Comprehensive Sex Education: Holistic Approach to Biological, Psychological and Social Development of Adolescents

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Received 2017 November 11; Revised 2018 October 09; Accepted 2019 February 05.

Abstract

Comprehensive sex education (CSE) aims to help youth gain a positive view of sexuality and appropriate knowledge to make healthy decisions about their sex lives. This report reviews CSE’s holistic approach towards biological, psychological and social development. Relevant articles were gathered from Google Scholar and PubMed search engines, after applying inclusion criteria and screening papers. CSE proved to reduce STDs, pregnancy, delay sex initiation and promote safe sex. The psychological outcomes included decreased depression and increased self-esteem. CSE promoted healthy relationships and reduced discrimination around sexual orientation. Therefore, CSE programs support holistic youth development. This report recommends further research to correct inaccurate assumptions and increase support for CSE programs.

Keywords: Comprehensive Sex Education, Adolescent Development, Holistic Development, Sexual Health, Reproductive Health, Positive Youth Development

1. Background

The WHO (2016) (1) reported the main causes of mortality among adolescents as pregnancy, childbirth, HIV and suicide. This highlights the need to focus on sexual health as a key component of youth development. Comprehensive sex education (CSE) equips youth with knowledge, skills and values that promote a positive view of sexuality, through a holistic developmental perspective; beyond mere prevention of pregnancy and STIs (2). The United Nations recommended CSE as a mandatory school curriculum and collaborated with ministries of different countries to further this goal (2). However, religious institutions have raised moral objections believing it would increase sexual activity.

2. Objectives

This report focuses on CSE programs for holistic youth development, as the first review to include physical, psychological and social outcomes.

3. Methods

The outcomes (physical, psychological and social health) were outlined from health deficiencies identified by WHO (1)-pregnancy, childbirth, HIV and depression. Studies were identified through searches of 2 databases—PubMed and Google Scholar, with the keywords “comprehensive sex education”, “pregnancy”, “HIV”, “depression”, “wellbeing” and “discrimination”. The inclusion criteria were applied and relevant studies selected for discussion in this report (Figure 1).

3.1. Inclusion criteria

- Curriculum-based CSE in the United States.
- Subjects aged 9 - 24 years.
- Experimental designs.
- More than 50 participants.
- Variables: initiation; contraception; pregnancy; STDs; depression; self-esteem; relationship and LGBTQ.

Identified studies were reviewed and specific information was summarized.

4. Results

This section describes the findings of CSE programs on (i) physical (ii) psychological and (iii) social Health outcomes.
4.1. Physical Health

CSE programs address a range of sexual health concerns, through instruction on abstinence, delaying sexual initiation, safe sex and contraception. Contrary to assertions that sex education increases sexual activity, research demonstrated that CSE programs are more effective in delaying sexual activity than abstinence-only programs (3, 4).

A comparison between CSE and abstinence-only programs (5) revealed significantly lower pregnancy rates among adolescents who received CSE. Another study (6) based on a nationwide U.S. survey indicated that CSE programs were associated with delaying sexual initiation and increased contraceptive use.

In regards to sexual diseases, CSE teaches healthy practices to prevent HIV and STDs. A survey based study (7) found that CSE was associated with increased contraceptive use and less intoxicated sexual intercourse. A comparison study between CSE and abstinence-only programs (8), indicated that one third of abstinence programs had significant positive effects on sexual behavior and delaying sexual initiation, while, two thirds of CSE programs delayed sexual initiation and increased contraceptive use.

Another study of CSE programs across the country (9) found that a majority of interventions had a 35% reduction in STD incidence.

4.2. Psychological Health

Mental illnesses leading to suicide, a leading cause of death among adolescents (1), have been associated with increased sexual activity (10). Researchers have explained this relationship; young people with depressive symptoms may indulge in risky sexual behavior as a means of seeking comfort, while indiscriminate sexual activity may act as a risk factor for developing low self-esteem and depression.

CSE programs address this issue through self-awareness and self-management skills building, to promote mental wellness and responsible sexual behavior.
Several researchers have reported that CSE programs contribute to general psychological adjustment. A recent study by Weinstein and other colleagues found that greater sexual health knowledge among college students was correlated with greater sexual assertiveness and confidence (11). CSE programs are particularly instrumental in promoting wellbeing among vulnerable youth, such as female and LGBT (lesbian, gay, bisexual, and transgender) adolescents, by challenging gender stereotypes and stigma, providing factual information on LGBT issues and boosting self-esteem levels. Several researchers have indicated that a CSE curriculum has positive associations with mental health among students (12) and LGBT youth in particular (13). Additionally, LGBT youth receiving sex education that is sensitive to their sexuality and gender identification (such as CSE) report less risky sexual activity and increased wellbeing (14).

4.3. Social Outcomes

CSE programs teach social awareness and relationship skills to support healthy relationships, sexual health and prevent intimate partner violence. Research indicates that students educated on dating violence experience less harassment and abuse (15, 16). Another trial found that addressing gender and power in relationships was associated with improved sexual communication between partners and decreased negative physical health outcomes (17).

CSE programs provide knowledge relevant to LGBTQ issues, thus reducing stigma and creating a safe, supportive school environment. A national survey study found that CSE programs acted as predictors of decreased discrimination against LGBT youth (18). Another study suggested transgender youth reported feeling safer when the school curriculum incorporated LGBT issues (19). Furthermore, studies have shown that learning healthy sexual attitudes and behavior through CSE leads to better academic success (20).

5. Discussion

Sex education in schools is a controversial issue, due to the religious and cultural considerations surrounding this debate. However, as sexual activity remains a reality for young people, it is necessary to implement comprehensive sex education programs in schools, to provide adolescents with accurate information regarding sexuality and equip them to make responsible, informed decisions regarding sexual behavior. The results of this review paper present the beneficial impact of comprehensive sex education programs as a holistic approach to adolescent development. Further research with larger samples and conclusive findings is recommended, in order to correct inaccurate assumptions, sway public support and influence government funding for comprehensive sex education programs.

Footnotes

Authors’ Contribution: Danielle Fernandes developed the study concept and design, abstracted data and wrote the manuscript. Mohita Junnarkar contributed to the development of study concept and protocol, and supervised the study. Conflict of Interests: The authors have no financial interest related to the manuscript content. Funding/Support: There was no funding required.

References


