

Journal of Adolescent Health & Welfare

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CHARITY NO 296080

Letter from the Editor

Dear Colleague,

Here we are once more at the end of a fruitful year, the winter edition rounding off our activities. This year we had a very successful fifth yearly meeting at the Royal Society of Medicine and the transcript of the talks will appear in the journal's next issues.

This issue is aiming mainly to inform you about future events in which we hope you will participate. We are keeping it short and to the point since there is not so much time to read journals at a time when people are either arguing about where to spend christmas or cooking mountains of food, or worrying about buying the right presents without going bankrupt.

Speaking of presents - I am sure that over the festive period lots of you will receive extra presents, two copies of the same book, a game you have played before etc. And then perhaps you could remember Youth Support?

We would be very grateful to receive any toys, books, games. We need these for our nursery and schoolroom and also for the resident teenagers and babies. Good second hand things would be useful too.

Thank you very much to the schools who donated surplus crayons and toys and the harvest festival food which 'went down' well!

A very happy Christmas to all our members and a prosperous new year for all our young people.

Best wishes,

Dr Diana Birch MBBS DCH MRCP MD
Director "YOUTH SUPPORT".

Patrons: Dame Josephine Barnes; Sir Frank Mills.

CHARITY NO 296080

APPLICATION FOR MEMBERSHIP OF THE "YOUTH SUPPORT"
"FORUM ON ADOLESCENT HEALTH AND WELFARE"

PLEASE COMPLETE IN BLOCK CAPITALS AND SEND to:-
YOUTH SUPPORT 30 Crystal Palace Park Road SE26 6UG
Cheques payable to YOUTH SUPPORT

I would like to join the "FORUM ON ADOLESCENT HEALTH AND WELFARE" I enclose £20 registration fee which covers my first years membership (journal included in cost).

NAME POSITION.....
ADDRESS.....
.....
.....PHONE.....

WE ARE UPDATING OUR MAILING LIST - PLEASE COMPLETE FORM WITH YOUR CORRECT ADDRESS AND DETAILS IF YOU WISH TO CONTINUE ON THE LIST - THANK YOU.

**INTERNATIONAL ASSOCIATION FOR
ADOLESCENT HEALTH (IAAH)
FIFTH CONGRESS: "A TIME FOR ACTION"**



Address of the Congress (Permanent Secretariat)

JULY, 3-6 1991
CONGRESS CENTER
MONTREUX, SWITZERLAND

IAAH, Fifth Congress, Office du Tourisme, Case postale 97,
CH - 1820 Montreux, Switzerland.

TEL 021 963 12 12; FAX: 021 963 78 95; TELEX: 453 222

MEETINGS

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Young People and HIV infection

WEDNESDAY Feb 27th - AT the R BROOKS lecture hall - St Bartholomew's Hospital
A joint conference held by "YOUTH SUPPORT" and "THE SOCIETY OF PUBLIC HEALTH"
on issues relating to HIV infection and young people - 'What can we do to be effective in prevention?' -
'What should we be telling the young?' - 'Is it too late to help?'

Application form enclosed - please complete as soon as possible.

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ICE BREAKING SWIM - YES, WE ARE DOING IT AGAIN

THIS IS A SPECTACULAR WAY TO START THE NEW YEAR!

By popular request the ice breaking swim will take place on 1st January 1991

There are two alternatives -

A - Members outside London may like to organise their own local swim - and get sponsorship to help raise money for Youth Support.

B - Members wishing to join in our London event - Please telephone 081-650-6296 for details and sponsorship forms.

Last year was great fun - and the rum punch revived the swimmers deliciously!

* * * * *

Dates for your diary.....

VALENTINE'S DAY 14th February 1991 - We are organising a dinner and dance - as fund raising and for fun! Venue is yet to be confirmed but will be in London. We will send details to those interested in the near future. There will not be another journal issue before Valentine's day so please ring 081-650-6296 for details and to make provisional booking.

This event will include a raffle with prize of candlelit dinner for two -
How about buying tickets now?

* * * * *

Youth Support House - Official opening

13 Crescent Road, Beckenham.

This will take place on - Saturday 13th April - We will have an 'opening' by a celebrity in the afternoon and a disco in the evening.

We look forward to seeing you all there.

* * * * *

SEX EDUCATION

The National curriculum has brought a number of changes in the way that sex education and health education is introduced in schools and discussion of the implementation of the Curriculum has reopened 'old wounds' in the battle for information. In our Horizon film "The child Mothers" a Ghanaian doctor remarked that in education we believe that knowledge is a good thing whereas in the field of sexuality we believe that knowledge is a bad thing - where lies the sense? The following article is reproduced here due to restate the case for good sexual information for the young. In the last paragraph the excellent record of Sweden is mentioned, but I should perhaps point out how admirable and even more effective has been the record in Holland, who really are the 'world experts' in this field.

Sex Education - Does Mother know best?

Dr Diana M.L. Birch

Abstract

There has been widespread public and professional concern regarding the rights of young people under the age of sixteen to sex education and confidential contraceptive advice. It has been argued that sex education encourages promiscuous sex and that teachers and doctors should not discuss sexual matters with teenagers.

In order to discover the influence of sex education on sexual activity and the feasibility of confining all teaching on sexuality to parents, a group of 122 pregnant schoolgirls were investigated. These girls had experienced sexual intercourse from a relatively early average age of 13.5 years. More than a quarter of girls had no sex education prior to their pregnancies and 95% had not been taught the facts of life by their parents.

It was therefore concluded that sex education does not encourage young people to indulge in early sex, that girls in deprived areas do not obtain sexual advice from their parents and that there is a desperate need for confidential counselling services for these young people.

Introduction

There has been widespread public controversy over the issue of under sixteens and their rights to contraceptive advice and sex education. The crux of the argument would appear to be whether or not young people, particularly young girls are able to discuss sexual matters with their parents.

Opponents of school sex education lessons have argued that it is a parent's responsibility to teach their children about sexual matters, but how many parents actually attempt to talk to their children about sex? American studies have consistently found that children receive little sex education in the home. "The family doesn't tell and the girls don't ask" (Ref 1). In fact, 1 in 3 mothers in the United States have not even talked to their daughters about menstruation (ref 2). "... (young people) are haphazardly prepared for sex. Few get timely information from their families" (ref 3).

Girls who have good relationships with their mothers are less likely to have early sex however provision must be made for those adolescents who do not (ref 3). These girls and boys are most likely to obtain their sexual knowledge from peers who are often equally misinformed (ref 4, 5).

Method

It has been argued that sex education encourages early sexual activity. It was therefore decided to investigate a group of teenagers who had indulged in early sex in order to ascertain the degree of sex education which they had received and its source. This study was part of a wider research project submitted to London University as an MD thesis.

All girls falling pregnant while still at school or while of statutory school age and resident in Camberwell district were included in the sample population. The study covered the period 1980-1983 during which time 122 pregnant schoolgirls were identified the mean age of whom was 15.5 years (range 12-17). Baseline information regarding family and social history was obtained at first contact and a data sheet was completed including information regarding their sexual history, sex education and the degree to which they were able to talk to their mothers about sexual matters. This first interview was the entry point to a longitudinal study extending to two years after delivery; baseline information was obtained from all 122 girls.

Girls were asked at what age they first had sexual intercourse, whether they knew what to expect at that time and whether they knew anything of the facts of life. They were asked if they had ever had any sex education and specifically whether they had learned the facts of life from their parents, friends, or other sources such as books or television or whether they had sex education lessons in school. They were then asked to consider whether they had learned 'a little' or 'a lot' from each source. As an additional guide to how well they were able to communicate with their parents, girls were asked whether they had told their mothers about their pregnancies.

Questions regarding sexual experience were interspersed with questions of a more general nature in order to present a less 'threatening' approach to the young girls. The interview was conducted in as informal a manner as possible and girls were encouraged to make spontaneous comments. Girls were seen in their own homes and in cases where first contact had been made elsewhere, such as at an antenatal clinic or in school, a home visit was made soon afterwards. All girls were given entirely confidential interviews and arrangements were made to see them in the absence of their parents, although with parental permission.

Results

The general level of knowledge of sexual matters among pregnant schoolgirls was found to be appallingly low. More than a quarter of girls had received no sex education whatever prior to their pregnancies and none of the younger girls aged under 14 had received any sex education at all.

Girls in the sample had their first experience of sex at an average age of 13.5 years. One girl was only 10 when she began to be sexually active and six were aged 11. Most reported that they had not known about the 'facts of life' when they first had sex. Many stated that they 'learned by experience' or that their 'boyfriends told them'.

The most commonly cited source of sex 'education' was information picked up from friends, this was often unreliable. "My mate told me you can't get pregnant the first time"; "He said it was OK 'cos he was too old"; "You can get pregnant if you get in the swimming pool after the boys". 37% of girls said that they had gained a little knowledge from their friends and 14% thought that they had learned a lot from them. School was the next source but several girls said that they had fallen pregnant before the school sex education course or had missed it through truancy (Table 1).

95% of pregnant schoolgirls had not learned anything from their parents about the facts of life and 87% reported that their parents had never even tried to talk to them about sex (Table 2).

Conversely girls found it equally difficult to talk to their parents about their pregnancies. One third of girls never told their parents that they were pregnant, half of these parents found out for themselves and the others were told by a third party (Table 3).

Discussion

School sex education has its limitations but nevertheless it is clear that young people are not obtaining accurate knowledge elsewhere and are certainly not receiving information from their parents. The Camberwell girls were from deprived backgrounds and only 29% actually lived with both natural parents. 11% lived with neither parent and 16% had no mother. These young people are desperately in need of a source of health education and counselling. They must have professional support agencies which they can approach in full knowledge that they will be treated with compassion, understanding and complete confidentiality.

Teenagers sexual knowledge is bedevilled by misinformation, wrongly timed information, information given with the wrong emphasis and information supplied in such a way that its significance cannot be appreciated. How can this situation be remedied? Sex education often focusses on an adult perception of problems and not on the teenagers'. The message can therefore fail to be appreciated by the young people. Teenagers are often taught about the mechanics of sex and contraception but are unable to relate it to their circumstances. "We learned about periods and how babies were born but I did not understand how easily I could get pregnant", "I never thought I could get pregnant, I thought I was too young" these are typical remarks made by girls in Camberwell.

Sex education is too often seen negatively as a method of preventing early pregnancy rather than in a positive way of informing and encouraging the adolescent to live a happy life, comfortable with his or her sexuality. Too much emphasis on avoidance of pregnancy alienates the young person who, feeling that 'that could never happen to me' is unable to relate to the content of the lesson. Emphasising avoidance of pregnancy may also alienate a disadvantaged teenager who "with no hopes or aspirations cannot understand how having a baby will adversely affect her life" (ref 6).

The emphasis on pregnancy tends to involve girls more than boys. Boys are often left out of sex education programmes although they need to be included equally. A boy often has stress placed upon him before he is comfortable with his own sexuality. He needs to be reassured that great sexual conquests and a 'macho' image is not a necessary part of growing up. Boys should be encouraged to adopt a responsible attitude towards their sexual partner and to feel included in

decisions relating to pregnancy (ref 7, 8).

Sex education should be part of general education in 'living'. Teenagers need help and guidance in order to discuss relationships openly and to thus clarify for themselves what their personal values are. They then require support in order to be able to behave in a manner appropriate to their personal 'morals' rather than being influenced by outside pressures, whether from peers, society or their professional 'helpers'. Emphasis should be placed on planning and making choices about future life style and pregnancy.

There are those who argue that teaching young people about contraception and abortion encourages early sex and allowing the young to make their own choices enables them to choose promiscuity. All the available evidence points to the opposite, "that it is those young people most in ignorance who tend to experiment early and to suffer the consequences of unwanted pregnancies and sexually transmitted diseases" (ref 9). Certainly Camberwell girls who have early sex are very poorly informed, school sex education has had no influence on their sexual activity. It is only by enabling young people to make their own choices that we may achieve a reduction in the incidence of unwanted pregnancy "thus closing the opportunity gap between poor and non poor women". (ref 6).

It is to Sweden that we must look for the 'coup de grace' to the argument that school sex education encourages promiscuity. Sex education has been compulsory in Swedish schools since 1956. In 1977 the system was reviewed in the light of criticism that the curriculum was based too much on biology and physiology and did not place enough emphasis on personal and emotional factors (ref 10). In 1974 in Sweden there were 70 pregnancies per thousand girls aged 15-19, one of the highest rates in a developed country, comparing with 40.5 in England and Wales and 101 in the USA. By 1980 it had dropped to 43, a 38% fall (compared to a 24% fall in England and Wales and a rise of 12% in the USA). This marked fall in Swedish rates is attributed to improved sex education the emphasis of which is "to equip (young people) to experience sexual life as a source of happiness and joy in fellowship with others and to strive for relationships characterised by responsibility, consideration and concern" (ref 11).

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TABLE 1

SEX EDUCATION SOURCES

GIRLS HAVING NO SEX EDUCATION AT ALL		26%			
SEX EDUCATION SOURCES FOR OTHER 74%					
FROM PARENTS	LOT	5%	LITTLE	8%	NONE 87
FROM FRIENDS	LOT	14%	LITTLE	37%	NONE 49
FROM SCHOOL	LOT	10%	LITTLE	26%	NONE 64
FROM OTHER SOURCES	LOT	5%	LITTLE	12%	NONE 83

TABLE 2

SEX EDUCATION

Age of girls receiving little or no sex education from various sources

Age	PARENTS	FRIENDS	SCHOOL	OTHERS	NONE AT ALL
100.					
90.	Little				
80.				Little	
70.			Little		
60.					
50.	N				
40.	O	N	N		
30.	N	O	O		
20.	E	N	N		
10.		E	E		
0.					

TABLE 3

WHO TOLD THE PARENTS?

77/122 girls told their parents eventually	<u>63%</u>
32/122 girls did not tell their parents	<u>26%</u>
13/122 girls had no parents	<u>11%</u>
PARENTS LEARNED OF PREGNANCY VIA: -	
GIRL TOLD THEM	77
NOTICED THEMSELVES	18
SOCIAL WORKER	4
SISTER	3
EDUCATION WELFARE CLINIC	2
BOYFRIEND	1
HEALTH VISITOR	1
FOUND A NOTE	1
SAW CLINIC CARD	1

Deadline for abstracts is Jan. 31, 1991.

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 Kirkkotie 13
 20510 TURKU
 Finland

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Telefax + 358 - 21 - 375 051

NEWS NEWS NEWS NEWS NEWS NEWS

Youth Support House - Education Our education unit is now fully functional and ready to accept referrals from outside agencies. Until now we have provided a service just for our resident teenagers, and some tuition for our 'after school' primary children. Now we are able to progress on two 'fronts' - firstly:- our service for young people is able to provide education for two groups, the under 16s and the over sixteens. We are setting up tailor made programmes for the participants including work experience and there are options of music, dance and computer studies as well as the usual academic subjects. We can take day attenders on part time or full time basis and would welcome referrals and enquiries (Addressed please to Anthea Page on 081-650-6296). Secondly our nursery class is now open for the under fives.

Soviet Holidays and exchanges We have had a number of enquiries regarding the various trips. If anyone else is interested in joining they should write in now since we will be arranging the programmes soon. If you have written and are waiting for further information, please bear with us a while longer.

Montreux 1991 The IAAH congress programme is now available and abstracts should be submitted to the secretariat by March 31st. We have some copies of application forms at Youth Support and can send them to interested members - but only if accompanied by a A5 size stamped addressed envelope.



FINNISH STUDENT HEALTH SERVICE

Congress of the European Union of School and University Health and Medicine.

June 10 - 13, 1991 Turku Finland, Congresshotel Rantasipi Ikituuri.

Congress is organized by the Finnish Student Health Service, the Finnish Association of School Doctors and the National Board of Health.

Main topics: *Eating problems
 Oral health care
 Physical exercise and health*

Other topics: *Allergies
 Hyperlipidemias, follow-up and care
 AIDS
 Infections and vaccinations
 First-aid for Students
 Alcoholism
 Mental health
 Mobbing
 Various*

Youth Support Workshops - Spring Term 1991

The following programme of workshops are held at Youth Support House, 13 Crescent Road, Beckenham. All run from 2.30 to 4.30pm on wednesday afternoons. Cost £20 per workshop or £60 for course of four.

- 9th January 1991 "Teenage Pregnancy"
- 23rd January 1991 "Teenage belief systems - that old black magic"
- 6th February 1991 Self Esteem in Adolescence
- 20th February 1991 Finding the 'true self' in adolescence - the dilemma for teenagers with a disability.

General supervision and case discussion group

This will be held on alternate thursday afternoons from 2pm to 3.30pm at Youth Support House. Dates for spring term are 17th jan; 31st jan; 14th feb; 28th feb 1991. Participants should bring cases which they would be willing to discuss or general management problems which they require advice on. Fee £10 per session. Numbers limited and bookings taken for term or individual sessions. Suitable for 'caring professions', medical, social work or teaching professions or nursery staff.

Conference -

Wednesday 27th February 1991 - All day Conference Aids and the Young at St Bartholomew's hospital.

Looking forward to the summer term -

We are planning a series of training workshops suitable for nursery workers and those working with young children. These will cover aspects of **child development**, vision, hearing and psychological development - details available from Youth Support office.

For all courses please apply to: Youth Support House
13 Crescent Road
Beckenham
Kent BR3 2NF
Telephone: 081 650 6296

Cheques made payable to: Youth Support
Charity No. 296080

Firm bookings with remittance.

Name Tel No

Address

.....

Designation

.....

Booking For