are comfortable with their bodies, in tune with their bodies and willing to ask questions and engage in conversations about their bodies and sex.

Sexual health is a topic that parents are often not comfortable discussing with their children, and ironically it is also a topic that many teachers often are not comfortable discussing and do not feel prepared to teach. Robinson and MacLaughlin in *Sexual Health Education Outcomes Within Canada’s Elementary Health Education Curricula: A Summary and Analysis* (2019) suggest that “further investigation needs to take place in order to determine the means through which teachers can be more

adequately trained and prepared to implement curriculum—particularly when curriculum is meant to evolve and improve to better satisfy a more sexually diverse population” (n.p.). The need for sexual health education to be transformed exists, but a change in the education of teachers on this topic needs to take place at the same time. If parents and teachers are not comfortable having and facilitating open and healthy conversations around sexual health how can we expect students to come to adults with their questions or seek help from a trusted person when they run into a situation they are not equipped for? In Vernacchio’s *For Goodness Sex* (2014), he writes, “it’s the silence from the trusted adults in [students] lives that leads so many [students] to go to the Internet for answers” (p. xi). It is time to prepare teachers to hold space for these valuable conversations and to teach students a wholesome sexual health education program. It is time to equip teachers to be able to teach this program in a way that they are respected by their students so that students will come to teachers with their questions instead of going to Google.

Sexual health education programs today rarely share how normal it is to feel attracted to others; neither do these programs name how healthy sexual relationships for the right reasons are. In *Sexuality, Schooling, and Teacher Identity Formation*, Vavrus (2009) reports that:

the affective relational aspect of sexuality was never discussed in the school curriculum. “There was an emotional piece about sex that no one had talked about, certainly not in any health class,” one female teacher candidate reported [...] “What is rarely touched upon,” one male noted, “is the tremendous value and comfort of having another person who loves you, and whom you love.” Only in

one instance did a teacher candidate note that a public school teacher had conveyed that “sex was a healthy way of showing love” although this was couched in the framework of heterosexual marriage. (p. 387)

When students have not learned that their feelings of attraction and desire are normal and healthy, students have a difficult time making knowledgeable decisions and often make reactionary and impulse-based decisions. Decisions that they often hide from trusted adults. If we can start talking about attraction and desire as a regular part of being a person, then we can also start talking about and begin to remove the stigma around, desire, attraction, and even self-pleasure. Such a conversation and the normalization of this basic human need might be what empowers today’s students to make decisions from a place of knowledge rather than from a place of impulse. “The first step is learning to see our own kids’ sexuality as a *necessary and normal* part of the human lifespan from birth to death. We are born with bodies, emotions, and desires – including sexual desires. Forming connections with other people is essential to our survival” (Vernacchio, 2014, p. 10). Students need to receive complete information and honest answers from the adults in their lives. With the right information, the complete information, students will be able to make educated decisions about what to do with their feelings and desires. Students will also understand that what they are experiencing is both reasonable and healthy and will be empowered to make the decisions they want to make instead of the decision they think is the only solution to what they are experiencing.

Changing our current sexual health education program from one based on fear to one based on a comprehensive look at sexual health, relationships, feelings, desires, and our bodies’ means that we have to have teachers who feel equipped to speak the truth.

When we normalize the feelings, desires, and curiosities our students have sexually, we will have students who are less afraid of what they are experiencing and feel equipped to make educated decisions. Hendrickson-Jack in *The Fifth Vital Sign* (2019) writes that most women were “taught that [they] can get pregnant on every day of [their] cycles” (p. xx) she continues to share that “the most significant shift for me was realizing that there were only a few days of my cycle when I could get pregnant. I felt that this knowledge put the power directly into my hands and I was no longer afraid of my fertility” (p. xix). By teaching young women about how their bodies work alongside teaching about birth control options, we will be empowering a generation in their decision making instead of putting them in a place of fear. If we teach all students about how men and women’s reproduction work, we might find that students pause long enough in their sexual relationships to have a conversation rather than entering into something stuck in the place of fear with know way of moving to a place of knowledge. Fear is not going to get our students anywhere; teaching a complete sexual health education program will equip students for the rest of their lives.

It is time for our schools to provide a sexual health education program that is as comprehensive as our Math and Language Arts programs. Vernacchio summarizes this up nicely:

[...] young people who know their values, who believe themselves worthy of love, who feel good about their bodies, who see pleasure as a means to build intimacy and connection with another, and who live their lives not fearing mistakes but using them as lessons to reorient themselves toward success. (p. 13)

May we begin to equip teachers to teach a sexual health education program that has students entering into the world and becoming adults who are comfortable with their bodies, in tune with their bodies and willing to ask questions and engage in conversations about their bodies and sex.

## References

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