FROM OUR CONSUMER CORRESPONDENT

Sex education

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Introduction

I've spent the past week struggling with what you might call a contraceptive conundrum because, as regular readers may remember, for the April 2004 issue of the Journal I was asked to conduct and write up a qualitative survey of European women's attitudes to sex education. I duly reported on what one might call the basics: how the women had learned about gender differences, the fact of sex, the values surrounding the act and how to make it pleasurable and meaningful, and so on.

The message that came through was clear. Sex education had been largely accurate, informative and positive – but it had also been somewhat emotionally charged. Many women throughout Europe, particularly in more Catholic countries, had spent their early years squirming with embarrassment. The current cry from the heart was not for different content in sex education but for better delivery, more relaxed and sympathetic presentation and, above all, the teaching of more emotional literacy around sexuality.

A contrast

What a contrast a change of focus makes. Drawing on the survey again in preparing this article, and concentrating not on what women had learned about sex itself but on what they had learned about contraception, the picture was very different. What struck me immediately and with force was the comparative lack of emotion in women's answers. While women wrote at length and in detail about their memories of learning about love making, the references to contraception were brief, to the point, objective. Whereas women wrote passionately about the sex act and its place in their lives, when it came to guarding against the consequences of that act, the mood could only be described as dispassionate.

So here's the conundrum. Why, when sex education in general was viewed with a high level of emotional intensity, was the part of that education which deals with contraception not similarly emotionally weighted?

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Why low emotion?

Certainly one cause is the subject matter. Sex itself is viewed by society ambiguously – and often as something bad or dirty. But even when seen as completely positive, sex is about relationships and hence fraught with the possibility of rejection and failure – particularly for young people. In today's society, even children are aware of and subject to pressure to be sexually attractive, competent, sexually successful. In comparison, the act of taking a pill or inserting a diaphragm may be physically messy but emotionally it's comparatively clear-cut, controllable and in itself has no positive or negative emotional repercussions. As one Finnish respondent put it: "sex [is

about bringing] love and joy into your life ... [while issues of contraception] are scientific matters".

But I believe that the lack of emotional charge around contraception is also directly due to the way women learn about the topic. One key is the age at which women learn – almost always at a much older age than they were informed about the basics of sexuality. Whereas the typical age range of learning about sex, pregnancy and labour in the European survey was between 5 and 11 years, the typical age range of learning about protection was from 14 years onwards - one-third of respondents didn't even learn where to get contraception until they were 18 years or older. So while the initial 'news' about what sex involves may have carried a flurry of shock and embarrassment, by the time women came to learn about protecting against the consequences they'd had time to come to terms with the fact of sex, were more mature, more equipped to take things in their stride.

Formal delivery

Also, the survey revealed that in Europe, contraceptive education was often delivered formally, sometimes in a school context, sometimes from government initiatives, from books, websites – only occasionally from parents: The exceptions were typically from Germany and the Scandinavian countries: "My mother bought [condoms] for all of us, so I always had them if I needed them" (Danish respondent). The result? This more formal tuition – often in biology or science classes – is doubtless less emotionally charged because it is done as a practical subject, by professionals with emotional distance, in a formal manner – sometimes even done through text media with no embarrassing personal contact at all.

A third reason why contraceptive education may not have caused many emotional ripples in women's lives is because, overwhelmingly, it appeared to have been well done. A very high proportion of respondents (i.e. 26/30) judged the teaching of contraceptive protection that they'd received as being 'good ... useful'. (Embarrassingly, three of the four negative respondents hailed from the UK.)

The result?

As a result of all these factors, though education on contraception was admitted by all women to be crucial, it was somehow on the sidelines, a mechanical issue that was simply accepted as part of the deal, but with no great angst compared to the central issues of 'whether, how and with whom' one should make love. So how does this impact on women's use of protection – their attitudes, their convictions, their compliance?

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The women's own view seems clear: all of them claimed that their education has left them fully aware of the



importance of contraception. "I am certain that the most important things I learned about sex were to protect my partner [and myself] ... from unwanted pregnancy." And almost all the 30 respondents - including those from Catholic countries – seemed convinced of the benefits of protection, the "safety ... relaxation ... freedom from unplanned pregnancy ... If you know about contraception and the effects, you [can] let your hair down ... feel and enjoy". So far, so theoretically good.

What of the women's actual performance? Aside from a few reported myths that were quickly laid aside such as "My older cousin always told me that you could get pregnant by kissing a boy", and just one report of teenage sex without a condom, the impression I get is that our cohort were and are in charge of their contraception and are using it effectively.

They are motivated too – for despite the fact that many women believed they would be supported if they got pregnant, there was a high awareness of the implications and problems of unwanted pregnancy. This may have been based on religious belief informing contraceptive education: "I am from a Catholic family, pregnancy should come after marriage, not out of wedlock". Or it may have come from a more humanistic viewpoint: "[when I was young, pregnancy] would be seen as stupid ... [it would mean that] that you had behaved recklessly". Whatever the underlying motivation, the message had got through.

Problem – or not?

Done and dusted then. The evidence of the European women's survey would surely suggest that current advice on contraception is working 100%, that the current delivery in mid-teenage years through formal means is totally effective, that we may all sit back on our laurels.

Except, of course, that it's not like that at all. Yes, the women who answered my survey seem uniformly 'sorted' around contraception - but broader European statistics clearly suggest that not all women are. And yes, the women who participated in my survey seem to have escaped unwanted pregnancy – but the figures clearly show that not all women do. So has the survey anything to offer to explain why, when it comes to contraception, the logical and scientific approach doesn't always result in effective, reliable use of contraception?

I think the survey does provide insight. Namely because I think that one key to the misuse of contraception lies in just the very dichotomy I've been describing - the contradiction between the emotional weighting of women's view of sexuality against the non-emotionality of their contraceptive education.

The long-term benefits of contraceptive protection may simply be overwhelmed by the need for intimate connection.

However objective and logical women's thoughts about contraception are, they pale into insignificance when put against the emotional charge of lovemaking, partnership,

'dating' and 'pulling'. Particularly for young women, whose hormones are on full alert and whose need for the security of a loving relationship is high, the long-term benefits of contraceptive protection may simply be overwhelmed by the need for intimate connection.

Feelings undermine compliance

So the distress these women experienced when first learning about sexuality leads directly to an unresourced emotional state when they come to have sex. The confusion and embarrassment they felt when first receiving sex education is directly involved in the fact that sometimes they deprioritise contraception. The 'emotional literacy gap' that they reported in their original sex education means that however clearly they understand the mechanics of contraception, when it comes to the crunch they are sometimes unable to insist on protection when with a real partner, in an emotional relationship.

It's not enough to tell young people what a condom is.

Given a choice between unprotected sex now and protected sex in half an hour's time they may be so emotionally deresourced that they choose the former. Given a choice between reaching for a condom or going ahead regardless they may be so embarrassed that they do the latter. Feelings, quite simply, undermine compliance.

What can be done? At the risk of repeating the plea I made in the first of these articles, it's all down to sex education that offers emotional literacy as well as factual information. And this is just as true about contraception as any other topic in the sex education syllabus. It's not enough to tell young people what a condom is - you need to give them repeated practice in handling the emotions they will feel when arguing with a resistant partner. It's not enough to inform young people that the contraceptive pill is available - you need to tell them how to cope when subconsciously they are tempted to 'forget' to take it in order to have a baby to love and to cuddle.

> In contraceptive issues as well as everything else, emotion will trump rationality every time.

To sum up, emotion will trump rationality every time – in contraceptive issues as well as everything else. And the sooner we fully accept this fact and place it at the heart of our sex education programmes, the better.

Author's Note
A cohort of 30 women aged between 20 and 30 years from Britain, Belgium Croatia, Cyprus, Denmark, Finland, France, Germany, Greece, Holland, Iceland, Ireland, Italy, Latvia, Malta, Poland, Portugal and Spain filled in a qualitative e-mail questionnaire during the period December 2003-January 2004.

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