

SEX EDUCATION IN ACTION

RATED PG

Sex education has to go beyond telling kids about VD and premarital pregnancy.

BY KIM MARSHALL

Until very recently, teachers in the Boston public schools were forbidden to teach sex education courses in their classes. Teachers blamed city officials for the restrictive policy; officials blamed parents and organized groups who, the officials said, would pounce on teachers who ventured into sex education.

After eight years of teaching middle school kids at Martin Luther King, Jr., School in Boston, my own observations and reading of statistics have pointed to the following:

1. Many kids think they know everything about sex; in fact, most know very little, having gotten their sex education on the streets.
2. Many young people believe a series of myths about how to avoid pregnancy and are ignorant of proper birth control methods.
3. Many young people are sexually active. As a result, the number of teen pregnancies is increasing.
4. Most parents believe they should be responsible for their kids' sex education, but very few actually talk to their kids about this touchy subject.

It was with this knowledge in mind that our staff invited three speakers to an in-service meeting about sex education in November 1977. Our first guest repeated the grim statistics describing the effects of adolescent pregnancy on girls' lives. The second read us a series of heart-breaking letters written by young adolescents to her newspaper advice column, laying bare their problems, their ignorance and

their inability to talk about sex with their parents. The third speaker led us in some group exercises and effectively put across the message that sex education has to go beyond telling kids to avoid venereal disease and premarital pregnancy; it has to prepare kids to accept and to deal responsibly with their sexuality.

By the end of the meeting, we were unanimous in our conviction that we needed a sex education program in our school.

Mixed Reactions

Our next step was to meet with our parent advisory group and show them the videotape we had made of the in-service meeting. There were mixed feelings among the parents about sex education. One father bluntly told us that if his daughter got pregnant, he would throw her out of the house and never speak to her again. Several parents wanted to know whether teaching about sex would have the effect of giving kids permission to have sex. We answered this argument by saying that kids were going to learn about sex one way or another; wouldn't it be better for them to learn straightforward facts in the classroom rather than harmful myths on the street? We also cited studies that show that there is less sexual irresponsibility and a lower rate of pregnancy among kids who are fully informed than among those who are kept in official ignorance.

Our parent group seemed impressed by these arguments and satisfied by our assurances that (1) no child would take part in any sex education program without his parents' written consent and (2) parents would be involved in selecting all films and curriculum materials for the program. We left the meeting with a mandate to pursue the topic with school officials and to locate some suitable films and books for our middle school students.

Several weeks later, the principal and health teachers of King School and I met with district officials to try to get permission to run a pilot sex education program. We showed two films (*Boy to Man* and *Girl to Woman*) that we had decided were the tamest and therefore the safest, and were amazed at the mixed reactions. Some of the officials objected to the films and said that we didn't understand how strongly opposed to sex education some parents were. Others warned of the danger teachers put themselves in by treading in this ideological minefield. One woman said that what girls really needed was not sex education but more love so that they wouldn't want

to have babies of their own.

These objections notwithstanding, the district superintendent approved the films, reserved judgment on the book we had selected, and sent us on our way to the central office.

We had less luck with the board of superintendents, the top policy-making body of the Boston schools at that time. After showing the movies and passing around the book, I got what seemed like a noncommittal reaction from the group. But then one member raised the first objection: the film about male development had stated that masturbation among boys was normal and in no way harmful; this man wanted it known that he was a Roman Catholic and believed the act to be a mortal sin. Another member argued that "the practice"—he couldn't bring himself to use the word—was disgusting and abnormal. The upshot, needless to say, was that the program was not approved.

Our Luck Changes

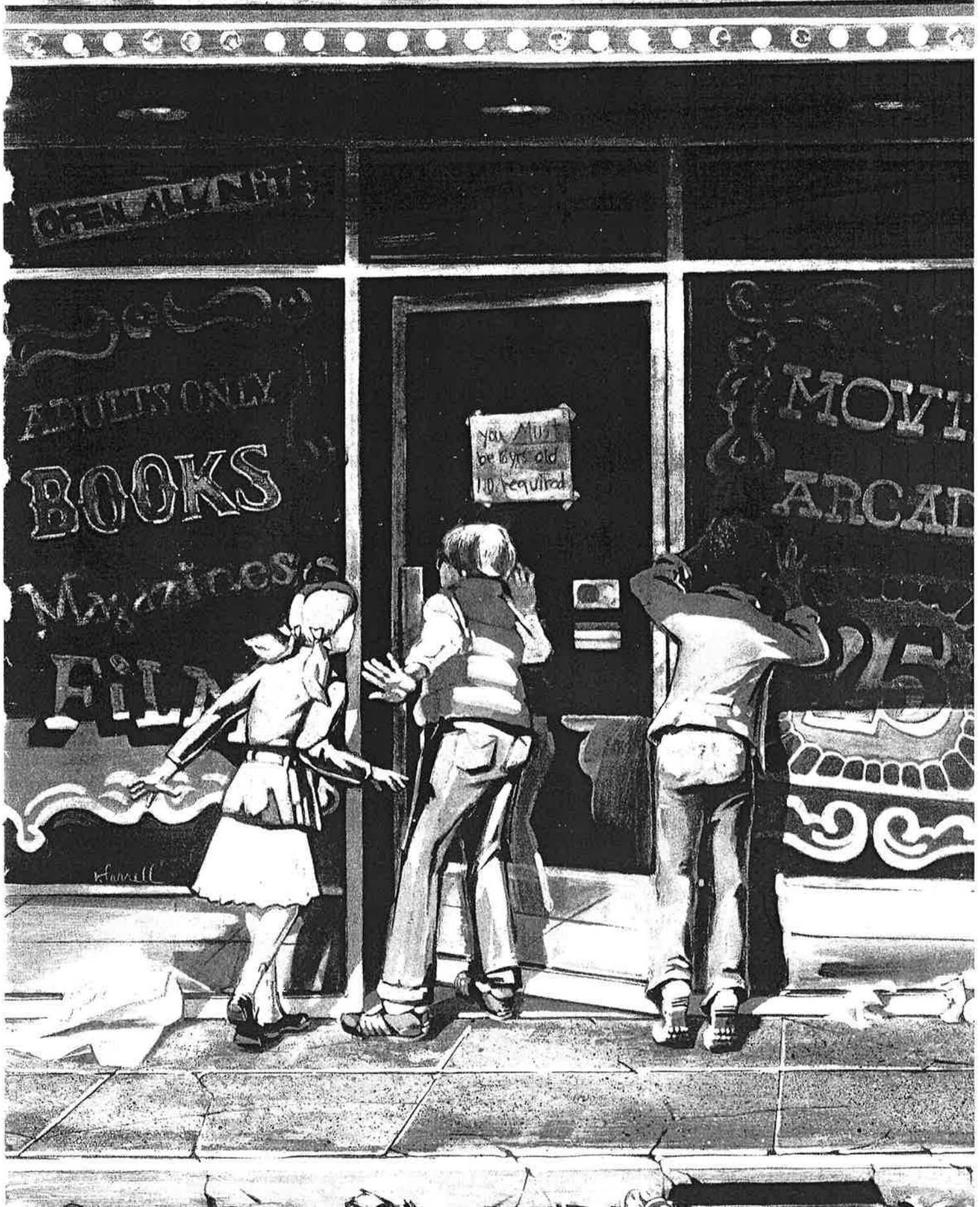
It was at this very discouraging point that we had the good fortune to meet Rosalie Williams, the education director of a federally funded family planning and sex education program called the Boston Family Planning Project. Her immediate advice to us was to stop trying to get films and books approved, because there would always be a way to block the program if it depended on commercial products, no matter how tame. Instead, Rosalie suggested, we should base the program, at least initially, on the kids' questions and use only stand-up teaching, the chalkboard and a few charts to teach the course.

Acting on this advice, we revised our proposal and submitted it to the newly appointed superintendent of schools. To our surprise, he quickly approved a pilot project for the King School, and we began to plan the course in earnest. We decided to schedule ten class periods for the seventh and eighth graders as part of their regular health curriculum. We also agreed to have two trained sex educators from the Boston Family Planning Project, David Green and Girtha O'Neil, do all the teaching the first year, with our teachers observing and providing backup.

We then composed a parental permission letter, which we brought before our parent advisory group for approval. Group members surprised us with two stipulations: first, they insisted that sixth graders be included in the program (we had left them out because we were afraid that parents

(continued on page 51)

ULTIMATE



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would object); and second, they ruled out any mention of birth control or abortion in the curriculum.

The final permission letter contained a brief outline of the course:

- *What causes puberty to begin*
- *Menstruation in girls and production of sperm in boys*
- *Different timetables for maturing*
- *Development of sexuality—changes in feelings; boy-girl relationships*
- *How pregnancy begins*
- *The birth process*
- *Values and attitudes about sex.*

It also contained a statement that students who did not take the course would do alternative work in other classrooms with no loss of credit; an assurance that students' privacy would be respected; and a ringing endorsement of the program by our principal.

The first round of permission letters sent home with students came back with 94 percent approval—a percentage that held for subsequent offerings of the course. Only one or two students in each class were forbidden to take part in the program, usually for religious reasons, and many parents with fundamentalist beliefs were happy to have their children enrolled. One father, however, asked whether we would allow clergymen to come into the school to teach morality, instruct students that sexual relations outside marriage were forbidden and morally wrong, and teach that abortion was murder. We responded that if we did that, we would also have to invite advocates of free love and abortion to balance the course. This father did not allow his son to take part, and we heard no more from him.

The Course Gets Under Way

The big issue at the beginning of the program was whether to hold coeducational or single-sex classes. The people from Boston Family Planning felt strongly that the classes should be mixed; otherwise, they argued, we would be giving kids the message that it was wrong to talk about sex with members of the opposite sex.

But resistance to mixed classes in our school was strong. Some teachers insisted that kids in mixed classes would not be as free to ask and discuss questions as they would be with only members of the same sex present. Others felt that boys' and girls' unique

concerns would be more appropriately handled in separate classes. Even some students were hostile to the idea of discussing sex in mixed classes. In one opening class I happened to visit, there was a minor rebellion over this issue, with the girls refusing to be taught with the boys.

In that case, a deal was made with the kids: the first session would be held with boys and girls together; if, at the end of the period, they wanted to split up, that would be all right. Reluctantly they agreed. Forty minutes later, the same group of kids overwhelmingly voted to stay coeducational. Their fears of embarrassment and teasing melted in the face of a relaxed presentation by trained professionals.

As the program got under way, I was impressed with the open, easygoing manner of the two guest educators from Boston Family Planning. David and Girtha applied a variety of techniques to get kids past the embarrassed, giggling stage to straightforward discussions of sexuality. Their opening teaching device was the Dirty Word Game, which consisted of writing five key words and phrases (*breast, penis, vagina, sexual intercourse and masturbation*) on the board and having kids brainstorm "dirty" synonyms for each. There was an amazing amount of confusion about some of these words among these supposedly sophisticated kids, but the board was soon filled with obscenities. Then the instructors made their point: the dirty words aren't useful when we talk to parents, teachers, doctors, nurses and other adults, and it is good to know the words that doctors use. David and Girtha insisted that the kids use the common medical terms during the course and corrected them when they slipped into the vernacular.

This game had a remarkably defusing, calming effect on kids, and by the middle of the first class, the students were at ease and ready to learn.

David and Girtha also stressed the point that there was no such thing as a dumb question, that every question was important and legitimate, and that no one—including the teacher—would be forced to answer questions. At the beginning of each class, David and Girtha passed out index cards and encouraged kids to write down questions they were too shy to ask out loud. Later in the class, these

anonymous questions were read aloud, answered and discussed, sometimes with charts and diagrams being used to illustrate points. Although David and Girtha also presented a series of prepared lectures, it was these question-and-answer sessions that spoke most directly to students' concerns and involved the kids most fully in the class.

The only problem with these sessions came about when children raised questions about birth control or abortion, at which point David and Girtha had to refuse to answer, explaining that parents didn't want these subjects covered in the course. The mixed message delivered by this refusal prompted us to go back to the parent group to ask that it rescind the stipulation. After a lengthy discussion, the parents agreed that children's questions about birth control and abortion could be answered, so long as neither practice was advocated. They also insisted that we explain to students that some people had strong moral and religious objections to abortion and birth control, and that we revise the parental permission letters to inform parents of this new approach. (There was no drop in the approval rate for subsequent parental permission requests.)

On to Year Two

By the end of the year, there was general agreement that the program had been a great success, and we began to plan for a second year. Our main objective was to shift the teaching to our own staff so that we would not be dependent on outsiders. We got the approval of our superiors to proceed, on the condition that the teachers who had volunteered to teach sex education go through a ten-hour training course given by the Boston Family Planning Project.

The course, which led us through reams of medical facts about sexuality and reproduction, made us all aware of how much we didn't know. We took part in role-playing exercises to give us practice in the difficult task of answering actual student questions. What David and Girtha had made look so easy turned out to require a great deal of practice. At first, we had a tendency to shy away from certain words, to pronounce words with a less-than-matter-of-fact intonation, to over-

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elaborate answers, to make wrong assumptions about what kids were driving at with their questions, and to use concepts and vocabulary beyond the sophistication of our kids. As we struggled to remain calm and collected, our trainers prodded us with the kinds of questions kids would ask: You mean that if I take the Pill, I won't get pregnant? Does that make it all right for me to have sex with my boyfriend? My mother says that I shouldn't take a bath during my period; are you saying she's wrong? My girlfriend says that if the woman doesn't have an orgasm, she won't get pregnant.

With the aid of a videotape camera, we learned the art of being accurate, concise and sensitive to the hidden concerns behind seemingly obvious or silly questions. But perhaps the most important lesson was learning how to keep our own values and tendencies to preach to kids in the background. We had to be vigilant about making factual, nonjudgmental presentations, and leaving values to the family and the church.

One issue continued to divide us: Even though the sixth grade teachers were ready to teach sex education in their coed homerooms, the seventh and eighth grade teachers remained convinced that single-sex classes were better suited for the subject. Rather than force either group to give up its strongly held position, we decided to proceed with a dual approach and

hope that the teachers of the older kids would come around to a coeducational approach as the sixth graders moved up through the grades.

During our second year, we successfully made the transition from using outside experts to teaching almost exclusively with our own trained staff. We have a lot more to learn and will continue to work on the program, but at this point we can offer some advice to others who are thinking of starting sex education programs:

1. Go slowly. Don't try to impose an already-established systemwide program on people who haven't gone through the process of developing a consensus on the need for sex education in their school.

2. Involve parents in curriculum and policy decisions from the very beginning. If parents initiate the process, so much the better.

3. At the outset, insist that every student who takes the course have written parental consent.

4. Clearly define your curriculum and goals, and try to set as few limits as possible so that all student questions can be answered.

5. On the other hand, don't try to include everything (films, literature, full discussion of abortion, etc.) at the very beginning; be willing to compromise and to work out controversial issues further down the road.

6. Consider having trained health professionals teach the first year—to act as role models and to show the

way. Have as many teachers as possible observe the classes.

7. Aim toward having regular teachers teach the course, but insist that they go through a rigorous training program that includes simulations of classroom conditions.

8. Encourage a diversity of teaching methods, including lectures, question-and-answer sessions and open class discussions. Use supplementary books, films, transparencies, charts, games and simulations.

My experiences during the last three years have convinced me that, when the groundwork is done properly, school is the ideal place for sex education to be taught. The key is the large-group setting: Each student asks different questions, and one query catalyzes others. Shy kids, who would never ask questions about sex of anyone, can listen to the discussions and learn what they might never learn otherwise.

Anyone close to young people today, and anyone who reads the grim statistics about adolescent pregnancy, unwanted children, broken marriages and broken lives, knows that there is almost nothing more important schools can do.

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Questions Kids Ask in Sex Education Classes

What is a virgin?
What will happen if human sperm gets in an animal?
How come men don't have babies?
Why does a girl have to get her period to get pregnant?
When a woman gets her Fallopian tubes cut, can a doctor sew them back together?
How does the baby's cord get connected to the mother's cord?
Why do women have vaginas?
Can a baby be born without the mother getting hurt?
If two men have sex, will a baby grow?
Won't you get your penis infected if you put it in a girl's vagina?
How come boys and girls can't have sex between 10 and 20 years old?
How does a prostitute stop from getting pregnant?
How come some women can't have babies because of some kind of disease?
What does *ejaculation* mean?

In Adam and Eve's day, how did they get children?
How do you make love?
How old do you have to be to get sperm?
If a man gives a lady a baby and he isn't the baby's father, what would the baby look like?
How do you make sperm?
How do eggs grow in the girl's vagina?
If a 13-year-old has sperm, would a 10-year-old girl have a baby?
How does a lady have a baby?
How old is the youngest girl to get pregnant?
Why do people make love?
Who invented sex?
Why do a lot of kids, like 11 or older, want to have sex, most of them?
What happens to a man when he wants to have sexual intercourse but his wife doesn't?
How do dogs have sex?
What is an abortion? ■