

Parents' Approaches to Educating their Pre-adolescent and Adolescent Children about Sexuality

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RESEARCH

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University College Dublin and Queen's University, Belfast

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Crisis Pregnancy Agency Research Award Programme

In 2007, a Research Awards Scheme was established by the Crisis Pregnancy Agency for individuals working in academic institutions, not-for-profit research organisations and non-governmental organisations (with a research capacity) wishing to undertake a research project in areas related to the mandates of the Crisis Pregnancy Agency. It was envisaged that the provision of these research awards would help increase knowledge in relation to crisis pregnancy, contribute to the Agency's cultural change programme and help support proficiency and new developments in the field of crisis pregnancy research.

The aims of the research awards were to:

- Ensure the Agency keeps abreast of factors related to crisis pregnancy, sexual activity and contraceptive use, reproductive decision making and health services research.
- Build upon the range of research commissioned by the Agency and fill knowledge gaps still existing.
- Stimulate and further strengthen research in the areas of sexual health and sexual health policy, sexual decision making and crisis pregnancy.
- Ensure that the Agency's existing research portfolio continues to be used and is part of emerging developments in the field.
- Further build academic capacity and expertise in areas related to the Agency's work.

The Crisis Pregnancy Agency is pleased that Dr Abbey Hyde of University College Dublin received a Research Award for a project titled 'Parent's Approaches to Educating their Pre-Adolescent and Adolescent Children about Sexuality' and we welcome the report on Dr Hyde's work, and that of her colleagues, as the first of a series funded through this scheme.

Foreword

It gives me great pleasure to introduce this research report addressing the important issue of parent-child communication about sex. It is the first of a series of reports emanating from the Crisis Pregnancy Agency's 'Research Award Programme' – a programme of grant funded research projects through which the Agency seeks to draw upon innovative approaches to exploring issues relevant to the Agency's mandate, within the research community.

This research aimed to explore the range of approaches parents use in communicating with their children of different ages regarding sex; what parents understand their role as educators to be; what cultural and contextual issues affect communication between parents and children regarding sex; to capture differences between mothers and fathers as sex educators; and to identify variations among groups of parents as educators based on demographic factors.

The Crisis Pregnancy Agency recognises the role of parents as the primary educators of their children in matters of sexual and reproductive health and is aware that many parents feel challenged in this regard. The Agency has commissioned surveys to document, at a population level, patterns of parent-child communication about sexuality and relationships, levels of support for school- and home-based sex education and the levels of ease people feel when talking to their parents about relationships and sexuality. In addition, the Agency has commissioned in-depth qualitative research to understand, from the perspective of young people, their educational and development needs regarding relationships and sexuality. The authors of this report designed a research study that would build upon these findings and look specifically at what parents think and say about talking to their children about sex.

The findings of this report add to our understanding of this complex and important area and its recommendations can serve parents, teachers and policy makers, as well as the wider community. The authors' recommendations focus attention on how parents' communication strategies and techniques vary with the age and sex of the child and how these strategies vary over time. The authors recommend that parents be more aware of the need for communication not only with their children but with each other, and how parents might be supported by voluntary and statutory sector in this regard. The recommendations also highlight the potential for increased parent-school liaison for the Relationship and Sexuality Education component of Social Personal and Health Education in our education system.

As mentioned above, this research was funded under a Research Awards and a Scholarship Scheme set up by the Agency in 2007. This scheme was aimed at individuals wishing to undertake a research project in areas related to the mandates of the Agency. The aims of the research awards were to ensure we keep abreast of factors related to crisis pregnancy and to stimulate and further strengthen research in the areas of sexual health and sexual health policy, sexual decision making and crisis pregnancy. We also aimed to further build academic capacity and expertise in areas related to the Agency's work.

This is the first report to be published under this scheme. It is my sincere hope that by providing important information for policy-makers and for those giving leadership in society, this report will enhance the opportunity for effective and protective communication about sex between parents and their children in Ireland.

I would like to thank the authors of the study Dr. Abbey Hyde, Prof. Marie Carney, Dr. Jonathan Drennan, Dr. Michelle Butler, and Dr. E taoine Howlett of University College Dublin and Dr. Maria Lohan of Queens University Belfast, for all their hard work. I would particularly like to thank the 43 participating parents in this research, without whose cooperation this project would not have been possible.

Lastly I would like to thank the Research and Policy Sub-committee of the Board of the Crisis Pregnancy Agency and the Agency's research staff for their input into this report.

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The views expressed in this report are those of the authors and do not necessarily reflect the views or policies of the sponsors.

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Executive summary

Introduction

Professionals and lay people alike who are concerned with reducing the number of crisis pregnancies are keen to identify what influences people's sexual and contraceptive behaviour and what helps to reduce risky sexual behaviour, especially among younger people. One of the issues that has emerged in recent years – and which continues to be highly debated – is the influence of parental sexuality education¹ on young people's sexual behaviour.

A number of quantitative studies internationally have tried to measure aspects of this, and, as will become clear when presenting existing literature in the field, no consensus has yet emerged as to whether parents communicating with their children makes any difference – or any positive difference – to outcomes such as the age of sexual debut or the use of contraception at first intercourse. The fact that findings from such studies have shown contradictory results, even in similar social contexts, suggests that parental communication with their children about sexuality may be more complex than is at first envisaged.

This study attempts to understand, through a qualitative analysis of in-depth interview data, how a sample of parents communicates on the topic of relationships and sexuality with their pre-adolescent and adolescent children. The complexity of parent-child communication needs to be captured and understood before adequate, more sophisticated and fine-grained quantitative scales can be developed, which would give a more valid and reliable picture, to allow the impact of parental sexuality education to be determined with greater accuracy. Since this is not an evaluation study, it was not designed to explain whether parental education works or not. However, since evaluation studies are so important in the current climate to provide an evidence basis to best practice in sexual health, this study has the potential to offer insights into what is lacking in existing measures and to provide a deeper understanding of the topic than has been available thus far.

Aims

This study aims to explore parents' approaches to communicating with their pre-adolescent and adolescent children about issues relating to relationships and sexuality.

Objectives

The objectives are to:

- explore the diverse range of approaches that parents in Ireland use in discussing issues of sex and sexuality with their pre-adolescent and adolescent children
- develop an understanding of how parents construct their role as sex educators
- gain insights into the culture within the home, and to analyse how parents communicate with their children, what they communicate about relationships and sexuality, and the context in which the communication takes place

¹Parental sexuality education is used broadly in this report to include both verbal and non-verbal aspects of parental communication that convey messages about sex and sexuality.

- capture any differences in how mothers and fathers communicate with their children in matters relating to relationships and sexuality
- illuminate possible variations in experiences according to the parents' structural position, such as socio-economic grouping and age.

Existing knowledge in the field

Existing research from the perspective of parents concerning their provision of sexuality education to their children is primarily derived from survey data and quantitative analyses. Many studies in the USA and a few in Britain have focused on the important issue of evaluating the influence of parental communication on sexual outcomes for adolescents, but constructs used to measure this are highly varied, which may in part explain the conflicting results of these studies. In addition, the measures used tend to be very crude, making it difficult to capture what exactly it is that parents are doing or saying that is making a difference. For example, findings that talking to children or teenagers about sex or that ease of communication with parents influences sexual outcomes for adolescents (for better or worse) tell us nothing about what kind of talk parents engage in, nor anything about the quality or quantity of the communication. This research is the first to be conducted in an Irish context that explores parents' approaches to educating their pre-adolescent and adolescent children about sexuality.

Methodology

The study employed a qualitative methodology - using the sampling strategies of both purposive and snowball sampling - in which 39 interviews (36 individual interviews, two interviews with two participants, and one with three participants) were conducted with 43 parents (both mothers and fathers) from a variety of geographical locations throughout Ireland. Data were then analysed using modified analytical induction. Given that the perspectives of parents themselves were the primary focus of this research, the use of a qualitative research strategy was deemed to be the most appropriate mechanism to ensure the centralisation of participants' own experiences. However, specific choices had to be made in terms of sampling strategy, data-gathering method, and data-analysis technique in light of the particular objectives of the study.

With regard to sampling strategy, since the research sought to include a broad cross-section of parents from differing socio-economic groups (SEGs) and age groups, purposive sampling - a strategy intent on sampling for a particular purpose - was employed. To this end, a sampling frame was initially drawn up to target parents of both sexes, and to ensure that a range of SEGs was included. Purposive sampling required the research team to monitor the characteristics of those recruited while selection was still underway, to ensure that the sample was sufficiently inclusive of those who were sought, and where necessary, to target those who were heretofore poorly represented. In addition to purposive sampling, a strategy known as snowball sampling, whereupon participants who agreed to be interviewed would be asked to identify additional prospective participants, was also proposed. Purposive sampling in conjunction with snowball sampling has been the recruitment mechanism used in other qualitative studies of this type and in qualitative research more generally, and was deemed likely to be a useful combination, particularly if there were challenges in recruitment (which there were).

Participants were almost equally divided between working-class and middle-class, and all age cohorts between 30 and 59 were represented, with most parents being in the 45-49 age group. Other characteristics of the sample are as follows: 40 were of Irish origin, two were not Irish-born but had lived in Ireland for many years and appeared very integrated culturally; one woman who was not an Irish national had lived in Ireland for the past five years. Fourteen parents were from rural areas and 29 from urban areas. The number of children that participants had varied from one to seven, and the ages of the children ranged from five years to 27 years. Between them, the 43 participants had 121 children, 54 females and 67 males. The excess of male children over female children that arose entirely by chance had implications for the analysis insofar as more data on the parents' approaches to educating young men in relation to sexuality were available. (All participants had at least one child aged 10-19 years at the time of the interview.)

The most suitable method of data collection for the study was deemed to be the in-depth interview. While evidence derived from all research activities is partial and incomplete, the in-depth interview has the capacity to capture the inconsistencies, inner conflicts and mixed feelings of participants that more structured research methods may miss. Modified analytical induction, the strategy used for data analysis, is a well-established strategy in qualitative research for analysing data gleaned through in-depth interviewing. It begins with sensitising concepts, that is, categories originating in social theory or extant literature to which the researcher has been exposed. These concepts, or hunches, give rise to tentative questions that guide the emerging interpretations. This approach obviates the notion of a mental blank state at the outset of research, which is associated with other types of qualitative research. In addition, concepts are developed inductively from the data. Modified analytical induction was the data-analysis strategy of choice for this study mainly because, since whole transcripts are compared carefully to other whole transcripts, it offered greater potential to give a more holistic perspective on data, compared to other strategies that involve slicing data at an early stage.

Findings

Findings of the study are presented around four main themes: patterns of parental approaches to relationships and sexuality education with children; social processes, practices and attitudes mediating parental sexuality education; the content and substance of parental sexuality education; and parental sexuality education and gendering.

Theme 1: Patterns of parental approaches to relationships and sexuality education with children

This theme deals with the range of approaches parents use to discuss sexual matters with their children. While a few parents stated that they had never had a direct communication with their children about sexuality, the topic was approached by the vast majority in one or more ways. For conceptual reasons, we separated out the communication mechanisms used by parents; however, there was a good deal of overlap in how the various strategies were employed by parents and their children, and these strategies tended not to be mutually exclusive.

Key findings theme 1

- Data indicated that the majority of parents approached the subject of sexuality with their children using one or more approaches.
- Parents' accounts suggested that the approaches used were: child-initiated sexuality education; the use of text-based material; intermittent and opportunistic communication; and the wake-up call.
- A strong pattern was for children in pre-adolescence to initiate topics pertaining to sexuality with their parents and for the parents to foreclose in order to protect the child from detailed explanations, about sexual intercourse in particular; however, in adolescence, the situation was reversed, whereupon parents tended to initiate communications about sexuality and the teenager foreclosed.
- There appeared to be a greater openness on the part of adolescents in talking about sex among participants in the lowest socio-economic groups. This tended to be at a jovial and light-hearted level.
- A number of parents reported that they provided their children with reading material related to sex and sexuality. However, this, like child-initiated sexuality education, tended to be the approach used with younger children.
- Although some parents reported that they received 'the talk' (a once-off communication about sex) when they were growing up, very few reported using it as a strategy with their children. Most parents indicated that they had deliberately avoided this approach.
- Those parents who had initiated a once-off formal 'talk' did not perceive it to be a successful approach and tended to revert to a more informal ongoing discussion about issues of sex and sexuality.
- Parents used opportunistic approaches - or 'teachable moments' - to discuss sex and sexuality with their children. Opportunities identified included events relating to other people, situations arising on the television or following up on issues that had been discussed at school.
- A number of parents were prompted to consider sexuality education with their adolescent children only when they were given a 'wake-up call'. This was usually instigated by parents becoming suddenly aware of an event or occurrence in the young person's life that potentially had implications for the teenagers' sexual behaviour.

Theme 2: Social processes, practices and attitudes mediating parental sexuality education

Under this theme, a range of factors mediating sexuality education between parents and their children was explored. The cues that parents use to determine a child's readiness for sexuality education and the appropriate level of detail to communicate were examined. This was followed by a consideration of the concept of 'openness' in child-parent sexuality education. Based on participants' descriptions of interactions with their adolescents, we then explored young people's responses and reactions to their parents' attempts

at sexuality education. The issue of which party – the child or the parent – controlled the interaction was also examined. Since parents had far more to say about sexuality education with their adolescents compared with pre-adolescents in this regard, this aspect of parental sexuality education predominantly involves teenagers. Under this theme, we also consider how parents view their adolescents' character, associated behaviour and peer group, as these appeared to have a bearing on the provision of parental sexuality education. Because the practice of parental sexuality education also appeared to be heavily influenced by what parents believed their children learnt at school, the focus then shifts to parents' perspectives on their role in sexuality education relative to that of the school, and on the extent to which they were aware of and engaged with school-based sexuality teaching and learning. Parental communications about sexual safety were also briefly considered.

Key findings theme 2

- Many parents had identified differences between their individual children that had a bearing on how sexuality education was managed for each child.
- Data indicated that the majority of parents positioned themselves within a discourse of openness within their homes and viewed themselves as being favourably disposed to communicating with their children about sexual issues.
- In spite of a professed culture of openness in the home, free, open, and uninhibited discussion between parents and adolescents about sexual issues was not described by any participant.
- To a considerable extent in the case of adolescents, the amount and type of information imparted was controlled by the young people, who used various strategies to impede the free flow of information. These strategies included claims to already have full knowledge of sexual issues and demonstrating an unwillingness to discuss the topic by physically moving away, becoming irritated or annoyed, or ridiculing the parents' attempts to educate.
- Parents' accounts suggested that, once the children reached adolescence, it was the young people who exercised the greater level of power in interactions involving communication about sexuality, as the sensitivities of the teenager took precedence over parents' need to impart information. Parents reported retreating from pursuing sexuality education endeavours further to avoid embarrassing or upsetting the young person.
- While some parents reported few difficulties in communicating about sexual matters with their children, most imparted some level of unease and awkwardness, although the degree varied. Most participants believed that their teenagers were more embarrassed than they themselves were when communicating on sexuality.
- The vast majority of parents perceived their children to be sensible and grounded, and, in the case of children younger than 18 years, the dominant pattern was for parents to assume that their adolescent had never experienced penetrative sex. This assumption tended to be based on the belief that their adolescent was not deemed to be

romantically attached; that he or she was considered to be too young to be interested in a sexual relationship; that he or she would never have the opportunity to have sex; and that other interests displaced an interest in sex.

- A few mothers in the lowest socio-economic groups seemed to be more open to the possibility that their children may be sexually active by their mid-teens.
- A few parents revealed that they had been taken aback by information that they had received indirectly about their child's behaviour; while this largely pertained to covert alcohol consumption it also sometimes concerned opposite-sex relationships that potentially had implications for sexual behaviour.
- With regard to school-based sexuality education, the primary-school 'talk' dominated the narratives of parents, and there was largely a vagueness about any sexuality education in secondary school in terms of actually knowing its content and depth. While the strongest pattern was for parents to invoke a discourse of dual responsibility, advocating the complementary roles of parents and the school, many parents placed a great deal of trust in the school system to provide an in-depth sexuality education to their children. In spite of what was, on the whole, an obvious disconnectedness between parents and school-based sexuality education at secondary level, participants tended to be passive rather than active in accepting their lack of engagement with the schools.
- Most parents reported having communicated sexual safety messages to their children to protect them against sexual abuse. However, the degree of detail tended to vary greatly, and the focus was more strongly on the threat posed by strangers rather than those within the circle of trust (family and friends).

Theme 3: The content and substance of parental sexuality education

The focus of this theme was the content and substance of communications about sexuality between parents and their children. The moral messages about sexuality that parents transmitted to children were considered and we explored how these moral messages – both overt and covert - related to expected rules of sexual conduct. The focus then shifted to the content and substance of parental messages about safer sex, where again the use of tacit messages by parents, including indirect messages, innuendo and intimation was examined. The level of depth that parents achieved when imparting sexuality messages to their children was analysed, as well as challenges, barriers and assumptions relating to educating their children about contraception and safer sex. The emphasis on the negative consequences of sexual activity and the missing discourse of sexual pleasure were also considered here. The final issue under this theme was the substance of sexuality education provided by parents on homosexuality and lesbianism.

Key findings theme 3

- The dominant pattern was for parents to convey the message to their children that sexual promiscuity was morally wrong; there was almost universal consensus among parents that pre-marital sex was inevitable. Moral messages were sometimes conveyed tacitly.

- A few parents (mainly fathers), indicated that they promoted a more restrictive version of appropriate sexual behaviour to their children than they themselves had practised when they were adolescents.
- There were no noticeable differences in the perspectives of parents in their thirties (at the younger end of the spectrum) compared to those in their fifties (at the older end) in terms of how they communicated with their children about sexuality.
- Both moral messages and safer sex messages from parents appear to be in the form of tacit messages, innuendos and intimations about appropriate behaviour.
- Much of the knowledge that parents transmitted to their children on sexuality was at a superficial rather than a deep level.
- Some parents had difficulty in identifying how much knowledge about sexuality they should impart, particularly in early adolescence, and some were concerned that giving too much information, particularly about contraception, would encourage sexual activity.
- Most parents stated that they did not feel the need to discuss contraception with their adolescent because they assumed that the young person had already acquired enough knowledge on sexuality through various sources, such as school, the media, books, and friendship networks. In addition, many parents referred to their perception that their child was bright and would 'pick things up', and several participants accepted their adolescent's word that they already possessed a sound knowledge base on sexuality.
- Parental messages about safer sex tended to focus on discourses of danger and risk, with an emphasis on the negative consequences of sexual activity rather than discourses of sexual pleasure.
- For parents to communicate with their child about the possibility that he or she might be gay was rare – gayness was attributed to other people, with parents tending to assume that their children were or would be heterosexual. Mothers conveyed generally positive views on homosexuality and lesbianism; however, the majority indicated that they would have some level of difficulty in accepting their child as gay, but stated that they would ultimately accept this. Fathers conveyed diverse views on homosexuality and lesbianism, with some highly critical and some very accepting. Like mothers, the vast majority indicated that they would have difficulty in accepting their child as gay, but stated that they would ultimately do so.

Theme 4: Parental sexuality education and gendering

This theme covers the social attitudes and sometimes assumptions that parents express and the messages that they reportedly communicated to their children that may have a bearing on how young men and women see themselves in relation to sexuality. Under this theme, we considered the extent to which fathers in the study related to traditional masculinity (associated with machismo) or whether they drew on alternative versions of masculinity. Next we turned to participants' views on the extent to which the provision of sexuality education should be a gendered activity, that is, whether mothers and fathers

saw themselves as having different roles, and whether girls and boys received different messages. Finally, parents' perspectives on the sexual demeanour and behaviour of young men and women were considered, as were the messages that they transmitted to their children in this regard. Here, we attempted to identify whether parents' criticisms of female dress and sexual demeanour represented a reproduction of the sexual double-standard or whether their positions capture a wider complexity about the commercial exploitation of young women.

Key findings theme 4

- Several male participants embraced versions of masculinity that challenged the traditional representation of masculinity and reported that they were open to communicating aspects of these to their children. Even so, male participants indicated that their children were more likely to approach their mother, and many had undertaken little or no sexuality education with their children.
- Overall, there was very strong empirical support for the notion that mothers had greater responsibility for sexuality education for both boys and girls.
- A number of participants referred to the greater ease with which fathers and sons and mothers and daughters can communicate about sexuality. In spite of this, neither mothers nor fathers were really comfortable talking to adolescents about sexuality. Furthermore, while some men and women in the study presented the same-sex discourse (that mothers would be better placed to talk to girls, and fathers to boys), several mothers admitted that, at the level of practising sexuality education, some fathers appeared reluctant to engage with their sons. In view of this, boys may miss out on aspects of sexuality education because fathers were reluctant to provide it.
- A number of different discourses on female sexuality mediated parents' accounts: while some accounts portrayed young women as needing protection from the sexual advances of men, a more dominant discourse pervading parents' narratives was that young women were precocious and more sexually forward than their male counterparts.
- Young women's dress and demeanour were the subject of strong criticism by participants of both sexes; young men's dress and demeanour were not criticised in this way.

Overall conclusion

While many of the findings of this study supported those of other Western countries that have been documented in international literature, some issues have come to the fore in this research that are not well developed in existing literature. Specifically, the exercise of adolescents' power in challenging philosophies of openness advanced by parents in the course of sexuality education has not featured in the literature that we located. Similarly, while the discourse of the sexually-forward female has long been available in international scholarship, the strength and dominance of this representation of young women, and its highly negative interpretation by parents, raises questions both about the extent to which young women have achieved sexual equality and exactly what sexual equality for them might mean. A separate issue arising from this research relates to what it tells us about

the complexity of parents communicating with their children about sexuality. In the current climate of efforts to develop evidence-based best-practice guidelines in health care, including sexual health, professional practitioners, policy makers and the lay public want to know what works to bring about better health outcomes for the population. This study exposes some real methodological challenges for national and international researchers attempting to develop quantitative constructs upon which to evaluate the impact of parental communication on sexual outcomes for adolescents. We will return to this last issue towards the end of this conclusion. First, a few general comments about the study findings will be made.

It must be stressed that there was diversity in parents' perspectives across the sample on a range of issues. At one end of the spectrum there were those whose narratives suggested a sexually conservative position, discouraging sexual activity until either marriage or when adolescence had passed; at the other end of the spectrum were parents who exhibited much more liberal views and a greater acceptance of adolescence as a time of which sexuality is a part. However, the bulk of parents were located midway between these poles. While a 'typical' worldview of parents in the study must be accompanied with the qualification that it is typical rather than universal, the following sums up the parental message to adolescents:

You can always come to me, your mother/father, if you have any questions about sex. Unlike our own parents who were more authoritarian and conservative, we are open parents who have your interests at heart. We also have expectations that you will make the most of the opportunities that are available to youngsters nowadays. However, although you had far fewer inhibitions when you were younger, we seem to be willing to bring up the topic of sex and sexuality a lot more than you, even if it is a bit uncomfortable, and we get the message that you'd rather not talk about it. We are afraid to push any sex education too much in case we push you away, and you might pull down communication barriers about other aspects of your life too. I don't think that you should have sex until you are in a loving, stable relationship, although I had a few casual sexual encounters myself when I wasn't much older than you, but I don't want to tell you about that. Although I know that kids are having sex way earlier than my generation did, as you are under 18 I don't think that you have ever had penetrative sex, especially as we have never seen you with a boy/girlfriend. For this reason there has been no need for me to go into detail about using contraceptives. A lot of the time, we say things in an indirect way, but I'm sure you get the message. They cover all that stuff at school anyway, and, as you say whenever we do try to raise the issue, you know it all already, so I suppose you do. Actually, when it comes to things like STIs, I don't know a whole lot (although they are often on about it on the radio) except that you can contract one if you don't use a condom. Also, I believe you to be a sensible kid and we have done our best to bring you up right. Always use condoms when you become sexually active, as a pregnancy is a big responsibility [and for boys, just because you are male does not mean that you can walk away from your responsibilities] [For daughters, you will be stuck holding the baby]. You can also contract an STI if you have sex without a condom. Pregnancies do happen, as you can see from [neighbour/friend]. I don't want you to become pregnant/ have your girlfriend become pregnant outside of marriage or at least not outside a stable relationship and not until you are older (at least in your mid twenties). Alcohol intoxication can lead to many problems including becoming pregnant or contracting an STI. I don't have

any problem with homosexuality, but I doubt very much that you are gay, but if you are, we would have to accept it, although it would be difficult [for mothers, your father would have greater difficulty than me]. I know I would not be at all happy about you having sex under my roof, even in a stable relationship, until you are at least in your twenties.

The extent to which parents accepted adolescent sexuality was an issue that permeated the findings (and is detailed in the full report), and it is worth further comments in the conclusion to this study. It was noted in the study that there was a relatively small number of participants who manifested liberal approaches based on individual decision-making of the adolescent, supported with adequate information, and among these, an acceptance of teenage sexuality was most obvious. It was also noted that parents in the lowest socio-economic group (SEG) also exhibited a higher level of acceptance of adolescent sexuality compared to the sample in general, yet sexual activity and early pregnancies tend to be higher in the lowest SEGs.

The Dutch situation of a greater acceptance of adolescent sexuality is often invoked to explain the far lower rates of teenage pregnancy in the Netherlands compared with more restrictive cultures such as the USA. This may erroneously give the impression that openness and acceptance alone have a protective effect on negative outcomes for teenagers. Our finding that there appeared to be more open banter about sexual issues between parents and adolescents in the lowest socio-economic group (a group found to have higher levels of early sexual experiences and unplanned pregnancies) indicates that openness is a complex and nebulous concept, and on its own may not have a protective effect against negative sexual outcomes for adolescents. The acceptance of adolescent sexuality in the Netherlands compared to the USA must be considered within the wider context of Dutch culture, which has been found to socialise young adults in a way that demands conformity to family norms and expects people to fulfil obligations to others. Moreover, liberal approaches do not equate with sexual permissiveness. In addition, the manner in which Dutch young people are educated at school must also be taken into account, as well as the provision of sexual health services for young people that facilitate those who choose to become sexually active to consistently use contraception.

Finally, to return to the methodological issues that this qualitative analysis has exposed: In this study, the process of in-depth interviewing revealed how the conceptual world of participants is characterised by both coherence and inconsistency, and how there is ambivalence in people's narratives when they attempt to make sense of their perspectives. Let us briefly review some of the 'muddiness' in participants' thinking by mentioning a few key issues that are detailed in the full report:

- Participants who professed to be open about sexuality in the home sometimes, when probed, described sexuality education practices with their children that were not much different from those who stated at the outset that they had not undertaken any sexuality education with their children.
- A few participants who gave the opinion that schools and parents need to take a shared responsibility for sexuality education were, when probed, found to be no different in their educational practices from those who indicated that they did not need to undertake much sexuality education with their children, since this was covered by the school.

- A few participants who gave the view that fathers would be better placed to undertake sexuality education with their sons went on to reveal that the child's father was too embarrassed or otherwise reluctant to do so.
- The spontaneous narratives of participants indicated that boys were more likely to get messages about showing respect for girls and girls that they should respect themselves. However, when participants were challenged directly about whether advice about respect was gendered, they tended to correct any impression that they had given that respect for oneself should be confined to females and seemed keen to present themselves as advocates of equality discourses.

So how would these perspectives of participants have manifested themselves had participants been responding to one or two items on a questionnaire? How would parents have responded had they been asked if they had ever talked to their children about sex, as has been a measure used in other research? This study has highlighted important issues for future research designed to evaluate the effectiveness of parental sexuality education. It is imperative that such measures are developed, because sexual health educators who aim to improve sexual health outcomes for adolescents need to be confident that their best-practice knowledge-base is sound and consistent. Data in the present study indicated that 'openness', or 'ease in communicating' or crude categories such as 'talked/not talked' on their own are not sufficient indicators of the quality of the sexuality education provided, the level of depth and detail imparted, the consistency with which messages are imparted, or the young person's understanding of the educational endeavour. Researchers have already signalled the possibility that sensitivity to question-wording may be partly responsible for conflicting research findings. In a climate of best-practice based on evidence, evaluation-type research needs to encompass more sophisticated measures, which can capture greater detail and ensure internal validity of measurement constructs - single questions about parental communication or involvement are not enough. Teenage pregnancy rates in Ireland have been fairly consistent over the past 30 years, with annual variations. Future challenges remain for those involved in adolescent health - be they parents, teachers or health professionals. Overcoming these challenges requires working together to ensure that young people who do not wish to become pregnant are furnished with the knowledge and skills to exercise control over their fertility.

Recommendations

Introduction

A number of recommendations emerging from the research findings are made below. These recommendations are outlined on the basis of their relevance to particular groups.

For parents we recommend

- That parents recognise their responsibility to talk to their children about relationships and sexuality.
- That parents should not assume that young people's knowledge of sexuality and relationships is accurate, thorough or even sufficient.
- That parents endeavour to ensure that conversations about relationships and sex are ongoing, and their children feel comfortable in asking questions on the subject as they arise.
- That parents need to be mindful of young people's sensibilities in discussing sexual matters, but this should not impede their educational role in equipping their children with essential knowledge about sexuality.
- That whilst sex and sexuality in discussions between parents and children need to be presented in a positive light, light-hearted references to sexuality need to be balanced with more serious references to the real possibility of the negative outcomes of sexual behaviour and with how responsible sexual behaviour can be achieved.
- That parents be aware
 - that they may not be appraised that their adolescent is in a romantic relationship
 - they should not assume that older adolescents are not sexually active
 - that they may face a challenge when providing moral guidance for their children, as the research suggests that presenting moral messages of disapproval of sexual activity may close down communication with the young person.
- That mothers and fathers communicate with one another as to what the other has communicated about sexuality to their child, so that any misperceptions about what an individual parent has communicated may be clarified.
- That parents reflect on whether the messages about sexual behaviour that they impart to their children differ for sons and daughters, and that they consider whether they may be subtly reproducing the sexual double-standard outlined in the research.
- That parents be aware that giving frank, age-appropriate information when a pre-adolescent child requests it may create an environment where the child feels comfortable in revisiting conversations with parents about sex, later on in his/her adolescence.

For schools we recommend

- That school programmes for RSE/SPHE encourage young people to open up to their parents.
- That there be increased liaison between schools and parents with regard to sexuality education. We recommend that all secondary schools develop a strategy for communicating with parents about relationships and sexuality education that occurs at school. This may in turn act as a prompt for parents to open discussions with their children.
- That schools consider including an optional talk on RSE for parents in schools' parent/teacher days.

For the wider community we recommend

- That strategies for raising awareness among parents of the strengths and weaknesses of their individual approach to educating their children about sex should be devised. Organisations such as The Crisis Pregnancy Agency could lead on this.
- That parents be educated about the negative outcomes of sexual objectification for young women, and advise their daughters accordingly.
- That Parentline be encouraged to train its volunteers in providing information to parents on communicating with their children about sex.
- That innovative approaches to stimulating discussion of parent-child communication about relationships and sex be considered. For example, using drama to deliver key messages. Community organisations, including those linked through the Community Development Programmes and other social networks, could be involved in implementing such a programme. Organisations such as The Crisis Pregnancy Agency could lead on this, in partnership with other bodies.

For the research community we recommend

- That future evaluation research into the effectiveness of parental sexuality education uses far more sophisticated measurement constructs than have hitherto been employed, ones that will better capture the complexity of parental sexuality education, as identified in this study. This is the strongest recommendation.

1.0 Introduction

Professionals and lay people alike who are concerned with reducing the number of crisis pregnancies are keen to identify what influences people's sexual and contraceptive behaviour and what helps to reduce risky sexual behaviour, especially among younger people. One of the issues that has emerged in recent years – and which continues to be highly debated – is the influence of parental sexuality education² on young people's sexual behaviour. A number of quantitative studies internationally have tried to measure aspects of this, and, as will become clear when presenting existing literature in the field, no consensus has yet emerged as to whether parents communicating with their children makes any difference – or any positive difference – to outcomes such as the age of sexual debut or the use of contraception at first intercourse. The fact that findings from such studies have shown contradictory results, even in similar social contexts, sends out signals to social researchers that parental communication with their children about sexuality may be more complex than is at first envisaged. This complexity needs to be captured and understood before adequate, more sophisticated and fine-grained quantitative scales can be developed, which would give a more valid and reliable picture, to allow the impact of parental sexuality education to be determined with greater accuracy. This study is about just that – an attempt to understand, through a qualitative analysis of in-depth interview data, how a sample of parents communicates on the topic of relationships and sexuality with their pre-adolescent and adolescent children. Since it is not an evaluation study, it was not designed to explain whether parental education works or not. However, since evaluation studies are so important in the current climate to provide an evidence basis to best practice in sexual health, this study has the potential to offer future researchers insights into what is lacking in existing measures and to provide a deeper understanding of the topic than has been available thus far.

1.1 Aims

This study aims to explore parents' approaches to communicating with their pre-adolescent and adolescent children about issues relating to relationships and sexuality.

1.2 Objectives

The objectives are to:

- explore the diverse range of approaches that parents in Ireland use in discussing issues of sex and sexuality with their pre-adolescent and adolescent children
- develop an understanding of how parents construct their role as sex educators
- gain insights into the culture within the home and analyse how parents communicate with their children, what they communicate about relationships and sexuality, and the context in which the communication takes place
- capture any differences in how mothers and fathers communicate with their children in matters relating to relationships and sexuality
- illuminate possible variations in experiences according to the parents' structural position, such as socio-economic grouping and age.

² Parental sexuality education is used broadly in this report to include both verbal and non-verbal aspects of parental communication that convey messages about sex and sexuality.

1.3 Structure of the document

In Section 2 a background to this research is provided, in which an overview of the literature concerning parental perspectives on sexuality education is provided. In addition, gaps in existing knowledge within the field are identified. In Section 3 the methodological stance employed in the study is outlined, and the research design described.

In Sections 4-7 (inclusive), data arising from the study are presented. In Section 4 the range of approaches that parents utilise when engaging in discussions of a sexual nature with their children is explored. In particular, given that these strategies were not mutually exclusive, the way in which parents employed a variety of approaches in their efforts to provide sexuality education to their children will be considered. In Section 5 the social processes, practices and attitudes that mediated parental provision of sexuality education are examined. Parents' reading of children's responses in order to gauge their readiness for sexuality education will be considered, as well as the role young people themselves play in controlling the nature of the ongoing provision of sexuality education. Because the practice of parental sexuality education seemed to be heavily influenced by what parents believed their children learnt at school, parents' perspectives on their own role in sexuality education relative to that of the school, and on the extent to which they were aware of and engaged with school-based sexuality teaching and learning, are examined. Before closing the section, parental communications about sexual safety are briefly considered.

In Section 6 the focus shifts to the actual content and substance of the communicative interactions between parents and their children concerning sexuality. The moral messages, both overt and tacit, that parents transmit to their children will be explored. The degree of depth that parents reach when imparting sexuality messages to their children is examined, as well as challenges, barriers and assumptions relating to communication about contraception and safer sex. The substance of sexuality education provided by parents on homosexuality and lesbianism is also considered. In Section 7, the final data chapter, gendered aspects of parental provision of sexuality education are analysed. Parents' perspectives on the provision of sexuality education are explored, both in terms of the roles mothers and fathers play in this process and the messages conveyed to male and female children. This section closes with a consideration of parents' views on the sexual demeanour of young men and women. In Section 8 the findings from each individual data chapter are discussed in light of existing knowledge on the topic. Here we also consider the findings in terms of wider theoretical understandings on the topic that have emerged in academic scholarship. The overall conclusion is presented in Section 9, followed by the recommendations of the study.

2.0 Existing research and scholarship on parental sexuality education

In this review of the literature, we focus on existing scholarship most closely related to the central focus of this study - parents' approaches to educating their children about sexuality. We begin by exploring literature on the degree of communication about sexuality that occurs between parents and young people and on adolescents' desire for such communication. This is followed by a review of existing research into the effectiveness of parental sexuality education on sexual outcomes for adolescents, in other words, what is known about what works when it comes to parental communication about sex. Next we consider the broader picture in terms of cultural openness about sexuality with a focus on the Netherlands, a country often cited for its success in sexual outcomes for young people. The review then shifts to gender issues relating to parental sexuality education. Following this, a number of issues pertaining to the process of parental sexuality education are explored, namely, the willingness, ease and openness that parents and children have in communicating; triggers for increased communication; parental concerns about protecting children; moral values and ideologies cross-cutting parental sexuality education; and parents interfacing with school-based sexuality education. The section culminates in the identification of gaps in knowledge that provide a basis for this study.

2.1 The degree of communication on sexuality that occurs between parents and young people

Studies indicate that the reported degree of communication that occurs between parents and children relating to sexuality varies, although broad patterns do emerge in Western countries where such research has been undertaken.

Irish data on this issue has emerged in recent years from a number of surveys. For example, MacHale and Newell (1997) found that 37% of respondents cited parents as their primary source of information about sexual matters. Their data were gathered using self-administered questionnaires completed by 2,754 Galway-based pupils (aged 15-18 years). A limited degree of (home-based) sex education was also evident in The Irish Study of Sexual Health and Relationships (ISSHR) - a nationally representative, retrospective telephone survey of 7,441 adults undertaken in 2004/2005, which provides details of the sexual experiences of those aged between 18-64 years of age. The study found that a minority of men (11.3%), and almost twice as many women (21.2%) received sex education at home. Notwithstanding the fact that younger respondents reported receiving more sex education from home, just 20.8% of young men aged between 18-24 years reported receiving sex education at home - this compares to 37.5% of young women aged between 18-24 years (Rundle, Layte and McGee, 2008). Schubotz Rolston and Simpson's (2004) study of the sexual attitudes and lifestyles of young people (aged 14-25 years) in Northern Ireland also reported that friends (80.4%), followed by school (74.4%), were their most important source of sexuality education, with parents providing a good deal less. Data for this study were gathered through self-administered questionnaires completed by (a non-probability sample) of 1,013 young people.

Results of a large survey (N=1727) conducted in 1998 designed to investigate the sexual health of Scottish school children indicated that just 7.5% of boys and 14.1% of girls identified their parents as their main informants on sexual matters (Todd, Currie and Smith 1999). A British Market Research Bureau (2003) tracking survey similarly found

relatively low levels of sexuality education from parents, with almost half of young people (46%) in the survey indicating that they had received 'no' or 'not a lot' of information on sex and relationships from their parents.

US and Australian research reveals a similar pattern of relatively low reported rates of input into sexuality education by parents. A large-scale quantitative study involving 6,527 undergraduate students who completed a questionnaire about sexuality at a Midwestern university in the US from 1990 to 2006 (cohorts of students taking a particular module were invited to complete the same questionnaire each year over a 17-year period) found that respondents received more sex education from peers and the media than from parents (Sprecher, Harris and Meyers, 2008). Epstein and Ward's (2008) survey of 286 male undergraduates enrolled in a psychology course, also at a Midwestern university in the US, similarly showed that participants reported receiving less sexual communication from their parents than from either peers or the media. In fact, a significant number of participants (almost a quarter) reported that their parents had told them "nothing" about sex and relationships, and where parents did address sexuality issues, the messages received primarily concerned encouraging the use of contraception when having sex. Peers, by contrast, were a major source of communication about most sexuality topics, including sexual intercourse and contraception. Australian research reflects the broad pattern emerging elsewhere in Western countries (Rosenthal and Feldman, 1999). Rosenthal and Feldman's (1999) survey of 298 Australian 16-year-old high-school students examining the frequency and importance of mother and father communication about 20 different sex-related topics, reported an infrequency of reported communication between parents and adolescents on sexuality. For 75% of the topics, across four sexual domains (Development and Societal Concerns, Sexual Safety, Experiencing Sex and Solitary Sexual Activity), a majority of adolescents reported that these had never been discussed by fathers, or by mothers of sons. Even among mother-daughter dyads, where communication was most frequent, the majority of girls reported that their mothers had never discussed one-third of the topics with them (Rosenthal and Feldman, 1999:847).

In studies where parents have been asked about their input into their children's sexuality education, the general picture of relatively low levels of input tends to hold. For example, a component of a British-based questionnaire on parents' attitudes towards school-based sex education (Ingham, 2002)³ found a discrepancy between parents' sense that sex education was their responsibility, and their actual behaviour in terms of undertaking sex education: while 97% of parents acknowledged that they should discuss "saying no" with their children, just 47% had in actual fact done so. Moreover, while 95% of parents believed that they had a responsibility to discuss contraception with their children this failed to translate into practice, with just 58% raising the matter with their children. Eisenberg, Sieving, Bearinger, Seain, and Resnick (2006:893), drawing on data from telephone surveys conducted with 1,069 parents of adolescents (aged between 13-17 years) in the USA, noted that, of the topics covered in their research, parents were most likely to engage in a "great deal" of discussion about the consequences of pregnancy (49.6%) and the dangers of sexually transmitted infections (STIs) (41.4%). However, relatively few parents had actually discussed with their children, to any great extent, how to obtain condoms (12.3%) or other forms of birth control (11.7%). In fact, while just 6.2% of parents had not discussed at all

³ Ingham (2002) provides merely an overview of findings from this research, without reference to the sample size or characteristics.

the dangers of STIs and 6.4% the consequences of pregnancy with their adolescents, 55.1% had not communicated with their teenager about where to get condoms and 56.1%, other forms of birth control. Therefore, while parents most commonly discussed the possible negative consequences of sexual activity, parents were much less likely to discuss ways of preventing these consequences, with just one in four discussing (to at least a moderate amount) ways to access birth control (Eisenberg, Sieving, Bearinger, Seain and Resnick 2006).

The broad picture emerging from national and international research is that parents do not tend to feature strongly relative to other sources of sexuality education, namely friends, school and the media.

2.1.1 Adolescent desire for parental communication

The evidence that parents do not feature strongly as a source of information about sex for young people relative to other sources begs the question as to whether or not young people would like a greater input from their parents on the issue. The available data appears to suggest that they do not particularly want more sexual information from parents. For instance, when asked to identify the sources from which they would like to learn more about sex, the first choice for 40.3% of the young people in Rolston et al.'s (2005) Northern Irish study research was the school (this was the same study as that reported by Schubotz et al. (2004), referred to in Section 2.1). This is significantly greater than the number who sought more information from parents (21.9% of all first-choice answers). Rosenthal and Feldman's (1999) Australian research, referred to earlier in Section 2.1, also raises questions as to young people's desire for parental input on sexual matters, particular in relation to the private aspects of sexual experience. On the whole, while adolescents reported that their parents did not deal with sexual issues, in most cases, they stated that they did not feel it was important for parents to address these issues (Rosenthal and Feldman, 1999). In fact, these adolescents attached very little importance to parental input about private areas of sexuality, including engaging in sex within a relationship and solitary sexual activity. By contrast, parental communication about matters of sexual safety was accorded a more significant role by respondents. All told though, most of this sample reported that parents were not their preferred source of information or influence concerning sexuality, and by corollary, most parents did not offer themselves in this regard, save (to a small extent) in areas where safety issues arose. For Rosenthal and Feldman (1999:836), the provision of sex education by parents involves not simply the dissemination of information on the part of parents, but also necessitates receptivity on the part the listener. So, while adolescents may accept advice and information from parents within some sexual domains, most notably in areas concerning sexual safety, within other areas parental input may be perceived as inappropriate and irrelevant (Rosenthal and Feldman, 1999:836).

2.2 Existing research on the effectiveness of parental sexuality education on sexual outcomes for adolescents

Among the factors that has interested those concerned with crisis pregnancy is what impact, if any, parental communication on sexuality or involvement in pregnancy programmes has on behavioural outcomes such as age at sexual debut (usually taken as first sexual intercourse), and the use of contraception. Involvement of parents can

mean several things, including the quantity or quality of communication at home, ease or comfort in communicating, or the engagement of parents with school programmes, so a closer examination of the available data is required to ascertain what researchers have tried to measure, how they have attempted to do so, and what has been found. A number of quantitative studies that have attempted to measure these constructs have emerged in recent years in both Britain and the USA, though none to date in Ireland. In order to make sense of these – to judge how methodologically rigorous they are, and to clarify what they really tell us about parental communication or involvement in relation to teenage sexual behaviour, the (former) Health Development Agency (HDA) in the UK undertook an evidence-briefing and reported in 2003 (Swann, Bowe, McCormick, and Kosmin, 2003). The following year the Agency produced an overview of the research evidence on teenage pregnancy (Health Development Agency, 2004), which offers some, albeit very limited, insight into the effectiveness of parental involvement in pregnancy programmes. The Health Development Agency evidence-briefing involved the collaboration of multiple centres of excellence, expert advisors and eminent scholars working in the field. We will describe how the evidence-briefing was conducted to arrive at its conclusions and what indeed those conclusions were as far as parental involvement in sexuality education is concerned. These briefings are updated every few years, though none has emerged on the topic of interest since 2003/4 (The HDA has since been subsumed under The National Institute for Health and Clinical Excellence (NICE) but it too has not yet published an update). In view of the time lag since 2003/2004, we will also consider some studies that have emerged since, and what they tell us about parental involvement in sexuality education.

The HDA evidence-briefing is based on current evidence for the effectiveness of interventions aimed at reducing the rate of teenage pregnancies and improving the outcomes for teenage parents. It constitutes a 'reviews of reviews' of a range of sex education studies, very few of which deal with parental involvement at all, and where they do, parental involvement is a component of multiple facets of an intervention, making it difficult to assess its independent impact. We provide additional detail about some of the studies involving parents, since the the HDA briefing merely provides a broad overview along with its conclusions. (Since, for the purposes of our review we are interested only in parental involvement as a variable, we will confine the HDA conclusions mainly to this.)

The evidence selected by the HDA briefing was based exclusively on carefully selected systematic and other kind of reviews, which excludes a myriad of studies that use methodologies other than those that fall into the 'hard' scientific evidence end of the spectrum. The studies upon which the reviews were based were undertaken mainly in the USA and UK (the bulk were US studies – which puts most studies at a cultural distance from both the Ireland and the UK), and reviews were classified into various categories as follows:

- Category 1 was comprised of systematic reviews or meta-analysis in which research questions, methods and analysis are entirely transparent and replicable
- Category 2 was comprised of reviews where there are clear methodological and analytical data, but not enough details to allow replication of the searches, selections and analyses

- Category 3 was comprised of literature reviews or syntheses in which the research questions were highly pertinent to the area; however, methodological and analytical information was lacking

Twenty-one reviews featured overall, and the authors of the briefing acknowledge the limitations of excluding types of work that tend not to make the grade for inclusion, namely action research, qualitative research and expert opinion. Indeed, it is acknowledged in the HDA briefing that it is virtually impossible to capture the complexity of what influences sexual behaviour using solely quantitative outcomes. (This is something to which we will return to at the conclusion of this study.)

In any case, just two reviews covering randomised controlled trials (RCTs) for a range of interventions to reduce unintended pregnancies made it into Category 1. One of these, by DiCenso et al. (2002), published in the *British Medical Journal* and describing 26 RCTs, included just three studies where the intervention involved parents or family at some level. However, the interventions in these cases were multifaceted, with parent involvement being part of an intervention (and sometimes a very small part) that encompassed other factors as well. Furthermore, two of the three studies that involved parents were abstinence programmes; these have almost consistently been found to be ineffective in reducing teenage pregnancies (Swann et al., 2003). DiCenso et al.'s systematic review was, however, described as having 'changed the landscape' (2003: 40) because it concluded that 'Primary prevention strategies evaluated to date do not delay the initiation of sexual intercourse or improve use of birth control among adolescents. Primary prevention strategies have not reduced the rate of pregnancies in adolescent women' (DiCenso et al. 2002: 8). In fact, DiCenso et al. concluded that metaanalyses indicated that data from five studies, four of which assessed the impact of abstinence programmes and one of which evaluated a school based sex-education programme, found that interventions may increase pregnancies in partners of male participants. However, the DiCenso et al. review was based on a very small data pool of 26 studies, and the evidence-briefing team (Swann et al., 2003) urge caution, since this represents only a limited amount of the total research available on the topic. In addition, the control groups for the RCTs undertook conventional sex education, rather than no sex education.

The second systematic review that qualified for Category 1 status was conducted by the NHS Centre for Reviews and Dissemination at the University of York (1997). Of the 45 papers that featured in this review, just one involved a family intervention (alone). This was a US study in which home-based videos on sex education and a mailed newsletter were given to one group, a home-based video only to a second group, and no intervention for the third (Miller, Norton, Jenson, Lee, Christopherson and King, 1993). The written material (newsletter) suggested topics for discussion, and bi-weekly telephone calls were made to the families by the researchers to encourage use of the materials. The results indicated that no statistically significant differences were found between the groups. However, since only 3-5% of young people in any of the groups experienced their sexual debut during the follow-up, the impact of the intervention in terms of sexual behaviour was difficult to assess. The only other study in the NHS Centre for Reviews and Dissemination systematic review dealing with parents' involvement was again based in the US, and was complicated by several other aspects to the intervention, as well as the intervention promoting sexual abstinence (Jorgensen, Potts and Camp, 1993). Thus, as far as Category 1 evidence is concerned, we know little about the effectiveness of parental involvement in sexuality education.

In terms of Category 2 evidence, seven reviews met the grade for inclusion. Again, studies in the reviews in this category did not deal specifically with the issue of parental involvement, but there were proposals on the basis of wider evidence that parents should be targeted with outreach and family-based interventions, given the need to reach adolescents before they interface with the sexual health services (Jaccard, 1996). It was also noted in the review by Grunseit, Kippax, Aggleton, Baldo and Slutkin (1997) that in national and international comparison studies, adolescent pregnancies and birth rates were lower in situations of open and liberal policies. Kane and Wellings (1999) came to a similar conclusion in their review - that cultural openness towards sexuality was essential in determining the success of educational endeavours. Cheesbrough, Ingham and Massey's (1999) review revealed that adolescents from more egalitarian homes were more likely to use contraception, while Kirby (2001) concluded that educational programmes need to deliver clear messages about safer sex. While these findings are general and broad, they have implications for parental involvement in sexuality education.

Turning to Category 3 evidence, 11 reviews were included, and since little or no methodological or analytical information was provided about the studies, these were deemed to constitute weak evidence. Parental involvement featured most prominently in studies of abstinence-based programmes in the review by Thomas (2000) and these programmes were found to be largely successful. However, Swann et al. (2003) caution that the findings of this review are hampered by methodological problems such as the lack of a comparison group, the failure to randomise participants, the lack of long-term follow-up, the use of either a non-representative or non-generalisable sample, and the absence of data on statistical significance. That this review on abstinence-based programmes is at variance with the conclusions of several others (that found that abstinence-based programmes do not work) signals an ideological basis to the conclusions.

Overall, in relation to the involvement of parents, the evidence briefing (Swann et al., 2003: 41) concludes that "Although there is some review evidence from the US that involvement, outreach and support for parents and families may be effective, this is not currently reflected in the UK review literature. Further work is needed here." Given the absence of Irish data on the topic, there is also a need for research on parental involvement in sexuality education in an Irish context. In the only Irish study to be located on this issue, the results were favourably disposed to parental communication about sexuality: it was found that respondents who reported that it was easy to communicate with their parents about sex when growing up were more likely to use contraception at first intercourse. There was a gender dimension to this, however, with men more likely to have used contraception at first intercourse if they had found it easy to communicate with their father about sex and women more likely if they had found it easy to communicate with their mother (Rundle et al., 2008).

Let us shift our attention to examine more closely individual quantitative studies that have emerged from the UK that have specific components dealing with parental involvement in sexuality education, and that tend to be referred to in official reports in Britain. We then move on to consider some US research.

Using data from the National Survey of Sexual Attitudes and Lifestyles (NSSL), Wellings, Wadsworth, Johnson, Field and Macdowall (1999) found that the most important factor

influencing the chances of becoming a teenage mother was the quality of communication about sexual matters in the home. The survey was based on a random sample of 18,876 men and women aged 16-59, and data were extracted from this survey to explore factors associated with teen fertility. Face-to-face interviews were conducted on aspects of health status, family background, sex education and the age of sexual debut. Personal aspects of sexual behaviour were gathered in a booklet that respondents completed. Demographic details gleaned for each respondent resulted in the identification of a sub-group of those who had their first child before the age of 20. (13% of the women and 4% of the men fell into this sub-category.) Adolescent motherhood was then examined for any associations with selected variables using bivariate analysis. Subsequently multivariate analysis (through logistic regression models) was used to explore whether these associations held following adjustment for other variables. The low number of adolescent fathers identified meant that the logistic regression models were constructed only for teenage mothers. Teenage motherhood was then analysed in relation to education, the structure of the family of origin, ease of discussion about sex and parental strictness. The options presented with regard to ease of discussion about sex were 'easy', 'difficult' 'didn't discuss' or 'can't remember'. Findings indicated that women who reported that discussion about sex was difficult or non-existent were more than twice as likely to have become mothers in their teens compared to those for whom it was easy, after controlling for the effects of current age, age at first intercourse, family structure and parental strictness. This finding must be considered in light of the limitations of the research. Those looking back after years (and in most cases decades) may be more likely to overestimate their ignorance about sexuality as an explanation for their subsequent teenage pregnancy than those who did not become pregnant. Also, the measure of level of difficulty is fairly crude and unrefined, and may be subject to varying interpretations by individuals.

Wellings, Nanchahal, Macdowall et al. (2001) reported on a further study, this time a probability sample survey, between 1999 and 2001 of 4,762 men and 6,399 women aged 16-44 in Britain. One of the issues on which respondents were asked to report was their experience of communication with parents about sex during adolescence. This was reported as either 'Discussed' or 'Not discussed'. The results showed that non-use of contraception was more prevalent among men and women who did not discuss sexual matters with parents and also among those whose main source of information about sexual matters was friends and others. For men, the difference between those who did not use contraception at first intercourse was 10.2% (sex not discussed with parents) and 3.8% (sex discussed with parents). For women, the corresponding figures were 12.8% and 8.7%. With regard to the influence of parental communication on whether respondents experienced first intercourse before or after the age of 16 years, women who reported having discussed sex with their parents were slightly more likely to delay the age of sexual debut; 25.2% of women who discussed sex with parents reported having sexual intercourse before the age of 16 compared to 28.2% who reported not having discussed sex with parents. However, for men, sexual debut before 16 years was slightly higher for those who reported having discussed sex with parents, at 27.8%, compared to 26.3% of those who reported that they had not discussed sex with parents.

The influence of communication about sexuality from parents was also indirectly gleaned in another British survey of 963 school pupils aged 16-18 years from a variety of social

backgrounds (Stone and Ingham, 2002). The study was designed to identify predictors of effective contraceptive use at first intercourse. In this study, a questionnaire was used in which respondents were asked to respond to a seven-point scale indicating the extent to which they agreed with statements that included issues such as having parents who were open to discussing sexual matters and having parents who had portrayed sexual matters in a positive light. For young men in the study, scoring higher - that is, demonstrating greater agreement with the statement - 'I got the impression from my parents that sex was nice/pleasurable,' was a significant predictor of contraceptive use at first intercourse (p.195). No significant relationship was found for this item for young women.

However, Joffe and Franca-Koh's (2001) UK research called into the question the corollary between greater sexual communication on the part of parents and later age of initiation of sexual activity. They explored the link between remembered non-verbal sexual communication at home and current sexual behaviour among 137 (78 female, 59 male) young British adolescents. Remembered non-verbal sexual communication, defined as openness about nudity in the home, the showing of affection between parents, signs of parental sexual activity and contraceptive use, and finally, awareness of mother's menstruation, was measured through a questionnaire. The researchers found that higher levels of parental non-verbal sexual communication were linked to: (i) earlier onset of sexual activity, (ii) fewer sexual partners and (iii) lower feelings of sexual guilt. Greater openness about nudity in the home, in particular, was linked to earlier onset of sexual activity. In addition, while greater expression of affection between parents was associated with having fewer sexual partners, this had no relationship to contraceptive usage (Joffe and Franca-Koh, 2001). Joffe and Franca-Koh question why high levels of verbal sexual communication, unlike high levels of non-verbal sexual communication, are linked to later onset of sexual activity and higher levels of contraceptive usage, a perspective they invoke by selectively focusing on existing studies that showed positive outcomes for verbal communication. (They did not themselves measure the effects of verbal communication on sexual outcomes.) They posit that while verbal communications about sexuality are likely to include messages about responsible sexual behaviour and contraception, covert, non-verbal messages on the other hand, serve to model a sense of how the body is regarded. Therefore, witnessing non-verbal openness at home, particularly nudity, is linked to a sense of comfort regarding sexuality and therefore earlier engagement with this activity. Significantly, though, this earlier entry into sexual activity does not correlate with greater partner numbers. The authors note, then, that the assumption that openness in parental communication regarding sexuality creates a "healthier" approach to sex may be problematic, if this openness is linked with earlier onset of sexual activity. However, they assert that the negative effects of this earlier sexual activity may be moderated by having fewer sexual partners (Joffe and Franca-Koh, 2001: 26, 27).

Further insights into the effects of parental communication about sexuality on sexual outcomes for young people have emerged from Schubotz et al.'s (2004) study of the sexual attitudes and lifestyles of young people (aged 14-25 years) in Northern Ireland, referred to earlier in Section 2.1. The measurement of 'communication with parents about sex' was gathered by 'yes/no' responses to the following: 'Discussed with mother'; 'Not discussed with mother'; 'Discussed with father'; 'Not discussed with father'. Schubotz et al.'s (2004) research indicated a complex relationship between the impact of parental communication

on young men and women. Young men who discussed sex with their mother were far less likely to report non-use of contraception at first intercourse (42% - sex not discussed with mother; 21.3% sex discussed with mother). The results also indicated a protective effect of father-daughter communication about sex if the desired outcome is delaying the onset of sexual activity and using contraception at sexual debut (19.7% of females in the whole sample who reported having discussed sex with their fathers had experienced sexual debut before the age of 16 years, compared with 27.3% who reported that they had not discussed sex with their father). The results with regard to use of contraception at first intercourse indicated that 18.2% of young women who had not used contraception at first intercourse reported discussing sex with their father compared to 25.3% of those who had not discussed sex with the father. However, parent-son communication appeared to have little impact on timing of first sexual intercourse for young men. In fact, there was some evidence that young men who reported discussing sexual matters with their parents appeared to be more likely to have had sex before the age of 16 years, although the differences were small (31% who reported having discussed sex with their mother had their sexual debut before the age of 16 years, and 32.3% who had discussed sex with their father; the corresponding figures for those who had not discussed sex with their mother or father were 30.7% and 29.6% respectively (Schubotz et al., 2004:186)). However, young men who had discussed sex with their mother and father were more likely to report having used contraception at first intercourse, so for this outcome, communication with parents was positive.

US studies have also revealed a haphazard picture, some showing that parental involvement and/or communication is associated with positive sexual outcomes for young people, and other research contradicting this. Hutchinson and Cooney (1998) collected data, using telephone interviews, from a random sample of 173 young women aged 19 and 20 years, and used an instrument for measuring parent-teen sexual risk communication (PTSRC). Using a range of items, they measured parent-teen sexual communication, comfort with parent-teen sexual communication, condom-use self-efficacy (competence), attitudes and behaviours. Their findings indicated that higher levels of communication with parents about sexual risk was significantly associated with reportedly higher levels of condom-use self-efficacy, and higher sexual communication with sex partners. The authors note the importance of self-efficacy around condom-use, as this has been found to be a significant predictor of safer sex practices among young women.

Positive outcomes of parental communications about sex were also found in a study by Whitaker and Miller (2000). The researchers set out to test the hypothesis that parent-adolescent sexual communication would reduce the impact of peer norms on two aspects of adolescents' sexual behaviour – sexual activity and condom use. Their data were based on face-to-face structured interviews with 388 young men and 519 young women aged between 14 and 16. Data were also gathered from the mothers of participants. Findings indicated that parental communications about initiating sex and about condom-use were associated with less risky sexual behaviour among respondents. Those who did not talk to a parent about initiating sex or condom-use demonstrated sexual behaviour that related more closely to their peers, and they were, therefore, less protected from peer influences about sex.

However, other studies in the US indicate that parental communication about sexuality does not necessarily delay sexual debut or increase consistent contraceptive-use. In a study designed to improve knowledge of the effect of specific communication about AIDS on the sexual behaviour of adolescents, Shoop and Davidson (1994) administered a questionnaire to 40 male and 40 female participants comprised of equal numbers of 15, 16, 17 and 18 year olds. Among the components of the questionnaire was one designed to capture prior discussion of AIDS and sexual matters with parents. Specifically, the research sought to determine whether one's ability to communicate with a partner about AIDS-related issues was linked to communicating with parents on the topic. Two measures were used to establish parent-adolescent communication, namely, the adolescents' reports of discussing sexual topics with parents, and their reports of discussing AIDS specifically. (The exact wording of the questions was not given in the published paper.) A logit specified loglinear analysis was used to test the effect of each variable with respect to partner communication, that is, was communication with parents related to communication with a sex partner. The results indicated that teenagers who reported having discussed sexual matters with parents were 7.4 times more likely to feel able to communicate with a partner about AIDS-related issues compared to those who had not discussed general sexual matters with a parent. For this item, parent communication seemed to have positive benefits, and strongly positive at that. However, when the second item was analysed – that pertaining to the question of specifically discussing AIDS with parents, the results were reversed – teenagers who had not discussed AIDS-related issues with parents were 8.25 times more likely to communicate about AIDS-related issues with a partner compared to those who had discussed such issues with a parent. The authors acknowledge this as an unexpected finding, and admit that they can only speculate as to what it means. They posit as a possibility that communication about AIDS from parents may have been prompted by parents who suspected that their adolescent was engaging in risky sexual behaviour. If this were the case, then parental communications may have occurred after the adolescent had become sexually active. This possibility, that parental communications on sexuality with their children might be reactive to concerns or knowledge of an adolescent's sexual behaviour is something to which we will return a little further on.

In another US study by Jaccard et al. (1996), which aimed to identify the impact of parents on their children's sexual activities and contraceptive use, the focus was on 751 Black young people of both sexes in the age range 14-17 years, with a mean age of 15. Data were gathered via self-administered questionnaires. While a range of issues were measured, the one of concern in our review pertains to discussions about birth control between mother and child. In contrast to other quantitative scales used in other studies, this study used fairly specific measures. Adolescents were asked "How much has your mother talked to you about each of the following topics?" The extent of mother-child discussions about birth control was then broken down into the following three statements. "We have talked about birth control, in general"; "We have talked about the importance of using birth control"; and "We have talked about specific birth control methods." The items were scored on a four-point scale, with one representing "not at all", two "somewhat", three "a moderate amount", and four "a great deal." Responses to the three items were summed to yield a total score. The results indicated that the higher level of discussion with mothers about birth control predicted an earlier onset of adolescent sexual activity.

However, the study also found that adolescent perceptions of their mothers' disapproval of pre-marital sex, and higher levels of satisfaction with their relationship with their mother were significantly associated with abstinence from sexual activity, less frequent intercourse and more consistent use of contraception among sexually active teenagers. (These findings, though, must be considered in the context of strong evidence from systematic reviews that abstinence programmes do not work (Swann et al., 2003.)) In Jaccard et al.'s (1996) study the authors did attempt to identify whether higher levels of sexual activity among the teenagers preceded (and therefore led to) higher maternal discussions about contraception among already sexually-active teenagers. In other words, the researchers attempted to establish whether there was a causal relationship between the adolescents' sexual behaviour and the mothers' increased communications about birth control; if this were the case, one would expect the positive associations between communications about contraception and the initiation of sexual behaviour to be reduced to non-significance when maternal perceptions were held constant. However, even when maternal perceptions of sexual activity were partialled out, the coefficients of the logistic regression analysis for all three maternal variables were statistically significant. On this basis, the authors conclude that, 'These results argue against a causal interpretation that adolescent sexual behavior [US spelling] influences maternal attitudes. These results do not affirm the causal influence of attitudes on behavior, but they do lend support to such an interpretation' (Jaccard et al., 1996: 163). The authors acknowledge the limitations of their sample being confined to an inner-city Black population living in Philadelphia. They also indicate that the type of communication between mother and daughter may have lacked practical information as to how to use contraception effectively (maternal discussion were not found to impact upon the consistent use of contraception for females, but were for males). From the discussion in the published paper, the authors articulate the need to improve parent-based approaches to contraception education to reduce unintended pregnancies, obviating the notion that there may be an abstinence-based agenda underpinning the research. While the relevance of this study to the Irish situation is questionable and must be approached with caution because of the cultural distance, an awareness of these findings is important to providing a fuller understanding of the effectiveness of parental involvement in sexuality education.

A further US study (Widmer 1997) found similar results to those of Jaccard et al. (1996). Widmer's study was a telephone survey that formed part of the Philadelphia Teen Survey, a study designed to establish the effect of extending services at a number of family planning clinics throughout Philadelphia. (The study was funded by the Robert Wood Johnson Foundation and the author was supported by a grant from the Swiss National Science Foundation, neither of which appear to have a right-wing agenda.) The study involved randomly selected teenagers and their parents. While Widmer's article was primarily about the influence of older siblings on the initiation of sexual intercourse, parental behaviour and attitudes towards adolescent sexuality were measured as control variables, mainly to establish that the sibling effect was not a spurious one. One of the constructs measured in this regard was parent-child communication about sex, in which a six-item scale was employed. The items on the scale asked if they had ever talked (yes or no) with their teens: about the biological facts of sex and pregnancy; about how to decide whether or not to have sex; about different methods of birth control; about where to get birth control; about how to avoid sexually transmissible diseases or AIDS; and about how

to use a condom. The results indicated a strong statistical relationship between parents communicating a good deal about sex and adolescent sexually activity. What was not clear from Widmer's study was whether parental discussions preceded or followed the initiation of sexual activity by the teenager. Parents' suspicions or knowledge that their adolescent was sexually active may have prompted their communication about contraception.

Huebner and Howell's (2003) US study aimed to examine the relationship between adolescent sexual risk-taking and the adolescent's perception of several parenting processes, including the frequency of parent-adolescent communication about sex and birth control, among a list of other topics. They found that the frequency of adolescent-parent communication did not demonstrate a direct relationship with sexual risk-taking. The authors highlight that they asked a range of questions about parent-adolescent communication, with the subject of sex and birth control being just one. Their contention that the lack of a relationship between these variables may be because researchers (themselves included) tend to not ask enough sex-specific questions is very important, and something to which we will return in the conclusion of this report.

In the final US study that we will consider, Fingerson (2005) explored the nature of sexual socialisation within families by examining the impact of mothers' opinions on their children's sexual behaviour. In total, 9,530 mother-child dyads from a nationally representative survey were assessed. This research found that the more discussion about sex that had occurred within a particular dyad, the more likely the teenager was to have had sex. Nevertheless, while mothers of virgins reported slightly less talk about sex than mothers of teenagers who had engaged in sex, on average, both groups reported high amounts of talk about sexual matters. On average, teens had much more liberal attitudes towards sex than their mothers, who, by contrast, were more likely to be sexually conservative than sexually liberal. However, teens judged parents to be slightly more liberal than mothers reported themselves to be. Consequently, adolescent perceptions, as opposed to parents' actual opinions, were sufficient predictors of sexual behaviour - the more sexually liberal adolescents perceived their mothers to be, the more likely they were to have higher numbers of sexual partners. Fingerson contends that the causality in the transmission of norms is unclear (a weakness commonly identified in this type of research). In other words, rather than teens being socialised by parents, parents could in fact shift their attitudes towards sex on the basis of their adolescents' sexual behaviour.

The complex picture remains in the most recent study to emerge from the UK context. Wight, Williamson and Henderson (2006), a team of researchers from the Medical Research Council in Scotland, conducted a large-scale study on parental influences on young people's sexual behaviour. This study of parental influences draws on data collected as an aspect of a randomised trial of a school sex education programme (SHARE). Wight et al. used longitudinal data to explore two aspects of parental influence: (1) the impact of parental monitoring on the sexual behaviour of respondents and (2) the impact of 'ease of communication about sex' on the sexual behaviour of respondents. (Since our concern is primarily with the issue of parental communication, we will focus mainly on this here.) Data were gathered using a self-completion questionnaire from two successive cohorts of secondary school pupils in Scotland aged 13/14 (time one), and the same participants were followed up two years later (time two). At time one, 7,616 adolescents participated, and at time two, the figure was 5,854. To measure 'ease of

communication with parents about sex', participants were asked how comfortable they were talking about sex with their mothers and fathers, and a six-point scale was used to measure the degree of comfort with the following options: 'never have/does not apply', 'very uncomfortable', 'uncomfortable', 'in between', 'comfortable' and 'very comfortable'. The effects of parenting influences (both communication and monitoring) were compared against five outcome measures: (1) sexual experience - whether respondents had sexual intercourse by time two; (2) age at first intercourse (before or after fifteenth birthday); (3) number of sex partners; (4) consistent condom use; and (5) consistent contraceptive use (which included condom use). At time one, for males in the study (13/14 year olds), the relationship between levels of comfort in talking to either parents about sex at time one, and outcome measures of sexual experience was U-shaped: Those who reported being either 'very comfortable' or 'very uncomfortable' communicating with parents about sex were more likely to have experienced their sexual debut than those who rated their comfort levels between the opposite poles. For females, the outcomes were associated with whether the question applied to mothers or fathers, with a U-shaped relationship emerging with regard to ease of communication with fathers only. Overall, though, for the young women, there was an association between ease of communication about sex and later age of sexual debut, though there was little relationship between this and the number of sex partners or the use of condoms or contraceptives. At time two when participants were aged 15/16, the U-shaped relationship had altered with regard to sexual experience, and results showed that males who reported greater comfort about talking about sex with either the mother or father indicated a greater likelihood of sexual experience. In addition, higher reported comfort levels of males in talking to their fathers about sex was also related to younger age at sexual debut. In the case of females at time two there was no association between comfort levels in talking to mothers with any of the outcomes; however, with regard to ease in communicating with fathers, the U-shaped relationship was found with regard to sexual experience, and there was a positive association with contraceptive use. The main associations found in multivariate logistic regression were that males who reported feeling uncomfortable talking to their fathers were most likely to use condoms consistently, while (by contrast) girls who were at greater ease talking to their fathers were more likely to report condom use. Wight et al. speculate that for boys high levels of ease in talking to parents "might legitimate sexual activity, and/or not taking precautions, though causation could plausibly be in either direction (2006: 490)." Wight et al.'s findings show a level of consistency with those of both Wellings et al. (2001) and Schubotz et al. (2004) regarding the association between young men's communication with parents, and their increased likelihood of having sex before the age of 16 years. Overall, Wight et al. conclude that that ease of communication with parents appeared to "bear little relationship to sexual behaviour". Instead, this large, longitudinal research revealed parental monitoring as the variable which exhibited the greatest degree of influence on the widest range of adolescents' sexual outcomes. Significantly, not only did low parental monitoring predict early sexual activity for both males and females, but for females, it was also associated with more sexual partners and more inconsistent usage of condoms/other contraceptives.

While methodological difficulties would appear to present the greatest challenges to an accurate understanding of the impact of parental sexuality education, it is worth noting that part of the lack of success (in terms of outcomes) of parental sexuality education may

be to do with the quality and accuracy of parents' own knowledge about contraception. There is some evidence from the US to indicate that the medical or scientific accuracy of the information parents provide their children cannot be assured (Eisenberg, Bearinger, Sieving, Swain and Resnick, 2004). Eisenberg et al., using a telephone survey, explored parents' beliefs as to the effectiveness, safety and usability of condoms and the pill among 1,069 American parents of 13-17 year olds. They noted that the effectiveness of birth control for the prevention of pregnancy, when used consistently and correctly, is 97% for condoms and 99.9% for the pill. In terms of STIs, the Centre for Disease Control in the United States has concluded that condoms prevent HIV transmission in 98-100% of high-risk encounters (Eisenberg et al., 2004:50). Nevertheless, fewer than half of the respondents believed that correct, consistent use of condoms is highly effective for either STI or pregnancy prevention. Worryingly, then, a substantial portion of parents underestimated the effectiveness of condoms for preventing pregnancy and STIs, with just 47% believing them to be very effective against STIs and 40% for pregnancy prevention (Eisenberg et al. 2004). One may speculate that the lack of effectiveness of parental sexuality education among poorer, predominantly African-American populations (upon which much US research is based) may be partly accounted for by the poor quality and accuracy of information, especially around birth control, owing to the structural disadvantages and lower education levels of these groups.

It is clear from this review that no consensus has emerged concerning parental communication about sex or parental involvement in sexuality education. Some of these studies, in particular those from the USA, are culturally remote from the Irish situation and their relevance is therefore questionable. UK evidence appears to suggest that parental communications influence adolescent males and females in different ways. However, that British research on the topic is also indicating inconsistent results suggests that the diverse range of methodologies and measurements being applied in different studies is problematic. We will return to this in the overall conclusion to this report.

2.3 Cultural openness about sexuality: the Dutch situation

It was noted in the previous section that reviews on the effectiveness of sexuality education have drawn attention to the notion that in national and international comparison studies, teenage pregnancies and birth rates were lower in situations of open and liberal policies (Grunseit et al., 1997). The Netherlands is one country often held up for comparison because statistics indicate that while there is little difference between Dutch and American teenagers in terms of the percentage who have had sexual intercourse, there is a notable difference in reported contraceptive use. In this sub-section, we attempt to focus on what is known about cultural dimensions of sexuality in Holland that might explain its relative success in terms of sexual health outcomes for adolescents. While we attempt to focus on what is known about how Dutch parents approach sexuality in relation to their children, we will also comment on what is also known about sexuality education more widely in Holland, as cultural dimensions tend to work across societal institutions. First, a brief outline is provided of differences between sexual health outcomes for teenagers in Holland and the other countries, predominantly the USA.

The Netherlands has low rates of teenage pregnancy combined with high contraceptive use among young people (reported use of no contraceptives among Dutch females is 7% as compared with 26% among US females (Ferguson, Vanwesenbeeck and Knijn,

2008), and an age of sexual debut which is no different to that in other countries (Weaver, Smith and Kippax, 2005). Weaver et al. (2005), in assessing the sexual outcomes of three countries with sex-positive government policies (France, Australia, and the Netherlands) and the US, a country with a primarily abstinence-based policy, found that abstinence-based policies did not result in improved sexual health outcomes for young people, a point that came across strongly in systematic reviews, as indicated earlier. (In 1988, just 2% of teachers taught abstinence-only sex education in US schools; by 1999, this had risen to 25% (Weaver et al. 2005)). In fact, the US has the highest rates of teen pregnancy, birth and abortion among young women in the developed world, with the number of births per 1000 adolescents (aged between 15 and 17) being 8.5 times greater than that in the Netherlands. Accompanying this high birth rate is the fact that the abortion rate among 15-19 year olds in the US is almost 8 times greater than in the Netherlands. In terms of most sexual health indicators, the US fared worst – syphilis infection was the only indicator in which the US did not have the highest rate of infection (Australia did) (Weaver et al., 2005:179,182). Of note is the fact that Dutch young people tend to have their first experience of heterosexual intercourse on average 15 months later than British teenagers, and when they do engage in sexual activity, they are more likely to use contraceptives (Jackson and Scott, 2004).

Schalet's (2000:75) in-depth qualitative analysis based on semi-structured interviews with 14 American and 17 Dutch parents of 16-year-old adolescents with a view to theorising modern personhood, offers useful insights into differences in the perspectives of parents in the USA and Dutch parents. The study uncovered striking differences in their definition of adolescent sexuality, and therefore, the strategies they deployed to manage it. For American parents adolescent sexuality was characterised as a biologically-driven issue, which led to disruption for both the adolescent and the wider family. Dutch parents, by contrast, focused on the love relationship and the social responsibility of teenagers, thereby perceiving their sexuality as a 'normal' phenomenon (Schalet, 2000:76). For Schalet, then, Dutch parents tended to 'normalise' adolescent sexuality and incorporate it into the fabric of the family, whereas American parents tended to 'dramatise' their children's sexuality and in the process, exclude it from the family. For American parents, adolescent sexuality was found to be characterised as something that complicates the adolescent experience, involving the disruptive process of "raging hormones".

Interestingly, American parents did not usually refer to the relational or emotional context within which sexual activity occurs, as they did not associate teenage sexuality with love and meaningful relationships (Schalet, 2000). In Schalet's (2000) research, teenage sexuality was often characterised by American parents as "experimental, promiscuous, immoral or exclusively pleasure-driven". Moreover, they assumed that teenagers were unable to guard against the unwanted consequences of sexual activity – through the use of contraceptives. Their view was that since teenagers are capable neither of controlling their own impulses nor of forming meaningful relationships with others, their sexuality is a drama. By contrast, for Dutch parents, teenage sexuality was described as something which was relatively unproblematic. This stems from the fact that these parents believed that sexuality was something which should be talked about in the course of family life, thereby avoiding the creation of a taboo around it. As opposed to the individually-based conception of teenage sexuality on the part of American parents, Dutch parents discussed sexuality in the context of a relationship and teenagers' connection with another person. In fact, Dutch parents believed that sexuality should be perceived in the context of teenagers'

emotions and relationships with others. These parents stressed the importance of being ready for sexual intimacy. Significantly, however, unlike American parents, Dutch parents did believe that teenagers are capable of being ready for a sexual relationship. Moreover, Dutch parents trusted that "the right moment" for engaging in sexual intimacy would be recognised by the teenager him or herself. In fact, when asked whether she thought her son was ready for a sexual relationship, one mother responded, "You should ask him that". For Dutch parents, then, adolescent sexuality is not considered something which is inherently dangerous, because they expect that their children will use contraceptives. In fact, parents stressed the importance of their own role in urging their teenagers to use contraception. On the whole, then, the belief that teenagers are able to restrain themselves and commit to other people enables Dutch parents to normalise adolescent sexuality and define it as something which is, or should be, not a difficulty (Schalet, 2000).

The divergent perceptions of adolescent sexuality on the part of American and Dutch parents generated differing strategies as to how to handle it. While 12 out of the 17 Dutch parents interviewed said that they would permit their 16 year old to sleep with their boy/girlfriend in the home, 13 of the 14 American parents would not (Schalet, 2000:75-76). Notwithstanding the interesting contribution of this piece of literature, there are a number of notable drawbacks - in addition to the small sample of participants utilised, the data collection for this study was undertaken over a decade ago (between September 1991 and February 1992).

While we do not wish to digress into a discussion of school-based sexuality education in Holland, since our focus is on parents, it is nonetheless worth noting that the attitude of acceptance manifested by Dutch parents in Schalet's study appears to be supported by similar attitudes in school-based sexuality programmes. Ferguson et al.'s (2008) research is informative in this regard. They carried out a content analysis of current Dutch sexuality materials, whereby a sample of materials created for young people (aged 11-18 years) was coded using a qualitative analysis software programme, with the aim of identifying the prevalent themes in Dutch sexuality education. In addition, they conducted a case study of a high school sexuality education programme, "Long Live Love". The authors note that the Netherlands is renowned for its comprehensive approach to sexuality education, something which occurs within a "sex-positive environment", whereby adolescent sexuality is accepted and sexual responsibility among teenagers is encouraged. This is believed to have had a significant impact on the sexual health outcomes of Dutch adolescents. Ferguson et al. (2008) assert that Dutch sexuality education presents adolescent sexuality in a positive light, thereby acknowledging that young people need, want and have a right to accurate and comprehensive information about sexual health. Consequently, young people are equipped with the capacity to behave responsibly if they do decide to have sex (Weaver et al., 2005). Interestingly, a significant feature of Dutch sexuality education is the notion of *weerbaarheid*, which entails a focus on assertiveness, communication, personal norms and values, and decision-making. Two key elements of Dutch sexuality education are the messages, "only do what you want to do" and "no means no" - consequently, young people are encouraged to reflect on their wishes, and develop the ability to communicate and retain their own personal boundaries (Ferguson et al., 2008:99).

Another dominant feature of Dutch sexuality education is safer sex. Within this sphere, the effectiveness of birth control is imparted to Dutch teenagers (including, for example,

the fact that the pill does not protect against STIs), as well as the importance of taking responsibility for their activities. In addition, practical information such as where to purchase condoms and how to use condoms is also provided. The recurring message, then, is that if you are going to have sex, do so safely (Ferguson et al., 2008). In light of this, according to Ferguson et al. (2008), adolescent sexuality is not deemed an inherently risky enterprise because contraceptive use is assumed.

2.4 Gender issues relating to parental sexuality education

Several studies have found that parental information tends to be tailored according to the gender of the child. In Rosenthal and Feldman's (1999) Australian study, girls were found to receive more information concerning subjects such as menstruation, abortion, pregnancy and dealing with sexual pressure, and less information than boys on topics such as masturbation and wet dreams. The messages which formed the sex education of the young female participants in Holland, Ramazanoglu, Sharpe and Thomson's (1998) study were also primarily concerned with the dangers of sex and avoiding pregnancy. The researchers argue that such a conception of sex can engender very negative images of sexuality for young people. West's (1999) qualitative research involving 89 women and 58 men in a British context found that while for young women there was a degree of communication about the facts of reproduction, discussion was much less frequent for young men. This notion of gender-specific content was also in evidence in Hutchinson and Cooney's (1998) analysis of parent-teen sexual risk communication, based on telephone interviews. They report that while 73.8% of mothers provided young women with at least some information on general human sexuality, just 20.9% of fathers had done so. In addition, while two-thirds of these young women reported that their mothers had given them at least some information on topics such as postponing sex, sexual pressures and STIs, just over a third of fathers were reported to have discussed these topics with their daughters. Moreover, in terms of information about contraception, 55% of women reported that their mothers communicated with them to at least some extent on this topic, compared with just 20% reporting similar discussion with their fathers (Hutchinson and Cooney, 1998).

Pluhar, Dilorio and McCarty's (2008) research involving computer-based interviews with a convenience sample of 298 African-American mothers and their children similarly found that these mothers communicated about sexuality with their daughters much more frequently than their sons. Limited communication with sons was also evident in Jaccard and Dittus's (1991) research involving 210 couples with adolescent children, which found that while 85% of girls had a parent who had discussed sexuality with them, just 50% of boys had.

Guzmán, Schlehofer-Sutton, Villanueva, Dello Stritto, Casad and Feria's (2003:595) research, based on secondary analysis of data obtained from questionnaires completed by 1,039 Latino adolescents from Los Angeles County, also found a "clear division" of adolescent-parental communication into same-gender dyads, with girls more likely to communicate and feeling more comfortable communicating with their mothers about sex, and likewise sons with their fathers. Interestingly, in Kirkman, Rosenthal and Feldman's (2002) Australian-based qualitative research, parents displayed a similar strong discourse of same-gender communication about sexuality – mothers with daughters, and fathers with sons. However, notwithstanding this endorsement of same-gender communication,

in some families, same-gender communication was absent (especially father-son communication).

Walker's (2001) qualitative British study, which aimed to explore how parents talk to their children about sex, found that while mothers tended to be the primary educators, nevertheless, some fathers did share that role. However, Walker also noted that commonly fathers abdicated the responsibility for providing sex education altogether to the other parent, usually the mother, or the school. However, mothers too experienced difficulties in performing their role as sex educators. Commonly, they felt more comfortable in talking to their daughters as opposed to their sons, given that they could draw on their own personal experiences of sexual development in discussions with their daughters. The Irish Study of Sexual Health and Relationships noted that while almost half of young Irish females (50.8%) reported that it was quite/very easy to talk to their mothers about sex, just 14.2% reported likewise for fathers. Among young Irish males, a third (31.6%) stated that it was quite/very easy to talk to their mothers, compared to 24.4% when communicating with fathers (Rundle et al., 2008).

In addition to the same-gender communication discourse mentioned in Kirkman et al.'s (2002) research, there was also evidence of a discourse of equal responsibility of both parents for communicating with their children about sexuality. Despite this ideal, however, parents revealed that, in practice, the main responsibility for sexual education within nearly all the families lay with the mother (Kirkman et al., 2002). Similarly, Sprecher et al.'s (2008:21,22) research with 6,000 American students found that mothers were rated as a higher source of sex education than fathers for both males and females. Within families, then, the flow of information about sex tended to be controlled by mothers, although fathers did play some role in the provision of sex education to their sons. Hutchinson (2002), too, found lower levels of sexual communication with fathers as compared with mothers among the 234 American young women who participated in her research. Measor's (2004) British study involving multiple research methods over three phases, found that boys appeared to be excluded from the educational process within the family. While girls gained a substantial amount of information from their parents, particularly their mothers, and many (62%) felt that they would "talk" to their mothers if they needed more information or were worried, by contrast, over 50% of boys, felt unable to access maternal help/support in relation to issues concerning sexuality and relationships. In addition, just 13% of girls and 22% of boys felt able to consult their fathers on such matters (Measor, 2004:153,159).

A common assertion on the part of participants in Kirkman et al.'s (2002: 66,68) research was that women "communicate better", and fathers were cast in the role of being unable to deal with intimacy well or sensitively guide children. As one mother argues,

Fathers have more difficulty talking about the emotion of it all. They sort of tend to stick to just the act itself. (Kirkman et al. 2002:69)

Kirkman, Rosenthal and Feldman (2001) note that traditional fatherhood is typified by poor communication and a reluctance to display affection. Their qualitative research with Australian family members found that fathers encountered difficulties in communicating with their children about sexuality because of the tension derived from their occupation

of two subject positions – that of the traditional heterosexual male on the one hand, and the involved father on the other. Despite the dominance of the discourse of traditional masculinity, fathers attempted to position themselves as caring fathers – a task complicated by the fact that this was in conflict with the construction of masculinity within heterosexuality. Moreover, the incompatibility of these two subject positions “led to problems, confusion, or withdrawal” from overt communication about sexuality (Kirkman, Rosenthal and Feldman, 2001:408). Kirkman et al. (2002:59) observe that ‘apparently warm relationships’ between fathers and their children are disrupted at puberty, and consequently, mothers bear most of the responsibility for communicating about sexuality.” However, many of the young women in Hutchinson’s (2002:245) research reported that they wished for more sexual communication with their fathers, perceiving fathers to have a particular role to play in sexuality topics such as “understanding men” and “resisting pressure from men to have sex”.

However, Lefkowitz, Boone, Sigman and Kit-fong Au’s (2002) research raises questions about the self-reporting of gender differences in communication about sexuality. Participants in their research (50 mother-adolescent dyads – 25 boys and 25 girls) were recruited for an intervention study designed to provide mothers with training for improving their communication with their adolescent children. At their first visit, dyads were asked to engage in (videotaped) conversations on four topics – everyday issues, conflict issues, AIDS, and dating and sexuality. In addition, mothers and adolescents reported on the frequency of their conversations about sexuality, birth control and AIDS using a scale from 1 (not at all) to 5 (a lot). Compared with girls, boys reported less frequent discussions with their mothers. However, the mothers of these boys did not report less frequent discussions than did the mothers of the girls. Consequently, mothers and sons differed in their reports of frequency of discussion of sexual issues. However, these gender differences concerning the extent of sexual communication, found in self-reported communication, were not observed in the videotaped conversations (conducted in the laboratory). Lefkowitz et al. (2002:236) acknowledge, however, that it is possible that in their everyday lives, boys’ discussion of sexual matters with their mothers differs from that of girls, despite the fact that in a laboratory situation, when told to discuss such issues, boys and girls behave in a similar fashion. On the other hand, they posit that the gender differences in adolescents’ reports could reflect differences in perception.

In spite of reservations about accuracy in reporting gender differences in parental sexuality education, the picture emerging from national and international studies is that mothers do more sexuality education than fathers, girls get more sexuality education than boys, and the content is differentiated along gender lines.

2.5 Issues pertaining to the process of parental sexuality education

A number of issues have been raised, both in qualitative and quantitative research, about the process of parental sexuality education. These will be considered under a number of sub-headings as follows: willingness, ease and openness in communicating; triggers for increased communication; parental concerns about protecting children; and moral values and ideologies cross-cutting parental sexuality education.

2.5.1 Willingness, ease and openness in communicating

In Walker's (2001) British study, parents' perceptions of their child's readiness to know and their own willingness to enlighten their children about sexuality issues, played a significant role in influencing the level and content of their sex education provision. In addition, for the parents in Walker's research, exposing their ignorance of sexual matters was a concern for some, with parents unwilling to admit to not being in "the know" to their children (Walker, 2001:138-139). For Walker (2001:142), then, "fear of losing face" in front of their children was a key factor inhibiting the provision of sex education, with fathers particularly citing this as a reason that contributed to their unwillingness to engage in sex education with their children. Unsurprisingly, it was the mothers in Pluhar et al.'s (2008) research who possessed greater comfort and self-efficacy for engaging in discussions about sexuality who reported more frequent communication with their children. Those mothers in Dilorio, Resnicow, Dudley, Thomas, Wang et al.'s (2000) research who expressed higher levels of self-efficacy (i.e. confidence in their ability to discuss sexual matters with their adolescent), in conjunction with possessing positive outcome expectancies associated with talking about sex, were also more likely to communicate with their children about sex.

Walker (2001) concluded that the factors limiting parental involvement in the provision of sex education to their children included: lack of awareness of the child's need for sex education; embarrassment surrounding the discussion of sexual matters; uncertainty as to their role as parents; and the social expectation that they should give their children "the talk". In fact, the notion of a "formal" sex talk was perceived as a "major hurdle" for some parents. Walker asserts that parents possessed many skills which they used to aid their role as educators. She notes that they were able to navigate the fine line between raising the subject, without making a big issue out of it and over-personalising it, thereby creating an atmosphere of openness without invading their children's personal space. She argues that a significant role which health promotion initiatives can play is to help parents realise that they have skills and are ideally positioned to provide effective sex education for their children. Moreover, while parents possessed many skills as educators, responding progressively and appropriately to their children; nonetheless, they did experience some embarrassment and uncertainty connected to their role.

Problems surrounding this ideal of 'openness' have been found to arise in families with older children. Solomon, Warin, Lewis and Langford, (2002:968) conducted a 10-year follow-up investigation of 70 British families and found that of 221 responses to the question "What's important about being in a family?" 101 emphasised the family as a site for trust and "being there". Just like the participants in Frankham's (2006) research, then, the notion of open communication between children and parents was an important ideal for the participants in this study (Solomon et al. 2002). However, this familial aspiration once again proved problematic. For some teenagers, the more information they disclosed to their parents the greater the risk of loss of control over their private lives. Therefore, while the majority of teenagers valued the ideal of opening up with their parents, for some, disclosure was problematic since parents could utilise this information to reassert control, thereby decreasing their autonomy and independence. Accordingly, teenagers' sole source of power in this situation is to withhold information about their personal lives. According to Solomon et al., therefore, while both parents and their children subscribe to the discourse of openness within families, tensions emerge nonetheless, given that both

parties have opposing goals in the trading of information, goals which conflict with this ideal. For parents, gaining information from their teenagers equates to the retention of power and control, whereas the withholding of information from their parents on the part of teenagers is a strategy by which they can gain privacy and power. Consequently,

Parents and teenagers may desire openness; but in practice, they experience 'closedness' (Solomon et al., 2002:981).

Rosenthal and Feldman (1999:849) assert that parents cannot and should not impose their views about the need for communication on to their teenage children. To that end they argue that parents need to consider whether their teenagers are willing recipients of parental communication, particularly given that this discussion concerns a matter as personal and private as sexuality. Opening up the communication process early on in a child's life and including discussion of sexuality as part of that discussion can, Rosenthal and Feldman propose (1999:849), establish a "pattern of reciprocal sharing of information" before the onset of puberty, thereby enhancing the communicative interaction between parents and teenagers.

2.5.2 Triggers for increased communication

One factor that has been found to increase the likelihood of parents discussing sexuality with their children is the presence of triggers to help stimulate discussion. In the case of young children, Frankham (2006), whose work is based on semi-structured interviews with 50 parents and case studies in which all members of ten families were interviewed, asserts that crucial to the relative ease parents feel about engaging in the process of sex education is that children ask questions about their origins, and this is then taken as a prompt to begin talking about sex. Parental beliefs about teenagers' behaviour can also serve as a prompt to engage in communication about sex. In Eisenberg et al.'s (2006:898) research, parents who believed that their teenager was romantically involved were up to 2.5 times more likely to have talked to them about a wider range of sexual matters. The researchers note, however, that problems arise as communication might remain untriggered because parents are unaware that their child has become romantically involved. Moreover, by the time parents become aware that their child is involved in a romantic relationship, the most influential opportunity to engage in communication may have already passed. Of note is the fact that just half of mothers in Fingerson's (2005) research were able to accurately identify whether their teenager had had sex or not.

For the parents in Walker's (2001) British-based qualitative study, the presence of stimuli proved to be an important factor in improving the provision of sex education by parents, providing valuable trigger opportunities for the airing of sexual matters within the home. This was the case within families characterised by an open atmosphere towards sex, but even more so within those families with a more closed atmosphere, where discussion of sexual issues was sparser (Walker, 2001). Consequently, these parents highlighted the need for accessible sex education resources to utilise in discussion of sexual matters with their children. Moreover, for mothers of sons the increased provision of resources, specifically those written from a male perspective, was viewed as a particularly beneficial trigger (Walker, 2001).

2.5.3 Parental concerns about protecting children

Sex may be a wonderful thing but only, apparently, within strict limits and when marked 'for adults only.' (Jackson and Scott, 2004:236)

According to Jackson and Scott (2004:235), notwithstanding the erotic imagery which is commonplace within our society, there nonetheless exists enormous anxiety about preserving children's sexual "innocence" – in other words (in Jackson and Scott's view) their ignorance. In effect, they note, children and sex are seen as antithetical. Their argument is that rather than sex education being perceived as a process, it is envisaged as "leaping a chasm between 'innocence' and 'knowledge'". Consequently, while many parents profess a desire to be open with their children about sexuality, this openness, they propose, is often defined in rather narrow terms.

In Walker's (2001) study, though, what children of varying ages should know about sex was a concern for parents. Parents tended to be selective about the information they provided to their children - with the content ranging from mainly physical facts with younger children, to more social and emotional information as their children matured. Therefore, parents sought to gauge whether their child was "old enough" to be exposed to certain information. One strategy to accomplish this was to simply respond to their child's questions and not expand their answer to any great extent. In Frankham's (2006:237) study, the researcher was concerned with exploring how, while apparently enacting 'openness' with young children, many parents enacted forms of 'foreclosure' about sex and sexualities. When describing their responses to questions about sexual matters from their young children, parents commonly used the word "openness". However, like the parents in Walker's (2001) study, disclosures about sexual matters in the case of young children, which were often prompted by children's own questions, were frequently addressed in a child-friendly way, with parents placing great emphasis on supplying information only when they deemed their child was ready for it. Parents believed that, in responding to their children's questions, they needed to make judgements about what might constitute adequate information and what might be "too much" for them to handle. Indeed, giving children more information than the most basic was perceived by parents as being unhelpful, serving to create unnecessary confusion and anxiety for children.

Frankham (2006) cautions, however, that rather than parents being pro-active when approaching the process of sex education with their children, they can become reactive, relying on children's own behaviour to signal when they are ready to hear about the subject of sex. Therefore, the responsibility for maintaining the conversation about sex is passed to the child. Moreover, rather than children's questions constituting a prompt for discussion, instead, information is imparted in such a way that it closes down and limits the possibilities for further disclosure of information. Therefore, in the case of sexual matters, ignorance is perceived as a positive rather than a negative characteristic to possess. Frankham (2006:239) argues that consequently, despite the openness parents advocate, many of the triggers supplied by children "lead only into 'cul-de-sacs'", as parents' beliefs about the appropriateness of sexual information to be disclosed to their children create foreclosures. When engaging in the process of sex education, then, through their judicious use of disclosures and the deployment of foreclosures, parents construct particular forms of knowledge for their children, thereby producing particular forms of ignorance.

At the core of educating their children about sexuality, then, are parents' concerns about protecting their children. In effect, they want to "preserve" their childhood (Frankham, 2006:249-250). Wallis and VanEvery (2000:418) agree, asserting that, on account of their "innocence" and "corruptible" status, it is viewed as necessary to "protect" children from exposure to carnal knowledge. For Frankham (2006:247), then, the process of sex education:

Is a story about learning about sex, but it is not the usual tale of learning...Rather than an open-ended supply of information... information is held back from children in order to 'protect' them.

Rather than a being process of enlightenment, and notwithstanding parents' stated goals with regard to the discussion of sexual matters with their children, sex education within families plays an important role in keeping some things hidden as opposed to exposed or 'open' (Frankham, 2006:252).

2.5.4 Moral values and ideologies cross-cutting parental sexuality education

Parental religious and moral values can also play a role in influencing the nature of sex education parents provide to their children. In a US large-scale quantitative study involving teenagers and their parents, Regnerus (2005) examined the link between religion and patterns of parent-child communication about sex and birth control in order to ascertain whether religion influences how parents communicate with their children about sexual matters. Parental religiosity appears to curb the frequency of communication about sex and birth control, with almost 22% of parents who attended church at least once a week never discussing birth control with their children, compared with 15% of parents who attended less often (Regnerus, 2005). However, for Regnerus, the correlation between parental religiosity and communication is not straightforward, particularly in the case of more devout parents who report talking frequently with their children about sex, something which may in fact refer primarily to moralisation about sexuality as opposed to information dissemination. Regnerus posits that even when religious parents talk to their children about sex, their discussion is primarily centred on values, whereas less religious individuals, by contrast, are less likely to equate morality conversations with conversations about sex per se.

In a survey concerning the moral dimensions of sexuality education disseminated to parents through primary school teachers in Greece, of the 372 parents who participated, 96% stated that sex education should provide an understanding of the deeper meaning and the significance of sexual intimacy, with mutual respect being perceived as the most important moral principal (Kakavoulis, 2001). Research with 286 American male undergraduates also found that parental messages concerning sexuality were dominated with messages which contextualised sexual intercourse (Epstein and Ward, 2008:123). In this study parents highlighted the importance of love, safe sex and abstaining from sex until they were married or in a committed relationship.

Regnerus (2005:102) cautions that while parents may claim to be discussing sexuality with their children, the nature of this communication is unclear, with religious parents more likely to take the opportunity to convey desired sexual values.

The ideology of heteronormativity has been found to be embedded in parental sexuality education. Frankham (2006:239) asserts that the answers parents often supply to children in the course of providing sex education lead sex to become defined as penetrative vaginal intercourse. Consequently, in adulthood sexuality becomes equated with heterosexuality. Gabb (2004:20) also argues that traditional sex education is laden with ideological meaning, which positions gendered roles and heterosexuality as the "natural" and socially acceptable way to live. For Jackson and Scott (2004:236), too, the heterosexual couple remains enshrined as the normal form of sexual relationship in adulthood. Consequently,

The sexual world that children ultimately learn about, and come to participate in, continues to be ordered by institutionalized heterosexuality. (Jackson and Scott, 2004:236)

Gabb (2004:21) contends that the focus on reproductive sex and its context, "the (heterosexual) family" stigmatises deviations from this norm (Gabb, 2004:21).

However, there is some evidence that the sexual orientation of the parent can influence the content of and values underpinning parental sexuality education. Through in-depth interviews, Gabb (2004) explored how children from 13 lesbian families "learn" about sexuality and the effects their parents' sexual orientation has on their sex education. She argues that lesbian families provide a distinctive form of sexuality education, given that issues surrounding sexuality form an ambient presence within the home. A general consensus emerged from participants that children's awareness of their mothers' sexuality not only produced an underlying attitude of tolerance of "difference" but also generated a questioning attitude towards traditional – heterosexual – understandings of gender. While none of the children interviewed identified themselves as lesbian or gay, many had arrived at a heterosexual identity following a considerable process of self-reflection. In effect, among these children from lesbian families, there was no presumption of "straightness", as is the situation with most children, thus the naturalness of heterosexuality was queried (Gabb, 2004: 25,32).

Gabb (2004:23) contends that the families in her study illustrate that "home tuition" in sexual matters provides children with a thorough, tailor-made education on sexuality. She notes that many parents made conscious efforts to talk to their children about all aspects of sexuality and difference. Nevertheless, similar to other parents, this openness about sexuality was determined by the child's age and maturity. Moreover, within some of the families, explicit sex education conversations were avoided, leading Gabb (2004:29) to suggest that these children's knowledge about sexuality derived less from active "teaching" on the part of their parents and more as a product of environmental awareness – the "ambient knowledge" which was a part of who these children from lesbian families were, rather than an external piece of information to be acquired.

2.6 Parents interfacing with school-based sexuality education

Insights into parents' perspectives on school-based sexuality education in Ireland have recently become available in a study by Mayock, Kitching and Morgan (2007). The study aimed to investigate the extent to which Relationships and Sexuality Education (RSE) policy was implemented by schools, and the RSE curriculum developed, as well as the factors that impacted upon its implementation. The study used a mix of qualitative and quantitative methods, with the survey questionnaire administered to a representative sample of

secondary schools throughout Ireland. When schools were asked the question 'How much interest do (individual) parents take in RSE implementation?', their response was that just 3.1% of parents were deemed to try to ensure that RSE is implemented, while 38.4% of parents were deemed to take no interest. The majority (58.5%) of (individual) parents were positioned in the middle and were felt to take some interest. Clearly, schools believed that very few parents showed a strong interest in RSE implementation. When parents' views were sought using focus group interviews for the qualitative part of the study, a high level of apathy on the part of parents towards RSE/SPHE was revealed in some schools, although many also believed that schools needed to do more to involve parents in the RSE programme. Indeed, the schools' lack of adequate communication with parents on how RSE was approached was the most frequently cited source of dissatisfaction among parents in the groups. Of interest, though, is that there was unanimous consensus among parents about the importance of RSE.

In her UK qualitative study, Walker (2004) noted that parents greatly welcomed contact with schools regarding sex education, as this facilitates consistency in messages between the home and school. Moreover, she argues that this can provide a useful stimulus to facilitate the discussion of sexual matters with children.

Interestingly, research in the USA highlights a mismatch between parents' preferences regarding sexuality education and the actual content of the sexuality programmes taught in the majority of public schools in the US. Constantine, Jerman and Huang (2007) conducted a random telephone survey of 1,284 Californian parents relating to their preferences regarding sex education policy. The overwhelming majority (89%) stated that they would prefer a comprehensive sex education policy in schools – primarily on the basis of pragmatic concerns. Interestingly, the level of preference for comprehensive sex education did not differ between evangelical Christians and other parents, and varied little based on frequency of attendance at religious services. Moreover, levels of support were high amongst all ideological subgroups, although, unsurprisingly, very conservative parents expressed the least support (71%), whilst moderate/very liberal parents reported the most support (95-96%). All told, this research found uniformly high levels of support for comprehensive school-based sex education across a broad cross-section of parents, stratified by race and ethnicity, age, income, education, religious service attendance and ideological leaning.

Ito, Gizlice, Owen-O'Dowd, Foust, Leone and Miller (2006) examined parental opinion (through an anonymous telephone survey of 1,306 parents of public school students) about sexuality education in North Carolina, a state with mandated abstinence education. Once again, the overwhelming majority (89%) supported the teaching of comprehensive sexuality education, with less than one-quarter of parents expressing opposition to the teaching of any specific topic such as sexual orientation. In fact, only three specific topics were opposed by more than 10% of those parents who supported the teaching of sexuality education in public schools, namely, teaching the risks of anal sex (11%), teaching where to obtain birth control (11%) and demonstrating the correct usage of condoms in the classroom (24%). The small number (9%) of parents opposing the teaching of sexuality in schools did so on a number of grounds, including the fact that 71% believed that sexuality should be taught at home; 6% had religious beliefs which precluded teaching about sexuality and 6% felt that it is inappropriate to teach children about sexuality.

In another US study, Eisenberg, Bernat, Bearinger and Resnick (2008) explored the perspectives of 1,605 parents of school-aged Minnesotans in relation to sexuality education through a telephone survey (with a participation rate of 63%). Once again, a strikingly similar percentage (89.3%) supported the teaching of comprehensive sexuality education, with support high across all demographic categories. In addition, Eisenberg et al. (2008) found that, even among those groups considered most likely to object (Catholics, born-again Christians, and "very conservative" parents) the majority of parents were supportive of the teaching of comprehensive sexuality education (92.3%, 83.2% and 50.6% respectively).

Overall, both national and international research indicates that parents view schools as having an important role in sexuality education and are very favourably disposed to sexuality education being conducted by schools.

2.7 Gaps in existing knowledge

As indicated in the literature review, research from the perspective of parents concerning their provision of sexuality education to their children is primarily derived from survey data and quantitative analyses. Many studies in the USA and a few in Britain have focused on the important issue of evaluating the influence of parental communication on sexual outcomes for adolescents, but, as we highlighted earlier, constructs used to measure this are highly varied, which may in part explain the conflicting results of these studies. In addition, the measures used tend to be very crude, making it difficult to capture exactly what parents are doing or saying that is making (or not making) a difference. For example, findings that talking to children or teenagers about sex or that ease of communication with parents influences sexual outcomes for adolescents (for better or worse) tells us nothing about what kind of talk parents engage in, nor anything about the quality or quantity of the communication.

In addition, an understanding of the subtle processes involved in parent-child communications about sex is very limited because there have been relatively few qualitative studies that have focused specifically on the topic in Britain, and none in Ireland. There are several questions about the process of parent-child talk about sexuality that remain poorly understood. Some of these are as follows: When parents do talk to their children about sex, what approaches do they use? When parent-talk happens, what is the thrust of the message - Does it heavily encourage contraceptive use or is it mainly encouraging postponement or abstinence? Do parents feel that their child is receptive and willing to engage with them in the discussion? Does the receptiveness of the child change as he or she gets older? Do parents who talk to their children about sex give clear messages, and do such messages have a biological or a moral focus? What prompts parents to talk to their children and what (if anything) constrains them? Does the emphasis vary across socio-economic group or parental age? Do fathers and mothers approach sexuality education differently, and are daughters and sons given the same or different messages? Some of these questions have been raised in other studies, but predominantly with adolescents rather than with parents. It is thus timely to explore parents' own perspectives on the issue.

3.0 Research design

3.1 Overview of the research design

This study aimed to explore parents' approaches to communicating with their pre-adolescent and adolescent children about issues relating to relationships and sexuality. The specific research objectives were as follows:

- to explore the diverse range of approaches that parents in Ireland use in discussing issues of sex and sexuality with their pre-adolescent and adolescent children
- to develop an understanding of how parents construct their role as sex educators
- to gain insights into the culture within the home, and to analyse how parents communicate with their children, what they communicate about relationships and sexuality, and the context in which the communication takes place
- to capture any differences in how mothers and fathers communicate with their children in matters relating to relationships and sexuality
- to illuminate possible variations in experiences according to the parents' structural position, such as socio-economic grouping (SEG) and age.

The study employed a qualitative methodology - using the sampling strategies of both purposive and snowball sampling - in which 39 interviews (36 individual interviews, two interviews with two participants, and one with three participants) were conducted with 43 parents (both mothers and fathers) from a variety of geographical locations throughout Ireland. Data were then analysed using modified analytical induction, which will be outlined further on. Given that the perspectives of parents themselves were the primary focus of this research, the use of a qualitative research strategy was deemed to be the most appropriate mechanism to ensure the centralisation of participants' own experiences. However, specific choices had to be made in terms of sampling strategy, data-gathering method, and data-analysis technique in light of the particular objectives of the study.

With regard to sampling strategy, since the research sought to include a broad cross-section of parents from differing SEGs and age groups, purposive sampling - a strategy intent on sampling for a particular purpose - was employed. To this end, a sampling frame was initially drawn up to target parents of both sexes, and to ensure that a range of SEGs was included. Purposive sampling required the research team to monitor the characteristics of those recruited while selection was still underway, to ensure that the sample was sufficiently inclusive of those who were sought, and where necessary, to target those who were heretofore poorly represented. (Details of the logistics of the actual process of sampling are provided later in Section 3.) In addition to purposive sampling, a strategy known as snowball sampling, whereupon participants who agreed to be interviewed would be asked to identify additional prospective participants, was also proposed. Purposive sampling in conjunction with snowball sampling has been the recruitment mechanism used in other qualitative studies of this type (Walker, 2001), and in qualitative research more generally (Morris and Symonds 2004, Nagar and Dave 2005, McPherson 2005), and was deemed likely to be a useful combination, particularly if there were challenges in recruitment.

The most suitable method of data collection for the study was deemed to be the in-depth interview. While evidence derived from all research activities is partial and incomplete, the in-depth interview has the capacity to capture the inconsistencies, inner conflicts and mixed feelings of participants, which more structured research methods may miss (Soss, 2006). Thus, as Soss (2006:143) notes, in-depth interviews have the advantage of being able to reveal 'both coherence and inconsistency' that tend to characterise how humans make sense of their attitudes, values and emotions.

Modified analytical induction, the strategy used for data analysis, is a well-established strategy in qualitative research for analysing data gleaned through in-depth interviewing (Bogden and Biklen, 2007). It begins with sensitising concepts, that is, categories originating in social theory or extant literature to which the researcher has been exposed. These concepts, or hunches, give rise to tentative questions that guide the emerging interpretations. This approach obviates the notion of a mental blank state at the outset of research, which is associated with other types of qualitative research. In addition, concepts are developed inductively from the data. A hypothetical explanation, which emerges on the basis of analytical work, identifies the common elements of cases (Punch, 2005). Modified analytical induction was the data-analysis strategy of choice for this study mainly because, since whole transcripts are compared carefully to other whole transcripts, it offered greater potential to give a more holistic perspective on data, compared to other strategies that involve slicing data at an early stage. We now turn to details of the roll-out of the research design for the study.

3.2 Implementation of the sampling strategy

For purposive sampling, parents were recruited through a variety of channels, primarily through Parents' Committees at schools. In addition, local community-based organisations and agencies were used as selection sites. Initially, schools were targeted as a rich source of potential participants; therefore, the first priority was to identify suitable schools. Using the Department of Education and Science's website (www.education.ie), in conjunction with schools' own websites, a sample of ten schools was identified. The schools were located in a variety of areas to ensure socio-economic diversity and included primary and second-level schools, as well as schools in rural and urban locations. Schools that provided an e-mail address and a contact number were prioritised over those that simply supplied a postal address in order to maximise the possibility of a response.

Permission was sought from the Principals of these schools to contact the Chairperson of the Parents' Association within each school. Each Principal was furnished with a description of the study, as well as samples of the fieldwork documents for potential participants. Where positive contact was established, Principals provided contact details of the Chairpersons of their respective Parents' Associations. Chairpersons received a cover letter explaining the study and were provided with the necessary details to contact the Research Director in the event that he or she wished to clarify any aspects of the study. In addition, Chairpersons received ten Information for Parents packs, to be distributed to parents as appropriate. Each of these packs contained:

- a) an information sheet describing the study and what it would involve for participants (see Appendix 1)
- b) a contact sheet, where prospective participants could provide their contact details thereby enabling the research team to contact them (see Appendix 2)
- c) a self-addressed envelope to facilitate the return of the contact sheet by parents.

On foot of this strategy, positive contact was established with the Parents' Associations of seven schools, all of whom agreed to distribute the Information for Parents packs to parents in their locale. From there, potential participants returned the self-addressed envelopes with contact details, and arrangements were made for an interview. (Details of this process are given in Section 3.3 - Data collection.)

A careful appraisal of the characteristics of the existing sample was conducted at the halfway mark in data-gathering so as to determine the socio-economic and gender characteristics of participants. At this stage the targeted recruitment of those less well-represented, namely those in lower SEGs and fathers, was deemed necessary. In order to secure access to parents in lower SEGs, communication was made with a community development worker of a Resource Centre in an area undergoing community regeneration. Five mothers were recruited in this way; although the community worker had also encouraged men to participate none came forward.

To increase the number of men in the study, male-dominated sporting clubs were targeted. However, efforts to recruit male participants through local organisations such as GAA clubs proved unsuccessful, in spite of follow-up contact with each organisation by the Principal Researcher. More productive, though, was the distribution of contact forms which specifically requested fathers as opposed to the continued utilisation of gender-neutral forms (that is, fieldwork documents seeking 'parents') which had characterised the sampling strategy during the earlier stages of the data-collection process. Ultimately, 11 fathers participated in the study either through schools or by snowball sampling. Thus, because of challenges to their recruitment, fathers remained underrepresented in the sample. Subsequent data revealed that fathers' reluctance to participate may also have been related to their not having seen themselves as the 'educators'. Although the flyer inviting participation contained the sentence, 'Even if you do not feel that you undertake much (or any) sex education with your child, we would still like to hear from you' (See Appendix 2), this may not have been sufficient to overcome potential participants' doubts about their suitability as participants.

Snowball sampling proved to be very successful as a recruitment strategy, yielding 17 participants in total, including four men. (The success of the various strategies in the recruitment of participants is indicated in Table 1.)

Table 1 Sites of selection of participants

Schools		Snowball sampling		Community organisations		Total number of participants
Male	7	Male	4	Male	0	11
Female	14	Female	13	Female	5	32
Total number of participants						43

Demographic details of the sample in terms of SEG, civil status, and age are indicated in Appendix 3. Other characteristics of the sample are as follows: 40 were of Irish origin, two were not Irish-born but had lived in Ireland for many years and appeared very integrated culturally; one woman who was not an Irish national had lived in Ireland for the past five years. Fourteen parents were from rural areas and 29 from urban areas. The number of children that participants had varied from one to seven, and the ages of the children ranged from five years to 27 years. Between them, the 43 participants had 121 children, 54 females and 67 males. The excess of male children over female children that arose entirely by chance had implications for the analysis insofar as more data on the parents' approaches to educating young men in relation to sexuality were available. (All participants had at least one child aged 10-19 years at the time of the interview.)

3.3 Data collection

Parents interested in participating in the research returned the form with their name and contact details, thereby enabling a member of the research team to telephone them. During this conversation, additional information about the project was furnished to parents, and where they agreed to be interviewed, a time and a place suitable to them was chosen for the interview. The majority of parents chose to be interviewed in their own homes. In addition, on a few occasions the proposed strategy of individual interviewing was altered to accommodate the wishes of participants. In the case of one family both the mother and the father chose to be interviewed at the same time. Also, five working-class women from the Community Centre (referred to in the previous section) expressed a preference to be interviewed in pairs or groups. Consequently two separate interviews were conducted with these participants, the first involving two of the women and the second the three remaining women. Although this deviated slightly from the intended interview strategy, these interviews proved a rich source of data and the inclusion of these women helped ensure the incorporation of participants from a variety of social backgrounds, including those from lower SEGs.

A topic guide (see Appendix 4) was used to structure each interview, to ensure a consistency in themes covered. A number of participants indicated at the start of the interview their sense that they had little to contribute, in view of their belief that they had undertaken very little sexuality education with their children; this was particularly the case for male participants. Nonetheless, these participants tended to be very forthcoming with information, and a number commented afterwards that they had found it easy to talk, and had more to contribute than they had anticipated. In addition, a few participants stated at the outset that they never had a direct communication with their children about sexuality; however, these parents nonetheless gave rich descriptions of covert and tacit messages that they conveyed through innuendo and intimation (which are considered in Section 6). An interesting aspect of the interview process was that while participants tended to be confident about the views that they held in relation to sexuality, many struggled to account for why they held particular views, in spite of thorough probing and a good rapport. The reflexive characteristic of in-depth interviewing was also manifested, as several participants indicated that the experience of being interviewed prompted them to think more deeply about their role in the sexuality education of their children.

Data gathering continued until the central topics were saturated, that is, new data were not adding to existing emerging perspectives, and sufficient diversity of viewpoints

was captured. At the end of each interview, a short questionnaire (see Appendix 5) was completed, to provide demographic data about each participant. The questionnaire sought information on the participant's occupation; age bracket; marital status; number of children; the children's age and sex; the ethnicity of the parents and children; and the length of each interview. All interviews were audio recorded (with the participant's permission), and later transcribed.

3.4 The process of analysis

Completed interviews were transcribed verbatim and the process of analysis began. Where the ongoing data-collection process disturbed the early hunches or 'hypotheses' the emerging interpretation was modified and reformulated so as to fit with data. Thus, the analytical process proceeded cyclically with data collection, with interpretation evolving as new data confirmed or challenged the unfolding themes. Therefore, data analysis was an iterative process, involving both deduction and induction: the process was deductive insofar as data were analysed with reference to the researcher's existing theoretical framework, yet inductive insofar as it was open to the discovery of new patterns, themes and categories in data (Patton, 2002). Modified analytic induction thus involved being guided theoretically from existing textual knowledge, coding by relating patterns of speakers' meanings to available theoretical constructs and consequently reshaping theoretical definitions. The steps taken in the process of the analysis mirrored closely those identified by Bogden and Biklen (2007:73) as follows:

- (i) At the outset of the research (after the first interview), a rough definition and explanation of the specific phenomenon was created.
- (ii) This definition and explanation were compared with the incoming data as they were gathered.
- (iii) Amendments to the definition and explanation and interpretation were made if new cases arose that contradicted the definition as hitherto constructed.
- (iv) Cases that were at variance with the emerging interpretation were actively sought.
- (v) The interpretation was redefined and reworked until a universal relationship was arrived at, taking on board each negative case to contribute to the final formulation. This final stage was akin to the notion of data 'saturation', where incoming data were confirming existing patterns, whilst taking account of diversity in perspectives across the sample.

3.5 Ethical considerations

Participants were provided with an information sheet, which outlined the study, what participation would involve for them, the voluntary nature of participation, how the data would be treated, the steps to be taken to protect their anonymity and how to contact the Research Director if they had any further queries. Participants were then requested to complete an informed consent form (see Appendix 6).

In addition, the transcriber was required to sign a confidentiality statement in relation to the content of interviews to which they became privy. All details which might reveal the identity of a participant, their children or any other revealing information were removed from transcripts.

This research received ethical clearance from the Human Research Ethics Committee, University College Dublin.

4.0 Patterns of parental approaches to relationships and sexuality education with children

4.1 Introduction

In this section we explore a range of approaches parents use to discuss sexual matters with their children. While a few parents stated that they had never had a direct communication with their children about sexuality⁴, the topic was approached by the vast majority in one or more ways. For conceptual reasons, we separate out the communication approaches used by parents; however, there was a good deal of overlap in how these approaches were employed by parents and their children, and these strategies tended not to be mutually exclusive. The various approaches include: child-initiated sexuality education; the use of text-based material; intermittent and opportunistic communication; and the wake-up call.

4.2 Child-initiated sexuality education

A number of participants described a higher level of communication about sex initiated by children when they were younger (from toddler stage to approximately 11 years), compared to when they approached adolescence and, indeed, during adolescence. There were several examples of this in data. Of note is the fact that child-prompted discussion of sexuality was not always the result of questions - in one situation, a mother's eight-year-old son's play with a girl (of the same age) centring on "mummies and daddies" and their exploration of "how can we have a baby?" signalled to her and her husband that he was ready to hear some detail about reproduction. Several participants noted that when their children were younger the children would have initiated a communication about sexuality by asking questions. However, from the age of about 11 or 12, this tended to no longer occur; instead, as the children progressed into adolescence the pattern was for parents to take the lead in engaging young people in discussions. There were a few less common instances that we consider at the end of this sub-section.

One example of a younger child initiating communication is the case of a participant who recalled her toddler asking her, without any apparent reticence, why she did not have a 'willy' as he watched her using the toilet. In yet another instance a participant told of how her ten-year-old son had been reading a book he had been given, and without any inhibitions asked her to explain the meaning of a wet dream. In the following extracts, mothers describe the manner in which social inhibitions about discussing sexuality increased as their sons progressed from childhood to adolescence.

I think it is probably an age thing, for him now [aged 15]: It is not like you are talking about the weather. But whereas for a five-, six- or nine-year old, he wouldn't have been aware that it is not a much discussed topic, whereas now...I think it is more age with him now. [No 15, SEG⁵ 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

⁴ As indicated in Section 3.2, parents who reported that they had never had a direct communication about sexuality with their children nonetheless gave accounts of indirect messages about sexuality that they imparted through insinuations and nuances, an issue explored in Section 6.

⁵ SEG refers to the socio-economic group of a participant. The socio-economic group classifications in this study are based on current or most recent occupation and use the scale developed by O'Hare et al. (1991). The highest socio-economic group is SEG 1, and includes higher professionals, while the lowest socio-economic group is SEG 6, and includes unskilled manual workers.

But, I mean, he well knows about the birds and the bees and that he would have asked when he was younger, different questions, but certainly not at 13; he wouldn't be asking his mother - he'd be too embarrassed. [No. 27, SEG 3, mother of 6 children (M: 25 yrs, M: 23 yrs, F: 18 yrs, F: 15 yrs, F: 13 yrs, M: 13 yrs)]

Most of the child-initiated communications about sex in this regard arose out of the child's curiosity about conception (the 'How are babies made?' questions), anatomy and physiology. This often occurred when the mother was pregnant with a second or subsequent child. While most child-initiated communications of this kind were fairly generic questions of the child's about how the body worked, there were occasional exceptions where the child sought information on more intricate aspects of sexuality and sexual behaviour. In one such case, a mother described how at around the age of nine and a half, when her daughter had begun receiving some sexuality education at school, she (the mother) insinuated that she and the daughter would need to have a 'chat' about sexual issues at some point. However, the daughter actually approached her mother and requested that they have the 'chat', and that all information would be given in one session and not 'dragged out'. The daughter even asked her mother how many men she had ever had sex with and whether or not she had used contraceptives. The child also asked about the contraceptive pill, about sex per se; for example, whether it hurt, how often it happened, and how many partners somebody could have. The girl also stated that if she had any questions, she would approach her mother with these. The mother's narrative indicated that it was the child who led and controlled the discussion. As it transpired, the mother indicated that in the eight years since that occasion the daughter rarely raised the issue again and became more secretive about aspects of her life as she progressed through her teenage years. The information imparted in this mother and daughter chat was unusually detailed; however, by the age of ten or eleven children who requested information tended to pose more sophisticated and focused questions than those posed in the early childhood years. As will become clear in Section 5, though, very few children after the age of about 11 years appeared to actually initiate any discussion related to sex with their parents, and very few ever raised questions on the issue. Thus, a strong pattern was for children in pre-adolescence to initiate topics pertaining to sexuality with their parents, and for the parents to foreclose in order to protect the child from detailed explanations about sexual intercourse. In adolescence the situation was reversed, whereupon parents tended to initiate a dialogue about sexuality and the teenager stalled the communication.

There were, however, a few exceptions where adolescents – usually reticent about the subject of sexuality with their parents – did initiate communications with their parents about sexuality, although this was usually in a light-hearted way. This tendency came through more strongly in the interviews with the five mothers who were from the lowest socio-economic group, and who narrated experiences suggesting that their adolescents, even in their early teens, brought up the issue of condoms without prompts from the parents. An example is as follows:

They went into...the men's toilets and they are messers, like, and his little friend was ... laughing and we came and said, 'What is going on?' And he said, 'He [younger friend] thinks that is very funny.' And I said, 'What is funny, son?' And he said, 'The condom machine, but he [younger friend] doesn't even know what they are for, ma. Will we tell him?' 'No son, I tell

you so you know but he would have to be told by his mammy.'...If he [participant's son] was in his dad's [parents were estranged] he'd say, 'Ma he has condoms in his drawer!' And I say, 'He is allowed to, son.' [No 35, SEG 6, mother of 2 children (M: 14 yrs, M: 13 yrs)]

Interestingly, the openness exemplified, albeit superficially and in jest, also registers an acknowledgement on both the child's and the mother's part that the father is sexually active. This openness and acknowledgement (coming from the child) that parents are (or were) sexually active is also exemplified in the following extract from a woman in SEG 6.

I just remember them saying, and she was sitting with her friend, the two of them were after doing it [the talk at school] and then she turned around and she said, 'Oh my God! My ma did it [had sex] 3 times!' They came home and told me all the stuff and they are doing stuff in the [youth resource centre] club as well. [No 36, SEG 6, mother of 4 children (F: 15 yrs, M: 13 yrs, M: 8 yrs, M: 5 yrs)]

Child-initiated dialogue about sexuality was also evident in the following quotation in which a participant (also from a low socio-economic group) reflects on when her son was around 12 or 13 years old:

And he came home and he was after saying to me, 'I got my sex thing today' [talk at school]. And I said, 'Oh did you?'...So he goes, 'The teacher said it's ok, you know, in the mornings when you wake up and it [penis] is hard and it's ok to tell your mother.' And I went, 'Fucking hell!'...He would have been about 12 or 13. [No 38, SEG 6, mother of 2 children (M: 15 yrs, M: 11 yrs)]

These examples of child-initiated sexuality education from the age of 12 years were the exception rather than the dominant pattern, yet they are nonetheless important to acknowledge. Of note is that in both of the above examples, school-based sexuality education served as a prompt to discuss the topic at home, an issue to which we will return in Section 6. The issue of openness to discussing sexuality between parent and teenager will be considered in greater detail in Section 5.

4.3 The use of text-based material

A number of parents reported having given reading material in the form of (what they believed to be) age-appropriate books to their children to read, usually between the ages of 10 and 13 years, although in some cases this happened with children as young as five or six, with simpler and less graphic texts. The details contained in these varied. From what parents described, some of the more elementary books offered very little detail about sex and contraception but rather focused on the changing body. Some participants, including middle-class parents, did not give reading material to their children because they believed that the children would not read it. A few parents had placed a book in the child's bedroom, but doubted that the child had read it. A few others read books about sex and relationships to the child when they were about nine or ten years old, as they were unsure as to whether or not the child would read them independently. A few parents purchased reading material for their child around the time at which they received the primary-school 'talk' on sexuality (see Section 6 for details of school-based sexuality education).

One mother noted how she felt that a book (which was followed up with the answering of questions arising from that) was a useful tool to facilitate her discussion of sexuality with her son because she felt that "it was very hard to know" how to deal with providing him with sexuality education, unlike her experiences with her daughters.

4.4 The talk

The traditional notion of sex education is associated with 'the talk' – a once-off communication where a parent deliberately sets aside time to discuss sex with the child – the so-called 'birds and the bees' lecture. Anecdotal accounts, and indeed reports from some parents in the present study, suggest that in previous generations if parents did undertake sexuality education with their children it was through this strategy. In the present study, very few parents reported giving 'the talk', although a couple of fathers believed that their child's mother may have done so. Indeed, most indicated without prompting that they had deliberately not used this approach, insofar as they had not sat the child down (as some had themselves experienced), but opted for an intermittent, more fluid approach based on an 'openness' philosophy. For one mother, for example, there were no issues concerning a once-off "talk" – trying to decide at a particular age to discuss matters with her children – because sexuality "wasn't a closed-off area". Another mother characterised their house as very open about sexuality – a constant dialogue – thereby obviating the necessity of a once-off discussion:

We talk about it whenever it comes up. We don't just take the child aside...Everything is open...there is always a talk somewhere along the way in our house. [No 6, SEG 4, mother of 5 children (F: 19 yrs, M: 16 yrs, F: 14 yrs, F: 13 yrs, F: 7 yrs)]

This, she reported, created a relaxed atmosphere around discussion of sexuality because talking about sexuality was the norm as opposed to an atypical occurrence. Therefore, rather than relying on their children to initiate discussion, these parents reported that they addressed the issues they wish to cover when the opportunity arose. (However, a more detailed analysis of assertions by parents that sexuality is an 'open' issue suggests that the concept of 'openness' is more complex and problematic than initially appears; this is considered in Section 5).

There were a few exceptions, where approximations to the traditional talk were given. One participant described how she made a conscious decision to begin a discussion of sexuality when her children were 13 years old, something which turned out to be an uncomfortable experience for both her and her children:

I said that we had to discuss something and, probably, it was the wrong way to do it because they were embarrassed and so was I...I feel I approached it in the wrong way. [No 3, SEG 3, mother of 4 children (F: 23 yrs, M: 22 yrs, F: 19 yrs, F: 15yrs)]

This led her to attempt to facilitate a more ongoing discussion as opposed to a formal, once-off, isolated discussion – a more favoured approach among parents and a practice that will be considered in greater detail in Section 5. One father indicated that he believed that his 13-year-old son knew the mechanics of sex and if there was going to be a big talk it would concern the emotional side of growing up in a male peer group, an issue to which we will return in Section 7.

Most mothers did initiate discussions about periods with their daughter at around the age of ten or eleven, usually before the girls began menstruating, but the level of detail varied. The timing of any discussions about sexuality, including menstruation, in terms of the child's age and maturity was a concern for several parents, as some were conscious about giving too much information at too early a stage. Issues about the content and timing of sexuality education are discussed in greater detail in Section 6.

4.5 Intermittent and opportunistic communication

Intermittent communication refers to a strategy whereupon the topic of sex was introduced by parents at spaced intervals, rather than through a once-off session (popularly referred to as 'the talk'). As one mother put it:

Not a huge amount of the blatant facts, just little bits as she was getting older. [No. 1, SEG 2, mother of 1 child (F: 17 yrs)]

Every now and then bring it up so that they know you are thinking about it, without having the conversation every weekend. [No. 26, SEG 1, father of 3 children (F: 18 yrs, F: 15 yrs, F: 12 yrs)]

One parent described having read part of a book intermittently with her ten-year-old son (who was a reluctant reader) because she believed that the child would be more comfortable with that approach. Others described 'touching base' every now and again, which was often prompted by an event or experience in their lives, such as an unexpected pregnancy of a young woman in the neighbourhood. As one mother reported:

It is always in the context of something happening, because he wouldn't be the, 'Let's sit down and have a decent chat'. [No 2, SEG 2, mother of 2 children (M: 17 yrs, M: 14 yrs)]

In a few cases participants indicated that, rather than using contextual issues to open a (two-way) discussion about sexuality, these were used as an opportunity for the parent to transmit his or her own value judgements to the child.

So I've always found in getting over the messages about drug abuse or sexuality or things like that I have tended to, rather than, kind of, state facts, just, kind of, maybe use other people as examples, or when I see situations arising, say, 'God isn't that desperate now and that is what happens to people who do x, y and z.' So whether that is a good way or a bad way, certainly I would have been embarrassed, I'd say, to approach it in a more formal manner...But certainly when I got the opportunities, I kind of gave him my opinions and that was more or less...It saved the 'Sit down there and I'll give you a little lecture.' [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

Similarly, another mother observed that while she might comment about content on television, this was not something which was elaborated on, nor did she use it as a prompt for discussion with the children. By contrast, other parents made remarks to invite an opinion from their child. One participant described 'throw[ing] out a comment and see if there are any bites or any reaction (No. 26)'. Another used relevant television or radio topics as triggers for discussion.

Maybe a situation that I thought it was appropriate, that maybe might have come on the TV, or if we were driving, and something came on the radio I would kind of say, 'What do you think of that?' or, 'Do you know how to go about this?', you know, different ways. But there has never been the, 'Sit down and had the talk', as to how the whole 'whys' of it, you know. [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

(As will be indicated in Section 5, the response from teenagers usually tended to be minimal, as the young people tended to be far less keen to talk about sex than their parents.)

A few parents mentioned broaching issues that they were aware had been raised at school. Another referred to the fact that the family had regular visits to the farm of their extended family, and animal reproductive behaviour sometimes came up in conversation from the time the children were very young, facilitating an opportunity to explain human reproduction. In a similar case, a mother indicated that her son's interest in wildlife afforded her the opportunity to, the odd time, bring it round to real life" (No. 40).

Thus a deliberate drip-feeding of information to children to avoid a major once-off gush of information was used to raise issues pertaining to sexuality when a time, occasion or moment in their social milieu presented a favourable chance to do so.

However, when probed, parents revealed that this occasional, often 'opportunistic communication'⁶ (Rosenthal, Feldman and Edwards, 1998) rarely developed into a candid, detailed two-way discussion, predominantly because of the way in which the younger people tended to close down the communication. Furthermore, the substance of the interaction was confined to more generalised information such as not getting pregnant or avoiding an STI by using a condom. The content tended to circumvent the erotic dimensions of sex, such as how to manage sexual arousal, how to indicate refusal, details of using contraceptives or engaging in oral sex, dimensions that might involve visualising the sexually aroused body. In this sense, parents restricted their education to a surface knowledge of sex and sexuality and avoided the deeper levels of knowledge that encompassed details of sex eroticism and the finer workings of the body and associated emotions, an issue further developed in Section 6.

4.6 The wake-up call

We use the notion of the 'wake-up call' to refer to a particular type of reactionary sexuality education in which communication about sexuality was prompted by an occurrence relating directly to the young person's behaviour or lifestyle of which the parents had unexpectedly become aware, or a sudden heightened awareness of their own responsibilities as parents.

An example of this is a mother who discovered that her 16-year-old daughter had had a house party in her own absence after she noticed that objects and furniture in the house had been rearranged (slightly) and her suspicions led her to investigate matters further. Her investigation led her to empty bottles of alcohol (carefully concealed far down in

⁶ The term 'opportunistic' in this sense is well established in health education and disease prevention scholarship, and has been associated with taking unplanned opportunities as they arise to engage in preventive health care such as alcohol education (Williams, Brown, Patton, Crawford, and Touquet, 2005), diabetes prevention (Hawthorne, 1994) and smoking cessation (Scott Lennox, Bain, Taylor, McKie, Donnan, and Groves, 1998). The term is conceptually close to and often used in conjunction with taking advantage of 'teachable moments' - moments when chances occur or opportunities arise to educate.

the recycling bin) and to the discovery of a sealed (unused) condom that appeared to have fallen down between furniture by the stairs. The daughter denied that the condoms were hers and said that they must have fallen out of one of her friend's handbags, and steadfastly denied that any of her friends had gone upstairs; however, the participant indicated that it was the first time that she began to think that the condom could have belonged to the daughter. The mother, who stated that she was 'shocked' by her discovery, reported having had a 'very vocal discussion' with her daughter about sex and pregnancy when she discovered that her daughter had been drinking. In spite of this, at the time of the interview, the participant reported that she was fairly sure that her daughter had not yet had sex - a very common presumption of parents, as will become clear in Section 5.

In another case, a family was holidaying in France when their 17-year-old son, who was very evasive about his social life with his parents at home, never mentioning anything about possible girlfriends, unexpectedly befriended a young woman who was two years his senior on holiday. The following extract indicates how the visibility of the young woman's association with their son whilst on holidays instigated anxiety about his behaviour and suddenly prompted them to initiate a discussion about sexual safety with him.

Because even after the night he went out in France with your woman...he appeared back at two o'clock to tell us he wasn't coming back until half three, which we thought was quite strange. And the following morning [husband] was sort of saying, 'Ah Jesus! I think he'll need a talking to,'...because it was the first time...he has lots of female friends and I have watched him being in a mixed environment, and he would be very unaware of the females, who are much more aware of him. [Husband] said, "If you are getting up to anything, you know, we can't stop you; we are not going to be looking over your shoulder, but you make sure you are safe and protected and everything is there." [Husband] has even said to him, 'I'll buy the bleedin' condoms and leave them there for you, but Jesus, watch what you are doing.' [No. 2, SEG 2, mother of 2 children (M: 17 yrs, M: 14 yrs)]

(The timing of parental sexuality education with regard to adolescents becoming romantically involved will be discussed further in Section 6.)

A very strong feature of undertaking the interviews for this study was the number of participants who were alerted during the discussion to a heightened sense of awareness of how little they had communicated with their children about sex and sexuality. The topic of contraception more than any other was one that set parents really thinking about what they had indeed covered with their children.

It is funny because I am kind of shocked, now that you set me thinking: God, did we discuss condoms and that?...It is interesting because you are making me think of things like, 'Oh God I never said that to him.' [No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

I suppose when you actually get to talk about it sometimes there are aspects to it like, 'Gosh I really need to wake up; I should actually get a little bit more of a handle on that, that they are growing up so fast that you don't...catch up!' So I think I know that a little bit of a wake-up call is needed sometimes, as a prevention rather than having to deal with the problems after the fact. [No. 28, SEG 3, mother of 3 children (M: 15 yrs, M: 13 yrs, M: 10 yrs)]

Well I haven't [talked to her eldest son about contraception]. But, I mean, it is interesting that you ask me these questions because I haven't had a formal chat and I wonder should I? [No. 11, SEG 2, mother of 2 children (M: 14 yrs, M: 11 yrs)]

A father (No 26), who had left sexuality education predominantly to his wife, stated that he was prompted by the interview questions to check with his wife as to whether or not she had discussed with their daughters the responsibilities of caring for a baby in the event of an unplanned pregnancy, as well as a number of other issues.

Wake-up calls to parents about their child's possible sexual activities were reportedly far fewer than wake-up calls about their engaging in underage alcohol consumption (which were common). This may be because the chances of getting caught drinking alcohol are considerably higher, as indicators such as the smell of one's breath or holding parties where alcohol is consumed is much more visible and detectable than sexual activity.

Section 4: Key points

- Data indicated that the majority of parents approached the subject of sexuality with their children using one or more approaches.
- Parents' accounts suggested that the approaches used were: child-initiated sexuality education; the use of text-based material; intermittent and opportunistic communication; the wake-up call.
- A strong pattern was for children in pre-adolescence to initiate topics pertaining to sexuality with their parents and for the parents to foreclose in order to protect the child from detailed explanations about sexual intercourse in particular; however, in adolescence the situation was reversed, whereupon parents tended to initiate communications about sexuality and the teenager foreclosed.
- There appeared to be a greater openness on the part of adolescents in talking about sex among those in the lowest socio-economic groups. This tended to be at a jovial and light-hearted level.
- A number of parents reported that they provided their children with reading material related to sex and sexuality. However, this, like child-initiated sexuality education, tended to be the approach used with younger children.
- Although some parents reported that they received 'the talk' (a once-off communication about sex) when they were growing up, very few reported using it as a strategy with their children. Most parents indicated that they had deliberately avoided this approach.
- Those parents who had initiated a once-off formal 'talk' did not perceive it to be a successful approach and tended to revert to a more informal ongoing discussion about issues of sex and sexuality.
- Parents used opportunistic approaches to discuss sex and sexuality with their children. Opportunities identified included events relating to other people, situations arising on the television or following up on issues that had been discussed at school.

- A number of parents were prompted to consider sexuality education with their adolescent children only when they were given a 'wake-up call'. This was usually instigated by parents suddenly becoming aware of an event or occurrence in the young person's life that potentially had implications for the teenagers' sexual behaviour.

5.0 Social processes, practices and attitudes mediating parental sexuality education

5.1 Introduction

In this section, a range of factors mediating sexuality education between parents and their children is explored. The section begins with an examination of the cues that parents use to determine a child's readiness for sexuality education and the appropriate level of detail to communicate. This is followed by a consideration of the concept of 'openness' in child-parent sexuality education, a notion that has featured in previous research, as indicated in the review of existing literature. Based on participants' descriptions of interactions with their adolescents, we then explore young people's responses and reactions to their parents' attempts at sexuality education. The issue of which party – the child or the parent – controls the interaction is also examined. Since parents had far more to say about sexuality education with their adolescents compared with pre-adolescents in this regard, this part of Section 5 is predominantly about sexuality education involving teenagers. We then move on to consider how parents view their adolescents' character, associated behaviour and peer group, as these appeared to have a bearing on the provision of parental sexuality education. Because the practice of parental sexuality education also appeared to be heavily influenced by what parents believed their children learnt at school, the focus then shifts to parents' perspectives on their role in sexuality education relative to that of the school, and on the extent to which they were aware of and engaged with school-based sexuality teaching and learning. Before closing the section, parental communications about sexual safety are briefly considered.

5.2 Reading and knowing the child's readiness

When asked initially how they approached sexuality education with their children, many participants were quick to point out that they had used different strategies because each child was different. Participants described different personality traits and abilities of children that they invoked when deciding the format that sexuality education should take. For example, some parents identified their children as reluctant readers and were conscious that any books or text-based material on sexuality would remain unread. Some also described a more open relationship with one child compared to others because of their view that one child was more confident or outgoing than another.

A few parents observed that in their early teens their children were beginning to demonstrate an interest in going to discos and this signalled a consciousness that they were developing sexually. A participant who had foster children as well as birth children noted that she did not feel the need to initiate discussion of sexual matters with her birth child before the age of 13 because that girl "didn't go out much". However, this was something she addressed with the foster children in her care at an earlier age (11/12 years of age) because of their exposure to an increased likelihood of sexual activity at the discos they frequented. Another mother indicated that her second son was not as 'clued in' as the older one, and was "very young in ways". She felt he did not have an interest in the opposite sex, which others at his age might display. The view that sons in their early teens were not that interested in sexual matters compared with either girls of the same age or their male peers was voiced by a number of parents, an issue that will be considered in further detail in Section 6. Another participant confessed that she did not trust her

youngest son (aged 15) as much as she had trusted her older, more reserved sons at that age, and thus she engaged in more dialogue about sex and relationships with him than with the others.

A few parents observed how children absorb particular kinds of information with different levels of understanding. For example, one woman, who had reservations (and described herself as being horrified initially) about her child having watched Roddy Doyle's *The Van* at the age of five and a half while being cared for by his father, consoled herself that children take different meanings from information depending on their level of maturity. However, she nonetheless had concerns that the child was exposed to "more information than he needed".

I mean any questions they ever asked, you generally try to answer, but there were certain things I felt maybe they were too young for and maybe you would veer away from. [No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

The participant went on to explain the type of information that she believed would be inappropriate for a child of five and a half, and her rationale for withholding information, namely, her uncertainty as to how the child might respond and the child's limited capacity to understand particular issues:

No. 7: Well I would have thought at five and a half that I wouldn't have gone into every, and I know some people do, but I wouldn't have gone into every detail of how the baby was going to be born...I don't think that a five and a half year old needs to know that kind of detail.

Int: Do you think it would be too much?

No. 7: Yeah, I don't know, to be honest, but there is information that's appropriate for children at certain stages, it needs to be phased. You don't know how they might react...and there's only so much they'll understand anyway. [No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

As will become clear later in this section, while the strongest theme across data was for parents to invite openness about sexuality, parents did sometimes impede discussions about sexuality when confronted with the persistent questioning of younger children, whom they felt were not ready for certain information, particularly on sexual intercourse. In one case, when referring back to when her son was five years old and she was pregnant with her second baby, one mother revealed her reluctance to share extensive details regarding sexual intercourse. She stated that while she "always included him" in the pregnancy, she did not tell him how that the baby "got there". Instead, she noted that the fact that she had a caesarean section for the delivery made things "very easy" as she was able to reference her scar and say that "the baby comes out of the stomach". Consequently, while her pregnancy acted as a prompt for the discussion of sexual matters, this mother chose to limit the content of the information provided to her son. Although in the course of the interview she asserted that younger children (of eight years of age) are not too young to be told about sex "if they ask", and contended that she had "always been dead honest" in answering her children's questions about sexuality, this professed desire for openness was nonetheless couched within a discourse of child-readiness. There was a simultaneous desire to limit the amount of information provided to the child based on her assessment of the child's readiness to hear certain details and consequently no details about sexual intercourse were provided to the child.

In a further example, a participant similarly describes her six-year-old's curiosity as to how she became pregnant with her second child, and how she and her husband were reluctant to offer a full explanation as to how the pregnancy arose.

You see, I was kind of going, 'Daddy puts stuff into me and, you know, fertilises the egg and the egg kind of,' you know, short and quick and I didn't go into much detail...and he took it, he was only six, but he took it as that, and then it was a matter of two months later and said, 'How did daddy?'...And I thought I had gotten away with it. He said, 'Is it in your mouth?' and I said, 'No!' ...and then two months later, 'Whereabouts does he actually put the stuff?' And I thought, 'Oh God!'...I said to [husband], '[son] wants to know about how the baby got into my belly'. And he said, 'Grand, you don't have to answer that, he is only six; he is fine.' You know, and that was his attitude, you know: he is only six. [No. 15, SEG 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

The contrast between this child's openness and eagerness for an explanation about a sexual matter and the blocking techniques employed by adolescents to close down any discussion on sexuality (that we consider a little further on) is noteworthy.

In addition to assessing an individual child's readiness for information, a few parents noted how educating a second or subsequent child was sometimes different to educating the first. They described how their second and subsequent children had been exposed to communications with the eldest child, and thus may have received a good deal more information at an earlier stage from secondary exposure. For instance, one parent described her youngest child as more "world-wise", having been exposed to issues concerning relationships and sexuality from her siblings. Others reported being somewhat more relaxed about the sexuality education of second and subsequent children, which may imply that these received less parental sexuality education than did the first child.

5.3 The quest for a culture of openness

One of the most consistent themes across data was the notion that parents wanted to foster good and democratic relationships with their children. Parents often prided themselves on the culture of openness about sexuality that prevailed in their home. This culture was often contrasted with their own experiences of a silence about sexuality in interactions with their own parents and their perceived ignorance about sexual issues during their own adolescence. One respondent described the large generation gap between herself and her parents, while others reported the more authoritarian attitudes of their parents compared their own more informal approach to parenting. Another parent's desire for openness stemmed from the fact that while her parents did "everything" with her, nonetheless, they "never, ever" talked about sexual matters. In fact, the extent of her own sexuality education was to be told that one day she would have blood on her underwear, and once she did get her periods, her mother advised her to never "let a boy come near you". The lack of sexuality education in her own childhood led her to vow that she would be open with her own children. As indicated earlier, for those who recalled having had some sexuality education from their parents, their recollection was of the once-off 'talk', which tended to be an uncomfortable experience. One man indicated he would like his children to have a better experience of sexuality education during adolescence than he himself had.

This culture of openness was generally characterised as imparting to children the idea that they should feel free to ask questions or to raise any issues about sexuality if they so wished. Another aspect of this openness was to invite their children to come to them should they be confused or upset about any issue on the subject of relationships or sexuality. One parent characterised information as power; consequently, while she did not wish to "ram it down their throats", she stated that any issues concerning sexuality that her children wished to know about, she would discuss "in full detail".

In many cases with adolescents, while parents spoke about openness, the latter went on to describe situations where very little free-flowing dialogue about sexuality subsequently occurred between themselves and the young person. While there were a few exceptions (that were considered in relation to child-initiated sexuality education in Section 4), data overall suggest that parents (rather than young people) were more likely to raise the topic of sexuality and also more likely to want to pursue it. Thus, a common pattern was for parents to indicate their willingness to respond to any requests for information or guidance coming from the young person.

It's a case of, yes, look, as parents we don't know everything but you are our children and we do care for you and while it might be a thing that you feel comfortable talking to your friends about, that's normal, but do keep us in the loop. [No. 26, SEG 1, father of 3 children (F: 18 yrs, F: 15 yrs, F: 12 yrs)]

However, an overwhelming finding of the study was that teenagers did not tend to raise questions with their parents, nor did they take up their parents' offers of support, guidance and explanation. This seemed to occur as much in cases where parents saw themselves as being very liberal and approachable as where they admitted to being fairly conservative.

[Husband] is really laid back; he wouldn't have a problem discussing it with her, he would be very, very good and he would be very, very sensible; he wouldn't have a problem discussing it with her. But she would have to come to him and if she asked he would be very good, he is very good like that. He wouldn't have a problem explaining anything to her. But I don't think she would go to him; like I said, she didn't think really of coming to me either, I brought it up to her. No, like, she never really did ask questions [No. 16, SEG 5, mother of 2 children (F: 21 yrs, M: 14 yrs)]

It was quite common for parents to reveal that they were reluctant to become strongly active even in merely imparting information (let alone expecting a discussion) about sex and sexuality because this would jeopardise the very culture of amicability that they were attempting to create. Parents' narratives are littered with accounts of how delicately they handled discussions about sex and sexuality.

I would imagine coming in too heavy you would get shyness and sort of scare them off coming to you. The idea is, as I have said, to leave the door open and let them, if there is something that they want to talk about, do. [No. 26, SEG 1, father of 3 children (F: 18 yrs, F: 15 yrs, F: 12 yrs)]

He just wouldn't talk to you about anything like that; I think he [17-year-old] is at that stage where...I can't remember what he was reading, about something, and he was telling me about it and I was quite surprised, but generally I wouldn't push. I feel if sometimes I ask

a question they kind of get annoyed and whatever and you just don't push it. [No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

I am careful about what I say unless it is in a situation where I am invited in. [No. 14, SEG 6, father of 3 children (M: 22 yrs, F: 19 yrs, M: 17 yrs)]

Sometimes it is kind of, with girls especially, you don't want to be, 'Ah! I told you so', you don't want to be like you are preaching and you are constantly at it, and that if the situation comes up, fair enough...So you kind of have to, when the opportunity is there, go for it, but go for it very, very unknown to her that you are trying to get something across to her conversation wise - that is the best way to do it. [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

Thus, by and large, while a few parents admitted to having avoided any reference to sexuality with their children, the vast majority seemed far more willing than their teenager to be open about it. The culture of openness was problematic insofar as it required careful negotiation on the part of parents and demanded that they tread sensitively and carefully read the young person's responses. Some parents described their fear that openly discussing sexuality could serve to bring down barriers to communication completely if their child did not wish to engage in the discussion. In this sense the culture of openness was more akin to a pseudo or a superficial openness. In a large number of cases, parents assumed that their adolescent had acquired knowledge about the physical and emotional components of sex and sexuality through school-based sexuality education and theirs was a supportive role. This issue will be discussed further in Section 6.

In messages about sexuality from parents, except personal safety messages, information was sometimes conveyed using humour, particularly around mother's periods, menstruation in general, or the use of condoms. A few parents noted that at the age of around 11-13 years (around the time when they got the talk at primary school), their sons tended to treat sexuality with outward displays of joviality, 'not taking it seriously' or treating it as 'a big laugh'.

5.4 The exercise of control in information management in parent/child discussions about sexuality

Parents often had good reason not to push discussions about relationships and sexuality, as many had first-hand experience of communication barriers being pulled down if they tried to introduce a topic for discussion. To a large degree the young people controlled the amount and status of the information imparted when parents communicated with their teenagers. Two strategies in particular were employed by the young people: (1) Claiming to know all this information already and ridicule the parents' attempts to educate in order to close down any further communication; (2) Terminate the communication by indicating an unwillingness to discuss it and/or by physically absenting themselves from the immediate situation.

5.4.1 Claims to already have a full knowledge of sexual issues

A couple of parents described situations where their adolescent challenged their own (the parents') knowledge about issues relating to sexuality or relationships by insinuating that the parents 'knew nothing' about the matter. In several other cases, the young person attempted to foreclose on any discussion about sexuality by claiming full knowledge of the topic already.

[Son] would say, "You don't need to talk to me about that. I know all about that." [No. 39, SEG 5, father of 2 children (M: 16 yrs, M: 12 yrs)]

"Mummy, there is no need for this - we have done it at school." [No. 3, SEG 3, mother of 4 children (F: 23 yrs, M: 22 yrs, F: 19 yrs, F: 15 yrs)]

The younger son of another participant returned the puberty book she had purchased for him, stating that "I am not reading that. I know it all." Moreover, she and her husband had each tried to address sexuality matters with him but, in the words of his mother, "He doesn't want to know."

One mother described how she attempted to engage in conversation about contraception with her older boy, relying on jokey, throw-away comments to offset embarrassment. For instance, coming up to Christmas, she told him "I'll be throwing in a few condoms this year into your stocking, just in case you need them." His response - indicating that "everyone knows" they can be purchased from the Lidl beside the school - effectively shut down the conversation - a response that did not surprise his mother as she knew "he hates talking about it". Nevertheless, through this off-hand comment, she was able to elicit from her son that he was aware of where he could obtain contraception.

5.4.2 Adolescents demonstrating an unwillingness to discuss the topic

Other strategies were also used by adolescents to foreclose on discussions about sexuality. Non-verbal communication such as physically moving away was one such mechanism they used.

Well he'd listen but he'd wander off when he decided he had enough. He was very capable of letting you know, "Okay, too much information now and I'm heading off." Even, like, the famous sex talk they get at school and, "How did it go today?" "Fine, I'm not talking to you about it." [No. 2, SEG 2, mother of 2 children (M: 16 yrs, M: 12 yrs)]

Int: Were you hoping this [finding pornography in his room] would be a little opener for a chat?

No. 15: Well he'd just walk off, kind of, he thinks I am a little bit mad sometimes...and he was like, "Go away, what are you on?" So I was like, "Okay." That was kind of the sex talk we had. [No. 15, SEG 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

Becoming irritated or annoyed, or alternatively ridiculing the parents' attempts to raise the issue were other strategies teenagers used to bring about foreclosure.

Int: And condoms, would that ever have come into it, do you remember?

No. 7: Do you know, I can't. I wouldn't say it now to him because he'd...I mean we do get on very well in a way, but he is just very hormonal...I feel if sometimes I ask a question they kind of get annoyed and whatever, and you just don't push it.

[No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

Nobody ever asks me about anything - they just laugh if I try to say it. [No. 27, SEG 3, mother of 6 children (M: 25 yrs, M: 23 yrs, F: 18 yrs, F: 15 yrs, F: 13 yrs, M: 13 yrs)]

For one parent her children's comfort level with discussions was linked with the nature of the discussion: they were happy to talk about the biological aspects of sexuality, such as periods and puberty, but "not so much about sex and sex education". Indeed, period talk between mothers and daughters and discussions about bodily changes in general were areas that appeared to result in least resistance in attempts to engage adolescents. Other topics such as contraception tended to be heavily impeded.

Another parent described his son reverting to a "brooding silence" when something in his life was upsetting him, but to which his parents were not privy. One mother reported that her 17-year-old son would not discuss any of his life experiences at all with his parents, and her impression was that they (the parents) were an embarrassment to him and he did not want them interfering in his life. However, their 14-year-old son was more communicative.

As indicated in the literature review, Solomon et al.'s (2002) study found that teenagers recognised that withholding information about their private lives from their parents afforded them some level of control, as information could be used by parents to reassert their authority in ostensibly democratic circumstances. To an extent, there was some evidence in the present study that parents might indeed do this. In a few narratives, there were suggestions that parents analysed any snippet of information that they did get from their children and pondered as to what this might mean in terms of their child's behaviour, something that a fobbing-off by the young person might not have precipitated. Examples of how such information got parents thinking are as follows.

He [son] ...got to his first disco about six months ago...And I said to him, "I am going to say to you what I said to [daughter]...if you are going to be kissing any girls just let it be the one." And I was expecting the response, "Don't be silly I am not going to be kissing any girls." But the response I got was, "Ok. I'll remember that." And I thought, 'Emm, he has been thinking about it, he has taken it on board that there is going to be girls and this may happen.' [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

Sometimes [daughter] won't actually say something, but she will kind of skirt around it where, when you think about it, 'Why is she saying that?' Gets you thinking. [No. 30, SEG 2, mother of 2 children (F: 11 yrs, F: 7 yrs)]

While the delicate management of an open communication style was a dominant feature of data, this does not imply consistently one-way communication from parent to child. Some parents described circumstances where their children were more responsive to dialogue than others. One participant reported that after the fifth-class talk her son did make comments to her about how awful it was. She also felt that she could be more open with both her sons after they had had the school talk, because she was aware that they had been exposed to instruction on the biological aspects of sex. She mentioned, for example, her freedom to be candid with her sons about period pains if they enquired about her apparent discomfort. Other participants described specific children as non-responsive to sexuality education, while others were more challenging of their parents' opinion; however, challenging responses were far less common.

5.4.3 *The regulating impact of the young person's sensibilities*

A few parents described instances that might have presented opportunities to discuss sexual matters, but they were worried that introducing the topic would upset or embarrass the young person. In this way the sensibilities of the young person had an impact on how sexuality education was conducted. The delicacy of the situation sometimes meant that while parents had good intentions of engaging in sexuality education with their children, they sometimes did not follow through on these intentions (as the first quotation suggests), or held off on providing aspects of sexuality education until an issue or opportunity arose (as indicated in the second quotation).

My eldest is very reserved, and I thought that maybe he'd feel embarrassed if I spoke to him. Very often, you know the way, in your head you sort of say, 'Oh I'll tell him that, I'll tell him that', and then I never actually did. [No. 21, SEG 2, mother of 3 children (M: 25 yrs, M: 21 yrs, M: 16 yrs)]

Int: And how will you judge when is the right time do you think [to discuss contraception with her 15-year-old daughter]?

No. 40: Again, I think it will just come out of nowhere; it will just come out of something totally unexpected and it will just be... Like, I am very much aware that these things have to be talked about and I put it to the back of my head and when something arises that is when I will go for it. [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

While in the above examples, the mothers' approaches to sexuality education may be described as passive and haphazard, they had nonetheless thought about the issue. In another situation, the mother reported that it was particularly important to judge carefully the appropriate moments to raise issues of sexuality with her son, given his reluctance to engage in discussions of that nature. Interestingly, engaging in discussion outside the house proved useful as this alleviated her son's feeling of being "hemmed in". She believed that it was important to be responsive to her son's moods, consequently, she tried to take advantage of opportunities in everyday life as opposed to "pinning him down". Nonetheless, if he signalled that he was unwilling to discuss a particular topic at a particular time, she "back[ed] off".

Another mother noticed a love-bite on her 17-year-old son's neck and sensed that he was "upset and embarrassed" and therefore not open to a discussion. However, she did not want to let the episode pass without conveying her disapproval, which she did by stating to her son that she was "not impressed" by what she had discovered. When probed as to why she disapproved, she reported that, in her own youth, love-bites were associated with contemptible and promiscuous intimate behaviour (of which she disapproved). She also indicated her awareness that her own views were 'stupid' and incompatible with normative behaviour in contemporary youth culture, indicating her sense of awareness of her ambivalence and inconsistency in making sense of her values and feelings. Nonetheless, she revealed that she felt compelled to comment as she did as a way of conveying her own sexually-conservative value system in response to the situation, in the hope that it might encourage her son to also adopt a similar stance. While this mother reported an awareness that the episode presented her with an opportunity to discuss sexual safety with the young man, she believed that he was already embarrassed, and did not wish

to make him more uneasy. In this way, the sensibilities of the young person often took precedence over a parent's own wish to educate. In other situations, parents described their consciousness of their child's sentiments should material that they deemed to be possibly embarrassing be shown on television.

In the following example a mother had been discussing the need to change the sheets on her son's bed because of his wet dreams and indicates her reluctance to discuss the issue, lest it embarrass him.

Int: And you never mentioned anything about wet dreams?

No. 15: No.

Int: Would you be embarrassed talking to him about that?

No. 15: No, he'd be mortified if I talked to him about it; he is just that type of child. He'd be mortified if I brought it up to him. [No. 15, SEG 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

With regard to parents' own emotional responses to discussing issues pertaining to sexuality with their children, data indicated that the parents perceived that the children would be more embarrassed than they (the parents) were. Nonetheless, while some parents reported being unperturbed about references to sex and sexuality in dialogue with their children, others admitted to being somewhat uneasy or embarrassed about the topic, even in situations where the once-off 'talk' was avoided (which was most cases). In addition, for some parents, their experiences of attempting to provide sexuality education to their children was one of definite embarrassment and not something they felt comfortable engaging in. A few participants referred to their responses to sexually explicit scenes on television whilst in the presence of their children. These parents reported a sense of embarrassment and anxiety as to how much more explicit things might become, and relief once the scene had ended. However, as children moved further into their late teens a few participants reported that they became more relaxed about viewing sexual content in the presence of their children.

5.5 Parents' constructions of their teenager's character, peer group and sexual behaviour

While many parents admitted a sense of naivety in relation to their 'true' knowledge of their child's actual behaviour, it was quite common for parents to assume a reassured position in relation to this because of a belief that their child was well brought-up, sensible, and had foresight. Furthermore, a discourse of needing to trust the child was drawn upon by parents. In this regard, one participant imparted the view that one can only do so much as a parent and after that whatever happened would be down to the young person. A number of parents conveyed the view that they believed that their children were 'smart enough', 'sensible' or 'intelligent' and so would not have unprotected sex. When asked specifically about the young person's social skills in relation to buying condoms, most parents with adolescents under the age of 18 did not want to consider this, yet assumed that the youngsters from their mid teens would know how to go about it. At the same time, many participants qualified this by indicating their hope that the young person was not sexually active, an issue that will be discussed in the next section. Explaining why she never discussed the responsibilities and the consequences of sexual behaviour such as crisis pregnancy with her son (aged 17 years at the time of the interview), one woman illustrates her sense of trust based on his character and upbringing.

I feel he is a fairly grounded and sensitive type of kid, and kind. He would have a good sense of respect for people and all that. Anything can happen to anybody, there is no point in saying that this isn't going to happen to my child or whatever, but you kind of naively feel that we have got certain principles and certain standards and you kind of feel and hope then that they'll be okay. [No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

Similarly, in the following example, the young person's perceived stable character meant that he did not receive any sexuality education from his parents after the age of ten, although in hindsight his mother questions how much he actually understood.

Well he has one [a girlfriend] now, but he is too old for me to worry about him! Funny enough I didn't, and maybe I should have, I don't know, but I didn't because I always thought he was very clued in and I knew by him and I knew that he knew. Now maybe he didn't know as much as he let on, you know. [No. 21, SEG 2, mother of 3 children (M: 25 yrs, M: 21 yrs, M: 16 yrs)]

In the following example, a father indicated a similar trust in the prudence of his teenage daughter.

You think you know them well enough that they would be, not street wise, but smart enough to have enough cop on that they know the way the system works or what can happen. [No. 26, SEG 1, father of 3 children (F: 18 yrs, F: 15 yrs, F: 12 yrs)]

Some participants also reported that their children had particular standards which were close to their (the parent's) own, and these tended to approximate socially approved 'mature' discourses of appropriate social and sexual behaviour. In this way participants conveyed the manner in which their children were different to some other children and, furthermore, that their own children had insight into the questionable behaviour of young people within their own age group. In the following quotation a father distances his own daughters' attitudes from what he views as the poor social standards sometimes in evidence in the social environment that young people inhabit.

I think it [going to discos] is education for them as they can see what is going on and they wouldn't be, let's see, they wouldn't approve of it but they do understand that there are some kids that come from broken homes or there has been split marriage, you know, single-parent situations or problems in the family and that sometimes this is the way that it can go for people of their age group - that either they do take to the drink or they can behave irresponsibly in public, which isn't acceptable. And they are fully aware of that, and I think having seen it, it would be probably at the back of their minds that they don't want to be seen or they don't want to go down that road. [No. 26, SEG 1, father of 3 children (F: 18 yrs, F: 15 yrs, F: 12 yrs)]

In the following quotation the mother conveys her sense that her (then 17-year-old) daughter would postpone sex until the time and relationship were right for her.

I do think when the time is right she definitely will, if the man is right. I think it won't be with anyone, put it that way, I know for a fact. [No. 1, SEG 2, mother of 1 child (F: 17 yrs)]

The mother goes on to indicate how her daughter's views were possibly more conservative than her own. (An analysis of the moral messages of parents is contained in Section 6).

Indeed, that mother, a separated woman without a partner, told of how her daughter had recently 'marked her [the mother's] cards' about behaving respectfully as she (the mother) was leaving the house to go on a date.

In spite of a tendency to view their children as sensible, a few parents indicated that they had occasional doubts about how their children might be behaving unknown to them, and one mother believed that her son was more naïve than he himself was aware. One mother considered the possibility that her teenage daughter might outwardly dress in a particular way when leaving the house to socialise yet change into clothes of which her parents might disapprove behind their backs. Another stated that while she did not believe her eldest son had had sex, she acknowledged that she could not be certain, given her lack of awareness of "what he does when he walks out the door" (No 9).

A number of parents registered concerns about their adolescent's behaviour should he or she consume alcohol, which they believed would compromise their child's usual sense of reason. However, these doubts appeared to quickly pass and the teenager's identity as a sagacious and celibate individual re-emerged as the more dominant characterisation. In addition, a few participants identified one of their children as more challenging and 'wild' than his or her sibling(s), and in some instances, the participant indicated that this child was spoken to more often with regard to sexuality. However, as will be discussed in Section 6, parental education about sex and relationships tended to be both indirect and at a superficial level.

The trust that parents had in their children's judgement to act appropriately in terms of sexual behaviour was often placed in the context of the parents' views of their children's peers and associates. One mother, for example, indicated that she was not concerned about her (then) 14-year-old daughter attending a junior disco widely believed to be attended by scantily-clad young women and subject to rumours about the explicit sexual behaviour of its punters because both her daughter and the friends that accompanied her had worn tracksuits: "The crowd she went with weren't the long leggy Miss Beautiful, look at me." She also noted how her daughter was judgemental about the behaviour of other young women beyond her immediate social circle, and this reinforced her (the mother's) view that her daughter would have a responsible attitude in her sexual behaviour.

One girl who left the school became pregnant, their [her daughter and the group she associated with] attitude was that she hardly knows who the father is. That would have been their attitude. [No. 1, SEG 2, mother of 1 child (F: 17 yrs)]

In a further example, a father noted that from his observations, his daughter's male friends were of good character and did not have ulterior motives related to sexual exploitation. Another father held similar views:

She kind of grew up with a group of people, there was about four girls and three fellows, and they all palled around together and they went places together and took care of each other together and they'd go to the discos together and they always got home together. And none of them were going out with each other. [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

By contrast, one mother admitted to being 'wary' of one or two of her 15-year-old daughter's friends, and believed that she needed to keep 'a good rein' on her daughter.

When asked if they believed that their child's same-sex friends were sexually active, some parents acknowledged that, where the adolescents were older (18 years and over), it was at least a possibility because some did have boyfriends/girlfriends. This indicates the strong conceptual link that parents make between sex and relationships.

5.5.1 *Parents' perceptions of their own adolescent's sexual behaviour*

One of the most consistent themes across data - and a factor that was often referred to by participants when they rationalised why they had not talked to their adolescent children about contraception - was parents' perceptions that their teenager was not sexually active, unless they were 18 years or older. There were a few exceptions, particularly among mothers in low socio-economic groups, who seemed to be more open to the possibility that their children may be sexually active by their mid-teens, although they simultaneously disapproved of this until adolescents reached 17 or 18 years. A few of the fathers were in regular contact with young people through their work (for example, a teacher, a shop worker and a taxi driver) and conveyed their knowledge of how promiscuous teenagers are nowadays through stories that they were privy to from young people with whom they were in contact bantering among themselves; however, they tended to distance their own children from such behaviour.

The reasons why parents believed that their own adolescents were not sexually active are as follows:

(1) The absence of a romantic attachment.

The most common reason that participants gave about their assumptions of the adolescent's virginity was that the latter did not have a boyfriend/girlfriend.

The following is an example of such thinking from the mother of a 17-year-old girl.

She hasn't had a boyfriend and that is why if you said to me, but in a year or two if she had a boyfriend, ask me the same question and it might be a totally different answer. [No. 1, SEG 2, mother of 1 child (F: 17 yrs)]

Several participants stated that since their teenagers were not going out with anyone, there was no need to mention contraception; however, a few parents had found out through a third party that their teenager was or had been romantically involved. In such cases, two parents attempted to broach the topic of contraception, but in a very indirect way, through intimation and innuendo (see Section 6.3.3 for details of this type of communication), while the other said nothing regarding her discovery to her son lest he become even more distant about his social life.

(2) The adolescent was deemed to be too young to be interested in a sexual relationship.

Another reason given as to why parents believed that their adolescent had never had penetrative sex related to the young person's age. Although several parents acknowledged that teenagers nowadays were having sex much earlier than occurred in their generation,

in the case of their own children, those in early adolescence and even mid adolescence were deemed to be too young to be sexually active. For instance, one mother noted that while as a parent it was difficult to say whether her children were sexually active, she was confident that her younger children were not, in view of their ages (12 and 13 years).

Parents also tended to believe that their children were slower to show an interest in sex in their early teens compared to other children of the same age. The following is an example of this perspective from the mother of a 12-year-old boy.

Compared to other kids I know who are going to discos and have girlfriends and he is not, he likes his football and he does his thing and that is about the strength of it. And the girls fancy him or...and there is that kind of change happening, but he is not really into all of that so I don't panic too much. [No. 22, SEG 5, mother of 1 child (M: 12 yrs)]

A number of parents expressed the view that boys tend to mature later and tend to be more childish than girls of a similar age.

(3) A belief that the young person would never have the opportunity to have sex.

A few parents indicated that their adolescent would never have the opportunity to have sex, as they socialised in groups, often with adolescents of the same sex. For some adolescents their social life involved going to the home of a same-sex friend to watch DVDs. For another mother, her children "weren't going out that much", thereby limiting their opportunities. In one case, a mother whose 14-year-old son entertained his girlfriend in his bedroom at times when the house was both occupied and unoccupied by others stated that the possibility that her son might be sexually active was something that she never thought about. The girlfriend was six months his senior.

No. 15: They'd [son and his girlfriend] come home from a night out and she is in the sitting room with him...I wouldn't have said he was sexually active...Well, I don't know. I don't think he is, though...The two of them would go up to his room and stuff and they'd even be here on an afternoon and I'd be off for the day.

Int: While you were here, is it?

No. 15: Yes, but that would never enter my head: what are they going to get up to, sexually wise. [No. 15, SEG 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

(4) A belief that other interests displaced an interest in sex.

A few other parents noted how their teenage children had other interests, insinuating that these would displace an interest in sex. For example, in the following extract the father indicates that his daughters socialised in nightclubs for the purposes of enjoying the music, dancing and for having fun with their girlfriends, and that a liaison with individual men was not on their agenda.

That [meeting a male] isn't in their agenda...They go in with a group to have good fun, a good time, enjoy the music, dancing and all that sort of stuff and, yes, 'I am ready to go home'. [No. 26, SEG 1, father of 3 children (F: 18 yrs, F: 15 yrs, F: 12 yrs)]

Similarly, another father stated that he began to allude to sexual issues with his son for the first time when the boy was 16 years old. However, the young man's interest in sport was believed to curb his energies and interest in sex.

I suppose...it is not to say that it makes any difference, but all of them were heavily into sport, mad into football...They were always busy and busy training and running and into school teams...And I always felt that if you were so active in terms of using your energy there you are not going to have too much time to be involved in some things like that [sex]. [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

Parents' tendency to assume that their adolescent was not sexually active had implications for education about contraception and the use of condoms, a subject that we consider in Section 6.

5.5.2 The covert life of adolescents

A few participants reported that they discovered, through a third party, covert aspects of their child's life that may have implications for sexuality education. One participant recounted how she discovered, through an acquaintance of hers, that her 17-year-old son and the son of the acquaintance had gone on a double date with two teenage girls; this was complete news to her, as her son had never mentioned it. In another case, a mother reported that she had found out that her son had a girlfriend when she watched him at a distance from an upstairs window; when he was what he thought was a safe distance from the house, her son put his arm around the girl. Another mother was informed of a romantic liaison of her son by the slapping of his friend in her presence. Yet another mother found out through her son that her daughter had changed from a pair of jeans into a pair of shorts after she left her home to go out to a disco. Indeed, in the group interview with three mothers, all acknowledged that young people tell lies to their parents. One of those mothers stated that she would rather be informed by other parents if they were aware that her son was engaging in behaviour such as alcohol consumption or smoking, and it irritated her when adults colluded in concealing the behaviour. One participant indicated that from her 17-year-old son's perspective, she needed to know nothing of his social life.

From participant interviews, it appears to be the case that young people do not tend to inform their parents if they are going on dates or are in a relationship, and they sometimes deny it if confronted, maybe to avoid parental talks about sex. This secrecy about heterosexual liaisons may have implications for parental sexuality education, since many participants reported not having discussed contraception with their teenagers because of their belief that the young person was not in a relationship.

5.6 School-based sexuality education

A strong theme to emerge in data was that parents identified schools as a key source of sexuality education for their children, although there were variations in the degree to which they perceived themselves to also have responsibilities and a role relative to that of the school. In this section the range of perspectives will be considered, from those where parents admitted to leaving sexuality education entirely to the school to those where parents viewed themselves as having the primary responsibility for sexuality education. In addition, the extent to which parents were aware of and engaged with school-based teaching and learning will be explored.

5.6.1 *Participants' perspectives on their role in sexuality education relative to the role of the school*

Of those participants who professed at the start of the interview to having done no sexuality education at all with their adolescent children (yet whose accounts nonetheless provided insights into indirect messages that they transmitted to their children), the most common reason given was that all the sexuality education that their child required was covered at school.

No. 13: I haven't spoken to [17-year-old son] at all but I don't know whether he is [sexually active] or not, but I don't think he is.

Int: And have you ever mentioned anything to do with a condom ever?

No. 13: No...I think I just thought that the school had it sorted for me. Thinking of it now, I must have brushed it aside: 'Ah sure the school will sort it out,' do you know what I mean? [No. 13, SEG 6, mother of 2 children (F: 19 yrs, M: 17 yrs)]

Sex talks, they did it in school and you kind of think, 'Grand, that's done.' [No. 15, SEG 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

In a further narrative, a mother described how she had provided books to her children when they were about nine years old, and in the case of two out of her three sons, she relied entirely on the school system for their sexuality education during the teenage years (her awareness that the third son had a girlfriend when he was 15 years prompted her to have a discussion with him).

Int: And the boys, then, when the eldest lad got older, was there another [discussion about sexuality]?

No. 22: There wasn't...That was it.

Int: And was it ever mentioned again by either of you, the whole notion of sexuality?

No. 22: Not really, no. When he got to the teenage years, no.

Int: What about contraception?

No. 22: No.

Int: Ever?

No. 22: Ever...After that I think I left it to the school.

Int: And were you confident enough about the school system?

No. 22: Well yes, in the school that he was at I thought that would be covered all right.

Int: And did you know what they were doing in the school?

No. 22: No I didn't, in detail, I didn't, but I knew that it would be covered. I wouldn't know exactly in detail what they were doing...but I can't remember exactly...but I felt it was covered...I don't know why.

[No. 21, SEG 2, mother of 3 children (M: 25 yrs, M: 21 yrs, M: 16 yrs)]

These participants, who reported that they had not undertaken any sexuality education with their adolescent children, did indicate that they had informed their children that should they (the children) require any further education, guidance or information on sexuality they should feel free to request it of the parents.

Most participants, however, drew on the discourse of parental engagement as a complement to school-based sexuality education provision, in which they presented the view that parents should work in tandem with schools. In presenting such opinions,

parents may have been distancing themselves from any (socially undesirable) sense that they were abdicating parental responsibility for sexuality education. However, in practice, based on what most participants who fell into this category described, the substance of their sexuality education tended to be no different from that of those participants who admitted to leaving sexuality education entirely to the schools. What it typically constituted was an invitation from themselves as parents to their child to respond to any questions that the latter might have, something that those who admitted to relying completely on the schools also did. Thus, in most cases, the only difference between both patterns was at the level of discourse – that is – the participant's way of thinking and talking about the issue rather than in how they actually practised sexuality education. In examples of this perspective (a selection of which follow), we see parents explicitly stating their sense that sexuality education should be shared between school and home, yet simultaneously indicating that their input was largely to communicate their availability to the child should he or she require further guidance, rather than proactively embracing the issue:

Int: And condoms, would that ever have come into it, do you remember?

No. 7: There are things they don't want to discuss with you and things like that.

Int: And now, because it is at school do you think that is a bit of a relief to parents?

No. 7: I don't think that it [school-based sexuality education] should be the only thing - it shouldn't substitute some kind of parenting. That probably sounds a bit hypocritical...But if anything came up in conversation I would answer it as well. [No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

No. 26: So it is a combination of the two [home and school]. I wouldn't think one more than the other. It definitely comes down to the parents to start off with. The school would be good to back up with their thing to cover with examples and what have you...I know in the education system now that they do cover sex education. It still wouldn't be...the responsibility comes down to, it is still in the house, the parents...

Int: You mentioned safe sex. Have you explicitly talked to them about contraception methods?

No. 26: I haven't, no.

Int: You haven't, would your wife have?

No. 26: That I don't know - whether it was specifically in the various methods. Again, I feel that she might have left that up to the discussions at school but I haven't, I don't know if she has...I just sort of left it open with them: 'Look, you want to talk to me, I'm here.'

Int: Ok. Do you think it is a role for dad or mum or the school?

No. 26: I would think, again, I would think it has to come from the parents...[No. 26, SEG 1, father of 3 children (F: 18 yrs, F: 15 yrs, F: 12 yrs)]

No. 8: Well, I think they learn a certain amount at school and it is up to the parents to reinforce it or whatever, but I have often said to him that if he ever wants to come and talk to me he knows he can come and talk to me and I mightn't always know the answers but at least I'll be honest with him and tell him that I don't know the answer.

Int: And has he ever come and asked you anything?

No. 8: Not directly.

No. 8: Well, they all sort of did it at school...Well, I would have said to him, talking about condoms or whatever...to always use condoms if ever.

Int: Anything else?

No. 8:...You see, they hate talking about it; they don't want to talk about it. [No. 8, SEG 5, mother of 2 children (M: 17 yrs, M: 12 yrs)]

While most parents fell into the category of believing sexuality education to be a shared responsibility between parents and the school at a discursive level, there was a minority who believed that the balance of responsibility rested primarily with the parents. One of these participants believed that in principle parents had primary responsibility for this aspect of their child's education. (This parent described how, in relation to his 11-year-old daughter, both parents discussed the issues covered at school again at home to reinforce the child's learning and clarify any misperceptions.) A couple of others conveyed their opinion that schools were already under pressure to present the regular curriculum, and the level of depth that could be achieved in relation to sexuality would be insufficient.

5.6.2 *The extent to which parents were aware of and engaged with school-based sexuality teaching and learning*

In relation to the second issue to be considered here, namely, the extent to which parents were aware of and engaged with school-based teaching and learning, a strong pattern emerged indicating that most parents tended to have a reasonable knowledge of the sexuality education that their children received at primary school level but were largely ignorant of and disconnected with sexuality education at secondary-school level.

With regard to primary-level sexuality education, several participants referred to the Stay Safe⁷ programme, and the manner in which children brought home text-based material (including 'homework' that involved drawing pictures, etc.) that was used as a prompt for discussions with the child. An example of how school material served as a prompt for parental sexuality education is as follows.

Because when they send stuff home as well for the parent to look at or read with the child and discuss, that is very good because it is easier then for the parent to discuss it and bring up the subject. [No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

Pre-adolescent sexuality education took also the form of a once-off 'talk' about sex given by a speaker from outside the school when the child was either in fifth or sixth class. (There were just two participants – both from rural areas - who indicated that the schools their children attended did not offer this.) The vast majority of participants recounted having signed a consent form (or the child's mother having signed the form in the case of most of the male participants) to allow their child to attend the session, and many recalled having been invited to a parents' information meeting close to the time of the 'talk', which some attended. (Those who elaborated on this were positive about it.) In addition, many participants had a good indication of the topics that were covered. Significantly, a number of mothers in particular indicated that in the time period around the talk, they either spoke to the child about sexuality or purchased books intended as a learning support. One mother describes how the talk prompted a discussion with her daughter about the body and bodily changes.

I basically said to her that you are going to be having a talk in school on sexuality and are there any questions before you go in that you want to ask me...After the talk they had in school we talked about boys having a penis and girls having a vagina and boys will get hairy at a certain age and boys will get deeper voices. [No. 30, SEG 2, mother of 2 children (F: 11 yrs, F: 7 yrs)]

⁷ Stay Safe is a personal safety programme developed by the Child Abuse Prevention Programme (CAPP) with the aim of reducing vulnerability to child abuse and bullying. An aspect of the programme is personal safety education for children in primary schools.

Thus, parents' knowledge of the sexuality education that occurred in primary school tended to facilitate sexuality education in the home.

A striking feature of data was the extent to which parents' accounts of the 'talk' in this study dominated their narratives about school-based sexuality education in a way that mirrored the manner in which 'the talk' was fore-grounded by adolescents when narrating their experiences of school sexuality education in an earlier Irish study (Hyde and Howlett 2004). Equally striking was parents' vagueness about any sexuality education thereafter in secondary school, in terms of actually knowing its content and depth. (Several were aware of and could name the RSE programme, although a few admitted to being confused about its relationship to the SPHE programme.) The following examples exemplify the professed ignorance of parents about sexuality education in secondary school level compared to that of primary level.

Int: So what about sexuality, then, at school, you know, in relation to sex education?

No. 6: They got that in sixth class, they don't get it in the secondary school.

Int: They don't?

No. 6: Not that I am aware of. I think it doesn't do any harm, they are the vital years.

Int: And do they not get any discussion or are there no discussions in the secondary school about sexuality and pregnancy?

No. 6: I don't know, I have never heard of it. I know they have had it in sixth class.

Int: And how did you feel when you heard that they were having it?

No. 6: Great, because they are all in a bunch together, they are not singled out; they have a good understanding; it is explained very well.

Int: And have you had any material from the secondary school?

No. 6: No. [No. 6, SEG 4, mother of 5 children (F: 19 yrs, M: 16 yrs, F: 14 yrs, F: 13 yrs, F: 7)]

Well I know in the junior school they had teachers come in and give them a talk, the parents were called in first, and they had that at their school now in the first year, sorry the last year of primary because my daughter has just had it. So it is the last year of primary and then nothing from the school side now. [No. 9, SEG 4, mother of 2 children (M: 14 yrs, F: 12 yrs)]

Int: What sort of messages do you think that the children are getting from schools?

No. 18: I don't know. I'll be honest, I don't know. With the boy I have no idea what messages he got from school because he just never told you anything about what went on at school. The girls...I don't know really either.

Int: Can you remember a time when you might have been called into the school where other parents and yourself were called in to be given information about the type of sexual information the children have been getting in school or programmes?

No. 18: I can't remember, no.

Int: Can you remember ever getting documentation or booklets or letters from the school?

No. 18: Not from secondary school, maybe national school, yes.

Int: Would you think that they are getting enough sex education in schools?

No. 18: I don't know.

Int: Do you think that they should be told about sexuality, about relationships, about respect and all that?

No. 18: Yes, I think the more it is talked about the better.

Int: But you are not sure that this is happening at school.

No. 18: No. [No. 18, SEG 2, mother of 3 children (F: 22 yrs, F: 21 yrs, M: 18 yrs)]

For the most part, parents' narratives indicated that adolescents did not tend to reveal to their parents what they had covered at school, nor did they bring home text-based material that might have prompted a discussion. In two cases, where parents registered a good indication as to what their child had been exposed to, the source of the information was the Home Economics course that the adolescent was undertaking rather than the RSE programme. In these instances, parents had seen course books and had observed the children doing their homework in the subject.

When challenged as to where they believed their child would get a detailed education on issues such as contraception, sexually transmitted infections, and safer sex (which was rarely provided in any depth at home), the vast majority of parents conveyed their confidence that the child was receiving this at school.

Int: Would you have gone through the detail with him?

No. 39: You don't have to do that. I know from what [child] is saying he knows all about it and he knows the ins and outs, and he knows about girls' monthly cycles and the whole lot. You'd know from things he has said, like 'the time of the month' that type of thing. And I'd say, 'Do you understand that?' and he'd say, 'They cover all that at school.' [No. 39, SEG 5, father of 2 children (M: 16 yrs, M: 12 yrs)]

Int: Would you say he knows a lot about sex and contraceptives and that?

No. 15: I'd hope so, to be honest. I don't know. I just assumed that they learned all of that when they did it, I mean he did that in fifth and sixth class. [No. 15, SEG 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

Thus, in spite of invoking the discourse of dual responsibility and the complementary roles of parents and the school, many parents placed a great deal of trust in the school system to provide an in-depth sexuality education to their children. Some parents indicated that teachers were in a better position than parents to teach on sexuality topics because their knowledge base was more thorough, and a few referred to the more impersonal relationship between teachers and pupils compared to the parent-child relationship that would moderate any associated awkwardness. Indeed, one participant who was also a teacher revealed that she had experienced a greater difficulty in educating her own children about sexuality in the role of parent than she had experienced as a secondary school teacher covering a topic on sexuality with a class.

Notwithstanding their detachment from the school system of sexuality education, virtually all participants were positive about schools undertaking this role. Only one participant voiced her dissatisfaction with the content of the primary school talk, believing that certain aspects were too detailed and thus not age-appropriate for pre-adolescents. In particular, she objected to the fact that oral sex was covered in this talk. However, even this participant was strongly in favour of school-based sexuality education in secondary school, commenting:

I think there should be more information available at school, I don't think there is enough.... From about 13, I think once they start secondary school there should be a lot of emphasis on safe sex and sexually transmitted disease and that kind of thing. I don't think they get enough material. [No. 5, SEG 3, mother of 5 children (F: 22 yrs, F: 20 yrs, M: 17 yrs, F: 13 yrs, F: 8 yrs)]

In spite of what was, in the main, an obvious disconnectedness between parents and school-based sexuality education at secondary level, participants tended to be passive rather than active in accepting their lack of engagement with the schools. While two parents indicated that they had canvassed for more sexuality education (through the Parents' Committees in one case and the Board of Management in another) there was little sense that participants were active in attempting to forge a stronger relationship with the school or attempting to engage more with the RSE curriculum. Parental perspectives in this regard reflect an observation made by some parent participants who were interviewed in focus groups as part of Mayock et al.'s (2007) assessment of challenges to the full implementation of the RSE programme in the context of SPHE (referred to earlier in Section 2.6); they noted a high level of apathy on the part of parents towards RSE/SPHE. In addition, the finding in Mayock et al.'s study that there was a good deal of 'diversity and inconsistency in RSE implementation and delivery' (p. 18) signals problems about how much sexuality education young people are actually receiving. It appears from the current study that parents may overestimate the amount of sexuality education that their adolescents are receiving at secondary school. The picture that is emerging suggests a haphazard situation, with many adolescents not receiving quality sexuality education either at home or at school.

5.7 Parental communications about sexual safety

While many parents had difficulty in engaging their children in dialogue about sexuality in a general sense, they did tend to be pro-active in communicating sexual safety messages to their children. With regard to education designed to protect the child against sexual abuse by adults, the vast majority of parents had communicated information to their children on the issue, although the degree of regularity and level of detail tended to vary. For many participants, communication about sexual safety began when the children were very young, usually at about three, four or five years of age, although in some cases the children were older. The discourse of 'stranger danger', that is, the risk posed by those outside of the child's social circle featured prominently in participants' accounts. At the same time as alerting children to the possibility of sex abuse by adults, a few participants commented on how 'lucky' they were that neighbours and family members were close at hand to 'watch out' for the children and keep an eye that they would not come to harm. Another commented that he had said little to the children about the possibility of abuse, because they were never left to play alone, but rather were always accompanied by a family member or friend in the parents' absence. That a high proportion of reported sexual abuse is instigated by those within the circle of trust (family, friends and neighbours) (Finkelhor 1994) did not appear to feature strongly in parents' approaches to raising awareness of protection from sex abuse. The discourse of 'stranger danger' seemed to reverberate more strongly in parents' world-views of sexual danger for their children. In the course of asking participants about their role in educating about sexual safety, four participants revealed, without being prompted, that experiences of sexual abuse in the extended family, school, or neighbourhood had made them very alert and proactive about protecting their own children against abuse. (Two of these were abuses of members of participants' extended families and had resulted in criminal convictions.)

A number of parents reported making particular references to recognising inappropriate bodily contact during advice about sex abuse and a few specifically directly mentioned genital contact in this regard. In other cases, the message here tended to be that if the child experienced the physical contact as inappropriate, then they should tell their parents. A number of parents also reported advising their children to withdraw from a situation if they felt uncomfortable with aspects of the interaction.

A typical message from parent to child was as follows:

I just want to make sure that you know not to talk to strangers or anything and if somebody does something that you don't think is right that you should tell. [No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

A number of parents stated that they were reluctant to impart too much information because it might distress the child. In addition, there were a few examples of children using blocking techniques to close down further communication with their parents about this issue (this notion has been considered in greater detail in the Section 5), claiming to have covered it at school. A number of participants believed that the sexuality education in primary school provided a good grounding in issues such as boundary maintenance, awareness of owning one's body and so forth.

Sexual safety messages from parent to child also included questioning the child about his or her Internet activities and offering safety advice. Many participants reported that they had attempted to convey the importance of vigilance in maintaining anonymity when dialoguing with others on the Internet; this was designed to alert the child to the notion that there were dishonest adults in society who might take advantage of children. These communications about safety often tended to be very general, couched in terms of 'harm' (that adults intent on harm might dupe a child or that an adult might do 'bad' things), rather than explicitly related to sexuality. Older teenagers tended to be given far more freedom and privacy over their Internet conduct than those in pre or early adolescence.

A number of parents also referred to the manner in which they monitored and regulated their children's social movements to protect them from bodily harm, both sexual and non-sexual. Aspects of parental actions here included the need to know where the young person socialised and with whom they socialised, and the overseeing of transport to and from social locations. Some aspects of this type of monitoring are likely to have sent certain signals to young people about how to guard against sexual violation (for example, to socialise in groups rather than alone, to telephone parents for transport home, and to observe curfews). The young people, however, may have been less conscious of other aspects of parental monitoring (such as the parental surveillance of their peers). The issue of parental monitoring is beyond the scope of this research; however, it may well emerge as an important issue in future research in light of findings by Wight et al. (2006) that parental monitoring was the variable that exhibited the greatest level of influence on the widest range of adolescents' sexual outcomes.

Section 5: Key points

- Many parents had identified differences between their individual children that had a bearing on how sexuality education was managed for each child.
- Data indicated that the majority of parents positioned themselves within a discourse of openness within their homes and viewed themselves as being favourably disposed to communicating with their children about sexual issues.
- In spite of a professed culture of openness in the home, free, open, and uninhibited discussion between parents and adolescents about sexual issues was not described by any participant.
- To a considerable extent in the case of adolescents, the amount and type of information imparted was controlled by the young people, who used various strategies to impede the free flow of information. These strategies included: claims to already have full knowledge of sexual issues and demonstrating an unwillingness to discuss the topic by physically moving away, becoming irritated or annoyed, or ridiculing the parents' attempts to educate.
- Parents' accounts suggested that once the children reached adolescence it was the young people who exercised the greater level of power in interactions involving communication about sexuality, as the sensitivities of the teenager took precedence over parents' need to impart information. Parents reported retreating from pursuing sexuality education endeavours further to avoid embarrassing or upsetting the young person.
- While some parents reported few difficulties in communicating about sexual matters with their children, most imparted some level of unease and awkwardness, although the degree varied. Most participants believed that their teenagers were more embarrassed than they themselves were when communicating on sexuality.
- The vast majority of parents perceived their children to be sensible and grounded, and, in the case of children younger than 18 years, the dominant pattern was for parents to assume that their adolescent had never experienced penetrative sex. This assumption tended to be based on the belief that their adolescent was not deemed to be romantically attached; that he or she was considered to be too young to be interested in a sexual relationship; that he or she would never have the opportunity to have sex; and that other interests displaced an interest in sex.
- A few mothers in the lowest socio-economic groups seemed to be more open to the possibility that their children may be sexually active by their mid-teens.
- A few parents revealed that they had been taken aback by information that they had received indirectly about their child's behaviour; while this largely pertained to covert alcohol consumption, it also sometimes concerned opposite sex relationships that potentially had implications for sexual behaviour.
- With regard to school-based sexuality education, the primary school 'talk' dominated the narratives of parents, and there was largely a vagueness about any sexuality education in secondary school, in terms of actually knowing its content

and depth. While the strongest pattern was for parents to invoke a discourse of dual responsibility, advocating the complementary roles of parents and the school, many parents placed a great deal of trust in the school system to provide an in-depth sexuality education to their children. In spite of what was, on the whole, an obvious disconnectedness between parents and school-based sexuality education at secondary level, participants tended to be passive rather than active in accepting their lack of engagement with the schools.

- Most parents reported having communicated sexual safety messages to their children to protect them against sexual abuse. However, the degree of detail tended to vary greatly, and the focus was more strongly on the threat posed by strangers rather than those within the circle of trust (family and friends).

6.0 The content and substance of parental sexuality education

6.1 Introduction

In this section, the focus is on the content and substance of communications about sexuality between parents and their children. We begin by examining the moral messages about sexuality that parents transmit to children and explore how these moral messages – both overt and covert – relate to expected rules of sexual conduct. The focus then shifts to the content and substance of parental messages about safer sex, where again we identify the use of tacit messages by parents, including indirect messages, innuendo and intimation. The level of depth that parents achieve when imparting sexuality messages to their children is examined, as well as the challenges, barriers and assumptions relating to educating their children about contraception and safer sex. The emphasis on the negative consequences of sexual activity and the missing discourse of sexual pleasure are also considered. Finally, we turn to an additional aspect of the substance of sexuality education provided by parents, namely, communication about homosexuality and lesbianism.

6.2 The moral messages of parents

6.2.1 Parents' perspectives on sexual liberty and restraint

Participants' descriptions of the content of the messages that they transmitted to their children were mediated by moral messages about 'good' and 'bad' sexual behaviour. While the vast majority of participants were keen to present themselves as 'modern' parents with liberal ideas, some admitted that they had become more conservative as they got older. The dominant pattern was for parents to convey the message to their children that sexual promiscuity was morally wrong (although there were a few exceptions); however, there was almost universal consistency among parents that pre-marital sex was inevitable, with just one mother conveying to her children that this was morally unacceptable because of her strong religious beliefs as a Catholic.

Dialogue between parent and child was sometimes characterised by uni-directional messages, with parents transmitting their values on sexuality to the child, although it was not uncommon for the same parent to prompt the young person on other occasions.

Kind of, if something comes up...something...on TV: 'That is not the way; that is desperate. He shouldn't be doing that at all, and you know that if you are ever in that situation that you never have to...You don't have to be in that situation.' [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

Well I'd say really I probably didn't talk to him [son] too much about it until he was probably around 16, and then I would have, kind of, in the course of maybe seeing something on the television or hearing something, say to him, 'God what do you think of that? That's ridiculous isn't it? Imagine people doing things like that,' and 'I hope you'd never do anything like that'... and I'll say to her [daughter], 'Look at that Britney Spears one - isn't she an awful tramp altogether? and 'Look what she is doing, she has no responsibility...she is letting women down and look at the way she dresses'...I would, like, if we say I'd see somebody who, we'll say, maybe on the television or someone was known to be kind of involved in casual sex and all types of antics, I'd say...'Look what happens to people like him when they are too involved with too many women, it is ridiculous; you should have a bit more respect for your body and he probably doesn't even mind himself, he probably isn't even using protection. Sure, look at

those three women pregnant by the same person - that is a disgrace.' [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

The father in the second quotation above reported awareness that his son would not raise arguments that contradicted his father's morals, and thus predicted that the young man would not offer an opinion. Rather he hoped that his (the father's) own value system would be taken up by his son, as the following quotation indicates.

Int: So do you think when you were talking to your son about offering a judgement, your opinion on something, were you trying to convey your value system and hoping that he'd pick up on it? Or would you have said to him, 'What do you think of this one?'

No. 12: Well a bit of both really, because I knew he'd be slow enough, maybe, to give me an opinion, but, kind of, I wanted him to be aware of the fact that casual sex isn't good for obvious reasons, that you can pick up infections or worse... [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

Other parents were somewhat more explicit in imparting to young people the expected rules of conduct relating to sexual behaviour, although aspects of this remained tacit such as 'no messing' and 'no going outside', as the following quotation indicates.

Well I have always said to her, 'Look, you know the rules going to the discos: no going outside, just behave yourself and no messing.' And I always say to her, 'Please, if you are going to kiss anybody just let it be one boy.' Now I can only advise that and say that to her. [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

While parents acknowledged that normative patterns of sexual behaviour had shifted from 'their day', and registered a high degree of acceptance of this, nonetheless a high proportion of participants indicated their aspiration that their adolescent would not be promiscuous.

I kind of feel that I can't be unrealistic to think that things are going to be the same, but I still wouldn't like him to be promiscuous. [No. 7, SEG 3, mother of 2 children (M: 17 yrs, M: 11 yrs)]

Thus, the dominant moral message was that sex should only occur in a relationship, as the following quotation illustrates.

Mostly not to let themselves down, that they should have respect for their bodies and it [sex] is a special thing between two people who love each other. [No. 5, SEG 3, mother of 5 children (F: 22 yrs, F: 20 yrs, M: 17 yrs, F: 13 yrs, F: 8 yrs)]

Another mother reported that she explicitly said to her son in a recent conversation that "You don't sort of go out and have sex with someone on the first date." (No. 8)

A few parents indicated that their child's thinking mirrored their own in view of the parental messages transmitted throughout the child's socialisation in the home. When asked about what they believed influenced their child's value system about sex and sexuality, there was almost an entire absence of any reference to religion in the interviews. The only exception was where participants mentioned religion in order to discount it as having any impact on the child's thinking. A few parents alluded to a slight Catholic ethos in the schools, and they tended to approve of this.

6.2.2 Moral perspectives, generational issues, and parental age

A few parents indicated that standards of sexual morality had been higher during their younger days than they are currently, and a few considered that their own personal standards when they were younger were higher than those of others insofar as they had been more sexually selective than their peers had seemed to be. However, other participants suggested that sexual activity in adolescence was also a feature of their own generation.

It is known that nowadays kids are more sexually active at a younger age. But then it is something too, if the truth be known, going back in times that people maybe of an older age group or of my age possibly were just as sexually active too. [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

Int: And when you say it was more innocent in your day, what do you mean?

No. 36: Well it was compared to now: we wouldn't know half the things or much about sex. Or they wouldn't be as embarrassed, like. Years ago you'd be - you'd be kissing on the stairs.

Int: Do you think it was just more hidden, though?

No. 36: Oh yeah, it was more in an old fashioned way, it was still there going around but it was just the way you were raised - it was more protected, but now they know more about their body. [No. 36, SEG 6, mother of 4 children (M: 15 yrs, F: 14 yrs, M: 8 yrs, M: 5 yrs)]

In addition, a few parents (mainly fathers) indicated that the moral message that they gave to their children, and to sons in particular, did not reflect their own sexual practices when they were younger. Some admitted (usually when challenged a little) that they set a more restrictive standard than was realistic in the hope that it would encourage greater restraint than would otherwise arise for the young person.

Int: What would you tell him [son]?

No. 39: Have respect for yourself and the girl...Maybe if I was young again maybe I wouldn't be thinking that [laughs].

Int: Do parents set a different standard? Do you think that parents may have had a one-night-stand and are just staying quiet about it?

No. 39: Look, you would never let on to your son that you were out chasing girls [laughs]. You wouldn't be telling your children what you really got up to yourself, because you want to show them that that's not right...You want to set the bar here [indicates a high level with hands] and hope they'll get here [indicates a lower level] somewhere. [No. 39, SEG 5, father of 2 children (M: 16 yrs, M: 12 yrs)]

Int: But would you think that parents are projecting to their children stricter standards?

No. 31: Possibly yes, parental hypocrisy, yes absolutely I think so indeed; I think that is a foregone conclusion. And I think that is an automatic thing, it is this thing that parents do of trying to keep their children to a degree, and I think you have to recognise that in yourself, you know. Oh it is there, do you know what I mean? I think it is very important to recognise one's own hypocrisies for what they are, you know. [No. 31, SEG 2, father of 2 children (F: 11 yrs, F: 7 yrs)]

This, coupled with the notion that young people were generally less than forthcoming with information about their romantic liaisons, as indicated in Section 5, suggests that both parents and children engaged in processes of mutual concealment, neither being

open about their early sexual experiences (apart from in a few instances where parents' perspectives veered closer to a liberal discourse – these will be considered below). While these parents advocated a socially approved moral discourse of sexual selectivity and emotional engagement in messages to their children, they recalled that their own behaviour was more fluid than they let on. In this way, the sexual dimension of adolescence was repressed.

One of the objectives of this study was to illuminate possible variations in experiences according to the parents' age. However, there were no noticeable differences in the perspectives of parents in their thirties (at the younger end of the spectrum) compared to those in their fifties (at the older end). While most participants were in the 45-49 age cohort, the most conservative participant - who promoted sexual abstinence until marriage to her children - was aged 40 years. Younger participants in the study tended to be working-class women, and class seemed to be more influential than age in relation to some issues. (For details of the age distribution of the sample, see Appendix 3.)

6.2.3 Covert morality messages

Sometimes, the moral message from parents was indirect and merely indicated disapproval of a particular type of behaviour, as suggested in the following quotation where the mother discovered condoms in the house in the aftermath of a furtive party organised by her then 16-year-old daughter in her absence in which alcohol was consumed.

And when I saw the condoms, I said to her, 'Cheap friends and cheap drink.' [No. 1, SEG 2, mother of 1 child (F: 17 yrs)]

In the above case, the mother had engaged in a detailed discussion about contraception when the girl was nine and a half, a discussion initiated by the child. The mother had made almost no reference to contraception since then, as she believed that sexuality education was covered sufficiently at school and her daughter was a bright and sensible teenager. She reported that her response related to her sense of anger that the party had happened without her permission, and the knowledge that her daughter's friends were drinking alcohol and may have been sexually active in her home, which she viewed as an abuse of her home. When probed as to whether she thought that using condoms was a positive or responsible action, she tentatively indicated that she would. However, she did not convey this to her daughter, as she did not want to appear to be encouraging sexual activity, a perspective shared by other parents. This will be considered in Section 6.3.2.

For another mother, television programmes provided the opportunity to deliver covert moral messages regarding her children's behaviour, with certain practices leading her to comment to her children:

I hope to God you are behaving yourselves when you are out. [No. 4, SEG 3, mother of 5 children (F: 25 yrs, M: 23 yrs, F: 21 yrs, F: 19 yrs, F: 17 yrs)]

In another case, the mother who observed a love-bite on her 17-year-old son's neck merely conveyed to him the view that she 'was not impressed'. When asked the reasons for her disapproval, she indicated that in her younger years, acquiring or giving a love-bite was indicative of a 'cheap' sexual intimacy. She reported that her perspective in this regard

was 'stupid' in view of the shifts in sexual norms that had occurred since her own youth; however, she nonetheless held a conservative view on the issue and wanted to convey her disapproval to her son. This indicates the sometimes contradictory sentiments of parents, which depth-interviews can capture. When probed as to whether she saw the episode as an opportunity for sexuality education, she indicated that she had assessed that the young man was too embarrassed to discuss the issue, but did not want the incident to pass without intimating her reproach.

The notion of 'respect' was often invoked in discussions with their children, according to many participants. When asked if they elaborated on what this meant with the adolescent, most participants believed that he or she would understand its meaning. The implicitness of much sexuality education by parents will be considered in a later sub-section, which considers the depth and clarity of safer sex messages that parents transmit.

6.2.4 *Tacit moral messages: regulating sleeping arrangements in the home*

The moral agenda of parents from all socio-economic groups was also played out in signals they conveyed regarding sleeping arrangements in the family home. A number of participants referred to occasions where the girlfriends of their teenage sons (usually 16 years and upwards) stayed overnight in the family home following specific social events. In such circumstances, the parents, and particularly fathers, objected to the couple sleeping together (either in the bedroom or on temporary bedding on the floor). The situation tended to arise more frequently in relation to young men bringing their girlfriends to the family home (teenage girls having the boyfriend stay over was far less common). In such cases, parents tended to be explicit with the young people about the sleeping arrangements, indicating clearly that they had organised a spare bed, sofa or sleeping bag for the guest at some physical distance from her male friend, yet implicit about their rationale for such arrangements (to prevent sexual activity). An example is as follows:

He announced that your one [17-year-old female friend of son's] was staying over, 'Was that okay?' – Now I know that young one's mother and father...and all I said was, 'That's okay, it's too far for her to get back to [names townland]', but that [names his wife] had blankets and quilts brought down for the front room. I said it in such a way that he'd know exactly what I meant: ...no humping ... God no, I didn't say that! [No. 43, SEG 4, father of 3 children (M: 17 yrs, F: 15 yrs, M: 11 yrs)]

Apart from their own objections to the notion, these participants indicated that they did not have definitive permission from the girl's parents to allow her to sleep with their son, and they felt that they had some responsibility for her welfare while she was in their home. This suggests that protectionist discourse over female sexual behaviour was being invoked, which came across as being far stronger than concerns about the welfare of young men in this regard.

In general, parents also disapproved of their older teenagers and even young people in their twenties sleeping with boyfriends/girlfriends in the family home, and communicated this information to their children if it was ever a consideration. The only exceptions to this broad tendency came across in the group interviews with the five women from SEG 6 who were far more tolerant of girlfriends and boyfriends sleeping together, provided that they

were in a relationship and had reached 18 years; although the 17-year-old daughter of one mother in this group had been allowed to sleep in the family home with her boyfriend. The vast majority of parents, however, were far less liberal, though some reported that they would have to accept this arrangement as children moved into their twenties and beyond.

6.2.5 Parents presenting a liberal perspective

While most parents were overtly disapproving of sexual promiscuity and early sexual experimentation, there was a small minority of parents who held a more consistently liberal stance about adolescent sexuality. Their stance was that young people should be offered full information about the consequences of sexual activity, and thereafter the responsibility for decision-making about sexuality rested with the young person.

You can't shelter them from it. That you can't protect them from it apart from offer them the information and know that it is their decision at any stage and that I can't go out to a nightclub and hold her hand etc. and only...they can decide when they want something to happen. [No. 32, SEG 4, father of 3 children (F: 18 yrs, F: 15 yrs, F: 11 yrs)]

One mother, for example, felt that encouraging her children to practise safer sex was more important than "going around with blinkers on and think[ing] we were all virgins going to the altar". Interestingly, and in contrast to most others, she was not afraid to reveal her own sexual history to her children in imparting to them the importance of safe sex, telling them,

I am not stupid. I was young myself. We all experimented. [No. 10, SEG 4, mother of 4 children (F: 21 yrs, M: 19 yrs, M: 13 yrs, F: 10 yrs)]

6.3 Parental messages about sex and the practice of safer sex

While, as indicated in Section 5, many parents prided themselves on their openness in relation to sexuality in discussions with their children, when participants were probed about the content of safer sex communications, it often transpired that issues were covered in a very superficial way. Details such as what sex or sexual feelings feel like, alternatives to penetrative sex to experience sexual pleasure, how to interact with a partner as the intimacy evolves, how to establish sexual boundaries, and feelings of possible insecurity or physical inadequacy were not aspects of adolescent/parent communications about sexuality.

Thus, from parents' accounts, it appears that details about sexual intercourse and how and why it happens tended to be largely absent from sexuality education, although there were exceptions. In one case, a mother reported having provided the full details of sex when her daughter was ten years old, explaining that a man has a penis and a woman a vagina and that during sex, the man places the penis in the vagina. (The mother also emphasised her moral stance on the appropriate context within which sex should be practised, that is, in a loving relationship). Interestingly, this example was one of the few where the mother engaged in the more traditional 'talk'. In the majority of cases, parents believed that young people would acquire details of sexual intercourse at school.

Reticence on the part of parents to be explicit and direct also extended to communication about contraception. The vast majority of parents (even the more liberal among them)

hoped their adolescents were not sexually active until their late teens at least, and many participants had never mentioned contraception in any overt way to their teenagers (for reasons that will be considered later in this section); however, there were those who emphasised this strongly and explicitly. One mother, for example, reported that she had explicitly discussed contraception with her 14-year-old daughter, explaining the various methods of contraception. She reportedly also told her daughter that if she was sexually active, she hoped she would tell her so that she could provide her with the appropriate means to practise safer sex. (This was something that several parents apparently conveyed to their teenagers, usually to their sons, in a jestful way.) Consequently, while she was ambivalent about young people engaging in sexual activity, for her the main issue was protection (against diseases and unwanted pregnancy). Therefore, despite her construction of an appropriate moral context for sex, this morality discourse was not to the exclusion of emphasising safer sex for her children. Similarly, in the case of another mother who reported that while she objected to the notion of her (adolescent) children engaging in casual sex, she did not sacrifice imparting information about contraception and protection on the grounds of emphasising a moral message. Consequently, she reported that she was "very, very strong on the contraceptive thing". Part of this discourse was her message to her sons of being responsible for their contraception as opposed to relying on their partner. This emphasis on joint responsibility stemmed from her fear that her sons might meet a sex partner who said she was on the pill and then depend on that as protection. Another mother felt it was important for her young teenagers to be aware of issues surrounding pregnancy and contraception, and spoke to them about this; however, she drew the line at actually providing them with contraception.

It appears that the educational strategy of these participants was at variance with that of most of the other parents who purported to send a safer sex message to their children yet sought to accomplish this without actually discussing in any depth with their children how they might practise safer sex. Participants' accounts suggested that the safer sex message often appeared to be imparted in an indirect rather than a direct way. While some parents (these were a sizeable minority) stated that they made direct reference to using condoms in some interactions at least, most narratives suggested that the safer sex message was indirect, couched in terms like 'be careful' or 'watch yourself'. Even where parents stated that they had used the word 'condom' in the interaction, the substance of the educational endeavour usually appeared to lack both depth and detail. Such messages, albeit direct, did not, for example, extend to technical detail of how to use a condom, nor practical information as to where to purchase condoms. Furthermore, condom-use tended to be promoted more heavily with boys (see Section 7). Additional information on the substance of indirect messages and, indeed, why parents were reluctant to be more forthright in their safer sex messages is provided later in this section. Before moving on to explore indirect messages further, let us consider two examples of parents' direct yet superficial messages about safer sex. In both cases, the accounts suggest that parents are prevented from developing a discussion on safer sex with their teenager because of the responses of the latter. In the first case, the mother's consciousness of her son's embarrassment and his physical withdrawal from the situation ultimately closed the educational endeavour down, obviating the possibility of imparting any detail about condom use. (This scenario was very typical, as indicated in Section 5.)

No. 25: [Describing safer sex message to her son] Just 'Be careful what you are doing.'

Int: And would you teach them about how to be careful?

No. 25: Well I haven't gone into great detail but...

Int: Just to say be careful and you'd think he would know what that means.

No. 25: But, you know, condoms and stuff.

Int: You've said that, have you?

No. 25: Yes, but he gets very embarrassed.

Int: But would you say to use condoms if you are going to [have sex]?

No. 25: Yes, but he just doesn't want to have that conversation. [He would say] "Would you stop?" and he'd walk away because he is not comfortable talking like that. [No. 25, SEG 5, mother of 2 children (M: 16 yrs, M: 12 yrs)]

In the second example, the adolescent tells his father that he is too young to be sexually active, but reassures him that when he is old enough, he will 'be alright'.

Int: What would you say?

No. 39: 'You know when you are having sex you have to be careful, you have to know the person and you have to use contraception.'

Int: And would you say what you'd have to use?

No. 39: Yes, straight out: 'If you are having sex with somebody you'd have to use condoms.'

Int: And what would he say, would he respond?

No. 39: 'I'm too young for that but when I am old enough don't be worrying, I'll be alright.'

Int: Would you say anything else about condoms?

No. 39: No, that'd be it. Straight out. [No. 39, SEG 5, father of 2 children (M: 16 yrs, M: 12 yrs)]

When the father was probed as to why he did not provide further information on condom-use, he indicated that his son 'knew it all already' from school and television.

To recapitulate, these are examples of direct but superficial information about condom-use being transmitted by parents. In the next section, we consider indirect and tacit messages that parents reportedly transmit to their children about safer sex.

6.3.1 Covert safer sex messages: innuendos and intimations

In many instances, parents transmitted messages about safer sex in an indirect manner by innuendo or intimation rather than in an explicit way. (A few parents reported that this was indeed the only way that they communicated with their children about sexuality.) Such messages tended to be conveyed in the context of a teenager commencing a relationship that prompted parental concern to some degree. The following is a mother's description of her attempt to convey a sexual safety message to her then 15-year-old son a few months into his relationship with a girl. The dialogue is laden with innuendo and suggestions, and although the mother considered both the relational aspects of the situation (the emotional bond between her son and his girlfriend) along with the potential negative consequences, a good deal is left unsaid. The narrative also conveys the mother's reading of her son's character compared to that of her other sons, and her concern that she might put ideas in his head.

No. 21: He had a girlfriend, and at the beginning I didn't think anything of it, and then I thought, 'Mmm, they have been together a while now [a few months] and maybe I should ...', because for some reason I didn't trust him as much as I trusted the other two.

Int: And did you ever think, "God, this guy, he could have sex with her in the first couple of weeks?"

No 21: No, not in the first couple of weeks.

Int: You felt he wouldn't?

No. 21: Yes, and I knew the girl as well and I didn't think it would happen. But as it went on and I thought he seemed to really be in love - like you can be at 15, and I said, 'That's beginning to get a bit dangerous in that way, you know, something could happen.' ...So I sat him down, the two of us in the kitchen and I said, you know, talking about the girl and all that and I said, 'Well, you know, if you really respect her and you love her as much as you do, make sure that you treat her properly.' And he said, 'Of course I do.' And I said, 'But [name], you know exactly what I mean.' I didn't ask him if he was having sex, didn't, I thought I'd put ideas in his mind! But I said, 'You know, she is a lovely girl' and all that, and I said, 'I have seen too many girls that are left holding the baby metaphorically and in reality.' And he said, 'Don't worry, that won't happen.' And I said, 'Well you know, I think I should talk to you about it' and we had a chat.

Int: And what did you say? I know you were worried in case you gave him ideas, did you say, 'Use a condom', or...?

No. 21: No I didn't say it in so many words, I said, 'I know you love her very much but you are still very young'...But I didn't tell him to do this or do that. I said, 'Look, make sure that it doesn't come to that.' [No. 21, SEG 2, mother of 3 children (M: 25 yrs, M: 21 yrs, M: 16 yrs)]

When probed as to why she did not refer specifically to condom-use, the participant merely repeated her concern that this may have encouraged sexual behaviour; she also indicated that it might also (erroneously) signal to her son his mother's tacit approval of sexual activity between the couple.

This covert manner of parental communication about safer sex in instances where their adolescents were in relationships was evident in several other narratives.

I don't remember having a conversation with him about having sex at all. I know he did have a girlfriend a while ago and I was always just very like, 'Treat her nice', which was what I was promoting: a bit of respect and treat her well. [No. 15, SEG 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

No. 12: Let's put it this way: I never would have said, 'Make sure you have a condom when you are going out with your girlfriend.'

Int: You never said that to the lads?

No. 12: No, I wouldn't have. But I'd have said, 'Make sure you take care of that girl, and don't do anything that you are going to regret.'

Int: And would they know what that meant?

No. 12: They'd know what that meant.

Int: And what did you mean - don't have sex?

No. 12: Not necessarily not have sex, but make sure she doesn't get pregnant. I mean, well that is what I was leading them to, I certainly wasn't saying, 'Don't have sex,' because I know from being in school here teaching that certainly, at a very young age, they are getting sexually...young. [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

The following fleeting and very general advice is fairly typical of the safer sex message that parents passed on to sons.

Int: So was there any other thing that you remember that you might have said to him about sex or condoms or anything ever?

No. 14: I would have said to him to be careful and protect yourself. I would say that I hear there are a lot of diseases going around. [No. 14, SEG 6, father of 3 children (M: 22 yrs, F: 19 yrs, M: 17 yrs)]

While parents in all socio-economic groups appeared to want to provide more detailed information to teenagers if requested, contraception and STIs were topics that participants from all SEGs often overlooked completely, assuming that children were informed about these at school or through the media. In other cases, while messages about condom-use for STI or pregnancy prevention may have been conveyed at every opportunity or with some regularity, the depth at which these issues were covered was questionable. Furthermore, although some parents stated that they were very open with their children about relationships and sexuality, when asked about specific issues, such as what they had said to their children about contraception and/or STIs, some (sometimes to their own surprise when they were pressed to think about it during the interview) realised that they had said little or nothing. When asked directly whether they thought that their child had garnered details about sex or had a general understanding, parents, sometimes after a brief reflection or hesitation, believed that he or she had a general idea rather than an in-depth understanding.

6.3.2 Parental education about contraception and safer sex: challenges, barriers and assumptions

One of the dilemmas for parents was to identify the right point in time at which they should impart knowledge of contraception to their teenager. Most parents stated that they did not feel the need to discuss contraception with him or her, because their adolescent was not in a relationship and they were reluctant to introduce the topic too early, or because they assumed that the young person had already acquired enough knowledge on sexuality. In effect, they did not perceive this as information that parents should ensure that their children should possess, or as part of their tool-kit for engaging with the world, regardless of whether they are in a relationship or not. One father described why he had not discussed contraception with his 12-year-old son, as follows:

I don't see the need for it at the moment, he is just 13 [participant indicates elsewhere that the child will turn 13 years in a few weeks]. I don't feel from him at the moment that he is interested in going to getting involved in a full sexual relationship. I would really like to wait until he starts asking rather than me kind of saying, 'Well here is a condom, this is what you do'. And I could see him just foaming if that happened. [No. 23, SEG 2, father of 2 children (M: 12 yrs, M: 8 yrs)]

One mother indicated that she would "definitely" address contraception with her older son once he had a girlfriend – something she did not see a need to do beforehand. Another used contextual cues to ascertain when it was appropriate to explicitly discuss contraception with her children – taking their transition to older discos as a signal that it was appropriate to advise them regarding contraception.

The following extract illustrates a typical perspective from the mother of a 14 year old who assumes that the adolescent 'knows' about contraception, and alludes to the fact that he is only 14 years old. Although she discovered indirectly that her son had kissed a girl, she believed that he did not have a girlfriend, and did not appear to be 'looking for one'. She contended, therefore, that there had not been a need to educate him on contraception thus far.

Int: And did he ever say anything or has your husband ever said anything about condoms, or do you know if they have covered that [at school]?

No. 16: I don't know now, to be honest with you, and I haven't actually said anything to him about condoms...I suppose, like, he knows. I kind of feel that he is 14 and it is only in the next few months or the next year or so that we need to talk to him...I feel he is, he hasn't got a girlfriend...A kiss probably...I know he is not kind of...like, when [name] and all his friends had girlfriends and all it wasn't a problem with [son] - it didn't bother him when he didn't have one and he wasn't looking for one. [No. 16, SEG 5, mother of 2 children (F: 21 yrs, M: 14 yrs)]

However, she had doubts about the wisdom of waiting until such a time as a romantic relationship began, as did a number of others.

I suppose I am wrong, like, because I kind of feel that he is a bit young and then when he does start going out with girls, you know, but maybe I should be telling him now. I don't know. [No. 16, SEG 5, mother of 2 children (F: 21 yrs, M: 14 yrs)]

I suppose part of it is, maybe, that you want to give them the information but don't want to give them too many ideas either. So I suppose you kind of limit what you are getting through to, to just keep them at the stage you feel they are at whereas they may be actually a bit ahead of you. [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

A number of other parents also expressed concerns that the discussion of sexuality with children "puts it into their head". One of these, for example, had not encouraged her 17-year-old daughter to utilise contraception because she felt that the provision of information about safer sex would be perceived by the young person as permission to engage in sexual activity. Consequently, her preferred approach was to encourage her children to practise abstinence.

I never encouraged them to use contraceptives because I never wanted them to be engaging in sex at that age, you know. So I would have been encouraging them to maybe take their time and not to get involved so young...I never encouraged it. I would have gone the other way. I would have said abstain from it...I'd possibly be old-fashioned. [No. 3, SEG 3, mother of 4 children (F: 23 yrs, M: 22 yrs, F: 19 yrs, F: 15 yrs)]

Therefore, this mother perceived contraception as a moral issue as opposed to a means to protect against the negative effects of sexual activity. Others also expressed a reluctance to engage in discussion about contraception, preferring instead to encourage young people "to behave" when going out.

I never thought of contraception...I would have tried to steer them that they didn't carry on that way. [No. 4, SEG 3, mother of 5 children (F: 25 yrs, M: 23 yrs, F: 21 yrs, F: 19 yrs, F: 17 yrs)]

Whilst one of the main reasons why parents stated that they did not discuss contraception with their adolescent children was because they did not believe them to be sexually active (as discussed in Section 5.5.1), many also assumed that their child already had a sound knowledge of sexual issues acquired through various sources. The main source to which parents referred was school, followed by the media, and in particular television. A few participants referred to television programmes such as *Home and Away* and other soap operas where issues of relationships and sexuality featured regularly. Text-based media such as books were also mentioned, as well as magazines in the case of girls, although the latter occupied a marginal position in parents' narratives, and usually only emerged through prompts by the interviewer. Parents also mentioned friends, but to a much lesser extent and sometimes with an acknowledgment that these were an unreliable source of sexual knowledge. However, in the case of younger adolescents (13-14 year olds) a few parents believed that it was through friends that their child had already achieved an understanding of the mechanics of sex, although they had no direct evidence of this.

In addition, many parents referred to their perception that their child was bright and would 'pick things up'. Furthermore, as indicated earlier in Section 5.4.1, several parents imparted that when they attempted to broach issues of sexuality their adolescents had informed them (the parents) that they already knew all about sexuality, and most parents seemed to accept this. An example of a father's assumption that his adolescents had acquired detailed knowledge from other sources is as follows.

Int: You know the messages that you are giving him...Would you say that they know the detail or is it the general gist?

No. 12: I'd say they know a fair bit of the detail.

Int: And where would they get most of that?

No. 12: I'd say from books.

Int: At school?

No. 12: Yes, at school.

Int: Did you have any books at home?

No. 12: Gosh! I can't recall if there were books at home, there weren't many, if there were.

Int: You think most of the detail like how to put on a condom they would get from books?

No. 12: Yes, probably.

Int: And symptoms of an STI?

No. 12: Yes, certainly. I wouldn't have discussed things like that with them, and I doubt very much if (wife) would. I mean, we discussed the possibility of picking up something all right and the possibility of avoiding pregnancy. [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

6.3.3 Evading direct references to the body and bodily functions

Even in the narratives of the five women from the lowest SEG, where condom talk and the use of humour and slugging were reported as regular features of adult-adolescent communication, and where there appeared to be a greater acceptance that young people were sexually active, aspects of sexuality appeared to be dealt with very superficially. While there were attempts to identify and name parts of the body to expand the young person's lexicon and understanding of the workings of the body, there were also examples of glossing over issues without a clear explanation of how the body works. The following is an example of a mother's explanation of body changes to her son when he was 12 years old.

No. 34: Their body parts would be changing and, 'There is hair going to grow under their arms and down below and you will feel your body different and things will be released from your body [unclear words]. And you will think there is something wrong but there is not.'

Int: So you'd say that things are going to be released from your body.

No. 34: Yes.

Int: Being wet dreams, is it?

No. 34: Well, I didn't want to say wet dreams, 'But don't get frightened and don't think it is your body going...and if you feel you want to know more just ask me,' you know that way? [No. 34, SEG 6, mother of 1 child (M: 13 yrs)]

In another such case, the mother described how she dealt with explaining menstruation to her son when he was 13 years old. What occurs is that the young person is expected to request information, and even when he did ask, the explanation he received was very vague:

No. 35: When they see the sanitary towels and they say, 'What are they for?' And I'd say, 'They are women's things.'

Int: And would you say anything about periods?

No. 35: No. I just said they are for women. You know they know because if they are going to the chemist, 'Get me that,' and I'd say [unclear words] and they'd put it in the brown bag.

Int: Would you be embarrassed saying that they are actually for periods: I bleed every month?

No. 35: Probably a bit but, like, if he asked me I'd tell him. Or if I thought he felt comfortable or if there was a bit of him that wanted to know, like, I'd say if he wants to know any more to ask, never to feel ashamed or embarrassed because your body is... [trails off] [No. 35, SEG 6, mother of 2 children (M: 14 yrs, M: 13 yrs)]

While parents often appeared to foreclose on information to younger children about the details of sexual intercourse because they did not believe that the child was ready for such information, the following is an example of how a participant from an area of high socio-economic deprivation evaded even a simple explanation of female reproductive anatomy when interacting with her 11-year-old son.

No. 38: My little fellow seen my Tampax and like he thought they went up my bum!...but I just says, 'No son.'

Int: And would you be a bit embarrassed going in and saying, 'Well actually there is another compartment down there'?

No. 38: I am not too sure if he does know or not, do you know what I mean, but I'd let him say it to me first, if he wanted something explained, I'd say it. Probably because he wasn't ready or something like that, I just leave it in his case. [No. 38, SEG 6, mother of 2 children (M: 15 yrs, M: 11 yrs)]

6.3.4 Acknowledging gaps in young people's knowledge

In spite of what seemed to be a passive acceptance by parents that their adolescents had a sufficient understanding of sexuality, a few expressed scepticism about the depth of knowledge that young people really had about sexuality.

But there again, there is a side of it where it is so much in your face that maybe they don't actually know as much as they make out they know. [No. 23, SEG 2, father of 2 children (M: 12 yrs, M: 8 yrs)]

The above participant reported his belief that there was a high level of exposure to things sexual in contemporary society, and that sexual imagery 'had become just part of the background for them [young people] now'. However, he also went on (as illustrated in the quotation that follows) to express uncertainty as to how deep the knowledge of those exposed to it really was.

They are dancing on TV and people grabbing their crotch and everything like that...I mean, I actually don't think they think much about it. It is, it seems to be a very kind of broad type of thing, there doesn't seem to be any kind of follow-through with it, it is just the image contact or there is a girl, she is beautiful and she is throwing her hair back or pouting her lips or something. There doesn't seem to be anything after that, in what I have seen, anyway. [No. 23, SEG 2, father of 2 children (M: 12 yrs, M: 8 yrs)]

Another parent revealed similar sentiments, as follows.

Now I think they are all bombarded with it all so young...maybe we forget to talk about it now because it is so in your face, really. [No. 27, SEG 3, mother of 6 children (M: 25 yrs, M: 23 yrs, F: 18 yrs, F: 15 yrs, F: 13 yrs, M: 13 yrs)]

Another parent indicated that she had spoken to her daughter about STIs and was aware that the children get leaflets about it in school. She believed that young people were very much aware that STIs were prevalent; however, she also qualified this by suggesting that it was debatable how much of the information children actually take in. In the case of another participant, who did try to talk directly to her daughter about periods, the girl's resistance to the message (by her claims to have prior knowledge of the topic (an aspect the blocking techniques of young people as discussed in Section 5)) compromised the mother's teaching and the girl's learning of detail. From that mother's experience, reinforcement of sexuality messages was important because in her experience, her daughter had not really understood her (the mother's) message about menstruation.

It doesn't necessarily mean that they take it in. A situation came up in first year and we had kind of talked about having periods and we had talked about what happens when men and women and new boyfriend or girlfriend and you have to respect yourself and all this, and, 'I know, I know', was the response, 'I know, I know, I know'. And this was before she would have actually got her first period so whenever the time came that she actually did get her first period she thought she knew it all. But she didn't realise...she thought this was a one-off and you didn't get this every month. So she had heard all about periods, periods, periods, but yet it didn't dawn on her that this is it for the rest of my life. And then I kind of thought...obviously all that I have been telling her, she may have took it in but not necessarily understood it. So then kind of repetition sometimes helps, you know, that kind of way, to bring it home. [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

6.4 Messages about the negative consequences of sexual activity: pregnancy and STIs

Issues that did tend to be fore-grounded in parental communications with adolescents about sexuality were the negative consequences of sexual activity, namely unplanned pregnancy and STIs. One father justified his emphasis on the negative consequences by articulating how sexual freedom can compromise the liberty of both the adolescent and his or her parents in a more general way.

You can encourage an individual liberty but if it starts to become a problem to other individuals, in other words if you basically say to your child, you can do whatever you want sexually. But then if the ramifications of that come back on you, they become pregnant at 14, you [the parent] become effectively a parent again, because you would be, you know what I mean. That is when it becomes problematic, it starts affecting individuals, it affects the way your child's entire life develops from there on, so in one sense the sexual liberty would have compromised another liberty i.e. your child's ability to have a full life through their teenage years and into their twenties free of parenthood, etc. [No. 31, SEG 2, father of 2 children (F: 11 yrs, F: 7 yrs)]

For a considerable number of parents with daughters, pregnancy was a fear, with some mothers in particular keen to point out to their daughters how easily they could become pregnant. A few male participants with daughters indicated that they had not spoken to the daughters about pregnancy, but believed that their partners (the mother) had done so. (This assumption by some of the male participants that the mother had undertaken sexuality education is considered in Section 7.3). While one father indicated that STIs were a greater threat to his daughters than was pregnancy, most parents emphasised the disease-focus with regard to their sons. Participants from the lowest socio-economic group in particular tended to see pregnancy as the primary problem for young women, and diseases as the primary problem for young men, and appeared to convey these messages to their children. This may be because most of them had their first child at a young age, with limited support from the father, and could see similar patterns in their locality, where, from their perspective, young women bore the brunt of the responsibility.

No. 38: But I'd always say, you know, the pregnancy and the diseases they can get ... That they could ruin their life, getting girls pregnant, and that not only...I would be very open in saying, 'Well they wouldn't be ruining your [son's] life because men's never generally [trails off] ... I mean, the girl is always left at the end of the day with the baby, do you know what I mean, and just to take responsibility in that way.

Int: Have you said anything about what they would have to do if a girlfriend got pregnant?

No. 38: No - they'd get a shock! [No. 38, SEG 6, mother of 2 children (M: 15 yrs, M: 11 yrs)]

A number of these mothers (from the lowest socio-economic group) stated that they were concerned about a 'knock on the door' with news from another parent that their son had been responsible for a young woman's pregnancy, something that was less strong in the accounts of other participants. In acknowledging the greater responsibilities that rest with the woman in the event of a crisis pregnancy (as some had experienced and had witnessed locally), these mothers may be reproducing gendered responsibilities, inadvertently reinforcing to their sons the notion that crisis pregnancy is the woman's problem. However, there were others from working-class backgrounds (SEGs 4 and 5) who attempted to highlight male responsibilities in the event of a crisis pregnancy. One woman from a working-class area, who had herself become pregnant at 16 years, recounted how, in the presence of her 14-year-old son, her nephew joked about 'going to go out and have a couple of kids and leave them with [his] mother because [his] mother did that with her mother. The participant stated that she spoke seriously with her son about the issue, highlighting the difficulties that early pregnancy had posed for her and her greater ambitions for him. A number of other participants, both working-class and middle-class, indicated that they pointed out to their sons that the latter would have to take responsibility

for a pregnancy should it arise. One woman recounted that while watching a scenario involving an absent teenage father on the Gerry Springer Show, she told her son (aged 17) that the family did not want to be pulled into the paternity test experience, and that her son would have to "take on the responsibility for anything [he] create[d]". The mother stated that she made it clear that she would not take responsibility for a baby at weekends; rather, the responsibility would rest with her son.

Information about pregnancy was sometimes transmitted indirectly; for example, two women stated that they had joked with their sons that they did not wish to become young grandmothers. The substance of participants' messages to their children about the possibility of becoming pregnant was, as expected, disapproval, and most had conveyed these sentiments to their children. However, there were a few parents who recalled that during their own adolescence a non-marital pregnancy, especially a teenage pregnancy, would have devastated their parents, and that they had been aware of this growing up; the strength of the disapproval that they conveyed to their own children was much more moderate, and indeed sometimes peppered with covert notions of support. Indeed, participants indicated their reluctance to demonstrate excessive disapproval of an unplanned pregnancy, lest, in the eventuality that it would arise, the young person would suffer inordinate levels fear and stress. Thus, parents had to balance messages about their disapproval about an unplanned pregnancy with a notion that they were also supportive parents who would support their children, no matter what adverse (albeit self-inflicted) eventuality transpired.

Further indications of the child-focused perspective in sexuality education around pregnancy is evident in the case of a participant who recalled how, when she got her first period, her own mother had made a 'big deal' about how starting periods signified becoming a woman and concomitantly, signalled the dangers of the possibility of a pregnancy. She had felt mortified at this approach, and was very empathetic with her own daughter when the latter's periods started, and did what she could to adopt a gentler and supportive approach with no reference to the possibility of a pregnancy.

In addition to more direct (albeit predominantly very general) advice to children about the possibility of becoming pregnant through unprotected sex, some participants referred to indirect messages that they transmitted by their reactions. One such perspective was that becoming pregnant indicates poor rationalising, and low levels of individual control and responsibility. For example, with reference to a local teenager who had apparently contracted the HIV virus, one participant describes her response when the matter was raised in the family home.

What sort of an eejit is she [teen who contracted the HIV virus]? Is there not enough information out there for her to know? I'd say it: 'Wouldn't you think she'd have more sense?' [No. 2, SEG 2, mother of 2 children (M: 17 yrs, M: 14 yrs)]

In the course of some interviews, a few participants reported aspects of their child's value system in relation to adolescent pregnancy which tended to reflect adult normative discourses. One participant indicated that her 17-year-old daughter had remarked that early pregnancy 'mucked up your life', was 'very stupid' and would 'ruin your life'. These comments emerged from the young woman spontaneously on hearing of an academically

bright 17 year old who had become pregnant. In this example, the adolescent had voluntarily offered her view, an occurrence that appeared less common than that of parents transmitting messages about their value system to the child.

While a few parents indicated that they contextualised consequences and safety messages within a world view that sex was a good thing (provided that one was in a stable relationship), discourses of sexual pleasure were virtually absent in parents' descriptions of their sexuality education. When parents were asked about this, they tended to feel that discourses of pleasure were available through other channels, sometimes to an excessive degree.

Jesus, they get enough on pleasure from everything else – too much, actually – that's all they get. That's all you get on the telly, and in the magazines. The last thing that I'd be telling them is how great sex is. Not that I'd be saying it's bad like in the old days when sex was dirty and all that – that wasn't right, but I want them to know that one mad minute of pleasure could ruin your life. Think about the consequences, like. [No. 43, SEG 4, father of 3 children (M: 17 yrs, F: 15 yrs, M: 11 yrs)]

In this way, some parents believed that they foregrounded responsibility as a corrective to the pleasure emphasis around sexuality in contemporary culture.

6.5 Communication about homosexuality and lesbianism

Parental education about homosexuality and lesbianism tended to take the form of parents passively transmitting values and beliefs about these sexual orientations, rather than actively explaining what homosexuality and lesbianism actually mean. Explanations and instruction on the meaning of these terms tended to be reactive, in response to a child's questioning, which was more common among pre-adolescents. Parental messages to children about homosexuality – such as tolerance, approval, ridicule or disapproval – tended to be transmitted in the context of identifying someone known to members of the family as being possibly (or openly) gay. Although lesbianism was mentioned occasionally, male homosexuality had far greater prominence in the narratives of participants in recounting their own and their children's perspectives on gay issues. Indeed, only when the interviewers specifically asked the participants for their perspectives on lesbianism did it feature at all, and a few commented that they knew very little about it. The virtual absence of a discourse on lesbianism in parental communications with their children is revealing and reflects the limited space and more marginal status afforded to lesbianism compared to male homosexuality in popular culture.

A few participants indicated that their teenage children spoke about homosexuality in the context of humour, through jokes and slugging. Some of this included the private ridiculing and imitation of effeminate behaviours of those either in their own or their parents' social circle. Some parents stated that they attempted to correct their child's responses in this regard, while other appeared to collaborate in it, thus reinforcing the deviant status of homosexuality.

Almost all female participants indicated that they tried to be positive and attempted to convey the view to their children that, in the words of one mother, 'there is nothing wrong with being gay'. For example, one mother stated that when her sons had made reference to one of their peers who had apparently exhibited effeminate behaviour and proposed

that he might be gay, she consciously 'did not overreact' in order to effect the same response in the children. (A few other parents also stated that they would try not to draw any attention to the issue of being homosexual in an effort to normalise it). That particular mother stated that she had conveyed to her sons that she had gay acquaintances who were among 'the loveliest people'. She also stated that she would never tolerate her children speaking about gay people in a derogatory fashion, and her son had thus far not 'passed [negative] judgement about gay people'. Although that participant had not discussed with her children the possibility that either of them might be homosexual, she believed that the world view on homosexuality that she had openly projected would indicate to them that she would not react negatively should they be gay. This fairly typical view of the mothers in the study acknowledges to the young people the societal notion of homosexuality as aberrant, and the mother's resistance to this construction of homosexuality. Indeed, identifying homosexuals as among 'the loveliest people', as frequently occurred in the narratives of participants, signifies reactionary positive discrimination against societal prejudices. A number of mothers indicated that in situations where there were negative or derogatory insinuations about being homosexual, they pointed out to their children that there was 'nothing wrong' with being gay.

When mothers spoke about the anticipated the reaction of the child's father to their child possibly being gay, a number indicated their belief that the partners would have greater difficulty with this than they themselves (the mothers) would. Several alluded to the difficulty that men in general appear to have with the notion of homosexuality. However, virtually all contended that, in their own situation, the child's father would ultimately accept the situation. Some mothers spoke of the greater difficulty that men would have with the idea that their son might be gay. There was diversity in how the male participants themselves responded to the prospect that their child might be gay, with some indicating a similar response to their female counterparts. In one situation, the only one where both parents were interviewed together, the father indicated that he would have no difficulty with any of the children being gay; however, the mother admitted that she would find it difficult to accommodate to the idea, although she assumed that she would eventually. However, a small number of fathers were overtly negative about homosexuality, and revealed that they would be distressed if their child emerged as gay.

Discussions about the young people themselves possibly being lesbian or homosexual did not tend to be a feature of parent-child communications, although there were exceptions; for example, in the case of a mother who told her son that she would love him 'just as much' if he was gay. However, in spite of most parents' attempts to resist the notion of homosexuality as something deviant, almost all presumed that their children/adolescents were or would be heterosexual – even if they were pre-teens – and participants' accounts suggested that they had not discussed with their adolescent the possibility that he or she might be gay. Even the very questioning by the interviewer as to how a parent would feel if his or her child were homosexual or lesbian sometimes met with a clarification that reinforced the parent's assumption of the child's/adolescent's heterosexual status.

Int: How would you feel about your own child [boy aged 12] being gay?

No. 39: He's not going to be, but if he turned out that way that's the way he turns out...I think every parent would be rattled. You wouldn't be happy about it. But I don't think he's going to be gay. I think it's the age he's at that he doesn't like girls. [No. 39, SEG 5, father of 2 children (M: 16 yrs, M: 12 yrs)]

Even where participants showed a clear acceptance of homosexuality and lesbianism, being gay was something that other people, or other people's children, or even relatives were, but almost never associated with their own children. Furthermore, the vast majority indicated that they would find it difficult or distressing if their child's sexual orientation was lesbian or homosexual, although some were stronger about this than others. A few also indicated that young people themselves would not be comfortable telling their parents they were gay. Most participants were quick to point out that the basis of their potential disquiet was the negative societal attitudes and prejudices that some lesbians and homosexuals encounter, which would impact negatively on their child's life. Most also indicated that they would accept the situation, although acknowledging that it would present difficulties. One participant referred to the possibility of missing out on family life, suggesting that normative discourses that privilege heterosexuality heavily shape perspectives on childbearing.

One father, who was very clear and strong in his objections to homosexuality as something 'unnatural', and who acknowledged that he would have to ultimately accept the situation if it arose, also indicated his concern for the gay person's welfare in a society that was anti-gay.

No. 12: Well the word [gay] has come up and that, yes, and it would have come up so certainly we would be very aware of it anyway.

Int: And if it ever came up would you give a message about being gay?

No. 12: Given a message? No! I'd say, "No, no, no, can't stand those people," that would be my message.

Int: You would have?

No. 12: Yes, I have no time for that.

Int: So everybody would have got that, that dad..

No. 12: I'd say if God intended that he'd have done something different there, he wouldn't have made them like that.

Int: And would they challenge you ever, any of them, on that one?

No. 12: I would give my opinion and that is it, but I mean, because inevitably I'd say half of it is publicity, it's awful to say it but...

Int: You think people becoming homosexual...

No. 12: Yes, I think some of it is publicity, it is creating something, creating an image for themselves, a persona for themselves.

Int: So if they said to you that they were gay would you have a difficulty with that?

No. 12: I certainly wouldn't close the door on them or anything like that. I would have to obviously accept it, and I would accept it, but I'd certainly struggle with it because, you know, I'd find, God, it is going to be a tough life now no matter what way we look at it, and everyone will find it really hard to accept you, you are living somewhere with your partner or something like that. [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

While this participant presents a homophobic stance, ironically he simultaneously recognises that it is social stigma that contributes to the difficulties that gay people face.

Section 6: Key points

- The dominant pattern was for parents to convey the message to their children that sexual promiscuity was morally wrong; however, there was almost universal consensus among parents that pre-marital sex was inevitable. Moral messages were sometimes conveyed tacitly.
- A few parents (mainly fathers) indicated that they promoted a more restrictive version of appropriate sexual behaviour to their children than they themselves had practised when they were adolescents.
- There were no noticeable differences in the perspectives of parents in their thirties (at the younger end of the spectrum) compared to those in their fifties (at the older end) in terms of how they communicated with their children about sexuality.
- Both moral messages and safer sex messages from parents appeared to be in the form of tacit messages, innuendos and intimations about appropriate behaviour.
- Much of the knowledge that parents transmitted to their children on sexuality was at a superficial rather than a deep level.
- Some parents had difficulty in identifying how much knowledge about sexuality they should impart, particularly in early adolescence, and some were concerned that giving too much information, particularly about contraception, would encourage sexual activity.
- Most parents stated that they did not feel the need to discuss contraception with their adolescent because they assumed that the young person had already acquired enough knowledge on sexuality through various sources, such as school, the media, books, and friendship networks. In addition, many parents referred to their perception that their child was bright and would 'pick things up', and several participants accepted their adolescent's word that they already possessed a sound knowledge base on sexuality.
- Parental messages about safer sex tended to focus on discourses of danger and risk, with an emphasis on the negative consequences of sexual activity rather than discourses of sexual pleasure.
- For parents to communicate with their child about the possibility that he or she might be gay was rare – gayness was attributed to other people, with parents tending to assume that their children were or would be heterosexual. Mothers conveyed generally positive views on homosexuality and lesbianism; however, the majority indicated that they would have some level of difficulty in accepting their child as gay, but stated that they would ultimately do so. Fathers conveyed diverse views on homosexuality and lesbianism, with some highly critical and some very accepting. Like mothers, the vast majority indicated that they would have difficulty in accepting their child as gay, but stated that they would ultimately do so.

7.0 Parental sexuality education and gendering

7.1 Introduction

Gendering refers to the socially constructed roles and expectations of each sex that are embedded in social patterns and practices. While it is impossible to know how much of male and female behaviour is learnt and how much is given genetically, it is widely believed by sociologists that a great deal of our behaviour is socially learnt and passed from one generation to the next during our socialisation. This section is about the social attitudes and sometimes assumptions that parents express and the messages that they reportedly communicate to their children that may have a bearing on how young men and women see themselves in relation to sexuality. We begin the section by considering the extent to which fathers in the study related to traditional masculinity (associated with machismo) or whether they drew on alternative versions of masculinity. Next we turn to participants' views on the extent to which the provision of sexuality education should be a gendered activity, that is, whether mothers and fathers see themselves as having different roles, and whether girls and boys receive different messages. Finally, parents' perspectives on the sexual demeanour and behaviour of young men and women are considered, as are the messages that they transmit to their children in this regard. Here, we attempt to identify whether parents' criticisms of female dress and sexual demeanour represent a reproduction of the sexual double-standard or whether their positions capture a wider complexity about the commercial exploitation of young women.

7.2 Men and emotions

While traditional notions of masculinity reproduce a sense of toughness, emotional detachment and sexual machismo on the part of 'real' men, our data suggest that several of the fathers in the study recognised the social pressure on young men to present themselves in this way and conceal their emotional side. In the following quotation, one father describes his view from his own experience that, beneath the surface, boys can be more sensitive than they appear.

You see, being a boy, though, or having been a boy I know that an awful lot of it is bluster as well and swagger, like. I suppose a lot of boys and men are more sensitive than the stereotype would imply. [No. 31, SEG 2, father of 2 children (F: 11 yrs, F: 7 yrs)]

A few men recalled the vulnerability that they experienced in the course of their own socialisation through adolescence. They referred to the fear of rejection, since they were expected to follow normative gender codes and initiate the social encounter (like having to ask girls to dance) and the intimate encounter (such as holding hands). Some fathers articulated the vulnerability of those in the phase of adolescence as follows.

You have been given the handbook on it but the one you don't get is the emotional one because that is individual and that is the big one...Because I think for anybody at that age is probably the biggest emotional thing you are going to go through. Starting a relationship with somebody, even so far as boyfriend/girlfriend, just holding hands and all that sort of stuff, that step, it is a big one. And again, you look back on your own experiences in that, like myself, I was a very shy person, very, very shy as far as girls. [No. 26, SEG 1, father of 3 children (F: 18 yrs, F: 15 yrs, F: 12 yrs)]

I think that movement between the maturity, if that is allowed to happen at its own pace, and it happens at a different pace for everybody, like, that is a healthy thing and there are always feelings of insecurity and feelings of immaturity, fear, isolation. [No. 23, SEG 2, father of 2 children (M: 12 yrs, M: 8 yrs)]

When asked as to whether he intended to ever have the talk with his son (aged 12), one father indicated that if there was going to be a talk, it would be more about life skills, and how to face emotional rejection and so forth. Interestingly, that father was critical of new rules of conduct that attempt to circumvent the worst excesses of rejection, such as the practice of young men sending a friend to determine the level of interest of a potential girlfriend. His view was that learning to deal with the emotional exposure of possible rejection was an aspect of the rite of passage to adulthood, and rather than modifying the social practice itself, young men needed support in order to successfully achieve this.

Another male participant spoke at length about his teenage daughter needing to become emotionally content with herself before becoming dependent on a relationship with a man. His narrative is rich with detail about the importance for her of the need to develop herself emotionally. He himself spoke of having 'done a lot of work' on himself emotionally in dealing with his own addiction to alcohol. Yet another father reported that he had conveyed to his son that he was always there if the young man was troubled or confused in any way.

What these accounts suggest is that several men in the study embraced versions of masculinity that challenged traditional representation of masculinity and that they were open to or intended to communicate aspects of these to their children. This may have been a feature of the manner in which the sample was selected, that is, a study of this type may be less likely to appeal to men with a strong affinity to traditional machismo and more likely to attract emotionally-engaged fathers. Of note is that virtually all of these fathers indicated that their children were more likely to approach their mothers with regard to matters of sexuality, be they physical or emotional, and most admitted to having communicated very little to their children about sexuality because the children never took up their offer of availability.

7.3 Gendering in parental approaches to sexuality education

We consider two issues in relation to gendering and parents' roles in sexuality education, namely:

- Participants' views on the extent to which the provision of sexuality education should be conducted along gendered lines, that is, whether mothers and fathers have different roles.
- Participants' attitudes and expectations about the sexual demeanour and behaviour of young men and women.

7.3.1 Do mothers and fathers have different roles in sexuality education?

In many cases, participants indicated that sexuality education with their children (both girls and boys) was a shared responsibility between themselves and the child's other parent, where he or she was in contact with the child. Nonetheless, what came across strongly in the interviews with participants of both sexes was an assumption that sexuality

education was a stronger aspect of the mother's role because mothers were better at the task. There was also evidence that in spite of some participants' ideals of joint involvement in the sexual education of their children by both parents, the mother's more consistent presence in childcare meant that she had greater opportunities to engage in sexuality education than had fathers. For example, one mother asserted that while sexuality education should be a joint responsibility, practical obstacles did on occasion hinder her husband's participation in the process.

My husband's work would have kept him away in the evenings...in that event probably when soaps came on or whatever, maybe I was the one who would have ended up feeding more information to them. [No. 17, SEG 3, mother of 5 children (M: 25 yrs, M: 22 yrs, M: 20 yrs, F: 19 yrs, M: 13 yrs)]

In another situation where the daughters spent more time with their mother and the son spent more time with his father (a farmer) these circumstantial factors were brought to bear in the participant's rationalisation of the organisation of sexuality education in the family. A number of mothers reported that the child's father played no role in the provision of sexuality education, while others deemed this unlikely. A separated woman, for example, revealed that her ex-husband stated that he hoped that she had told their daughter 'the facts of life'. In a further case, a mother reported that she would take the "lead" when issues of a sexual nature were raised, and while neither she nor her husband had explicitly assigned responsibility, nonetheless, it would be "assumed" that it was her role. Another woman conveyed her husband's sense of relief when she informed him that he did not have to engage with sexuality education as she had spoken to their son. Almost all of the fathers in the study similarly deemed that mothers undertook all or most of the sexuality education of children.

Some of the mothers believed that the child would be more inclined to approach them rather than the father and a few of the male participants' perspectives concurred with this. In addition, a couple of mothers reported that their children had consulted with them about issues relating to the body and asked them not to tell their father that they had done so.

There were also households which seemed to exhibit heavily gendered practices, with mothers considered to be best placed to educate the girls about female-specific issues, and fathers to educate the boys about male-specific issues. Education around menstruation almost always came from the mother, and communication about periods appeared to be far less inhibited than communication about sex itself or contraception. In one case a mother accompanied her daughter to the doctor for a prescription for the pill, apparently for the purpose of dealing with a menstrual-cycle problem. (In two other cases where the mothers had gone to the G.P. with their daughters for the contraceptive pill, the daughters were in their early twenties.) In households where sexuality education was gendered mothers spoke of the content of some aspects of sexuality being passed on to fathers, such as information about using condoms, wet dreams and erections. For example, one mother reported that her husband gave their son "his chat" because she was "too embarrassed". She herself talked to the girls because "the girls would be very embarrassed about talking about sex with their dad". In such cases, this gendering was not circumstantial; rather, clear demarcations in terms of the perceived roles of mothers and fathers were evident. A male participant with daughters stated that his wife undertook all the parental sexuality education with their daughters, because she would have a better

understanding of issues pertaining to females and the daughters would be more receptive to this.

Girls would be more receptive hearing it from the mother more than the father. Again, just because it would be something that you don't want to, I suppose...human nature as it is, a female would be more receptive from the mum than would be from the dad. [No. 26, SEG 1, father of 3 children (F: 18 yrs, F: 15 yrs, F: 12 yrs)]

By and large, though, even in households where the education was gendered, mothers still tended to have an involvement in educating their sons on both physical and emotional aspects.

A number of participants referred to the greater ease with which father and sons and mothers and daughters can communicate about sexuality. In spite of this, with a few exceptions, as indicated in Section 5.4.3, neither mothers nor fathers were really comfortable talking to adolescents about sexuality. In addition, as indicated above, although some men and women in the study presented the same-sex discourse (that mothers would be better placed to talk to the girls, and fathers to the boys), several mothers admitted that, at the level of practising sexuality education, some fathers appeared reluctant to engage with their sons. To clarify, at the level of discourse – that is, how people think and talk – the view of some was that mothers would be better engaging in sexuality education with the girls, and fathers with the boys; yet participants who held this view sometimes went on to explain that their sons received little or no sexuality education from their father. This came across on occasions as subtle criticism by the participant of the father's apathy; for example, one mother stated that her husband 'would never have been like a new man,' while another purported that 'Mammy kind of deals with most things, we'll say...Mammy does everything' and yet another stated that, 'It [sexuality education] is very much laid at my door.' In a further case, a mother spoke of how her 15-year-old son might appreciate any discussion about condoms from his father – 'man to man'; that mother had asked her husband to talk to their 15 year old about condoms but reported that he had not done so. She believed that her husband was avoiding the topic. Another mother stated that she had been 'badgering' her son's father to discuss bodily changes such as erections with their son but was not sure if he had done so (the couple was estranged). Another participant reported that her husband abdicated responsibility for the provision of sexuality education to their son, content with the belief that his school-based sex education "is enough".

While this constitutes a degree of evidence that some young men may miss out on important aspects of sexuality education, because of the reluctance that some fathers appear to display in communicating with their sons, it should also be noted that male participants in the study who had sons in their mid to late teens did say that they passed on safer sex messages them, albeit sometimes in the indirect ways described in Section 6. It should also be borne in mind that collaboration between parents themselves as to what they should include in their child's sexuality education, and what exactly had been communicated by each, appeared to be the exception rather than the rule, irrespective of whether the parents were married, co-habiting or separated. Many of the male participants were unsure as to what their child's mother had covered and tended to assume that certain issues had been addressed. Prompted by the interview experience,

a couple of male participants stated that, for their own information, they would check out with their partners (after the interview) what sexuality education the mother had indeed undertaken. A few mothers similarly were unsure as to what the child's father may have conveyed.

7.3.2 Attitudes and expectations about the sexual demeanour and behaviour of young men and women

The majority of participants were quick to point out when asked that their sons and daughters received the same messages about their responsibilities for sexual conduct and the anti-promiscuity morality stance. (Just over half of the participants (n=22) had either just boys or girls while 21 participants had children of both sexes.) Where participants had all male or all female children the tendency was to state that had they had children of both sexes they would convey the same messages to each.) The equal-responsibility philosophy was voiced particularly in relation to crisis pregnancy, where some participants pointed out that they had made their sons aware that they would have to take equal responsibility should this arise (see Section 6).

As indicated in the literature review, in Holland et al.'s (1998) research mothers drew on a 'protective discourse' in assuming that girls required protection against the sexual advances of boys, and there were elements of this traditional gendered message in evidence in our data. The following examples illustrate this.

Yes, I would have talked to [daughter] about that. I would have kind of, as in, you know, you never let anybody put any pressure on you and if you are in a situation that you are not confident with, just say no. Those are the typical words: 'Just say no.' [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

I'd be saying about young fellows who would take advantage...because I mean my young one [aged 14] has a chest and all, she has gone from...last year she got measured, she was a 34B and she got measured two weeks ago and she has gone to 38D, and I'd be afraid of young fellows taking advantage because she does look a bit older than what she is and when she is wearing make-up and all. But I would warn her, her body has changed now and things can happen. [No. 37, SEG 6, mother of 3 children (F: 17 yrs, F: 14 yrs, F: 12 yrs)]

However, the protective discourse was not the only discourse on female sexuality invoked by parents, nor even the most dominant one, as we consider a little further on.

Discourses of the male sex drive needing to be controlled by a respectable woman were also in evidence in data.

Int: Would you be worrying about your sons as well?

No. 36: Like, they see the older teenagers and they hug and kiss and you say, 'That is probably youse in a couple of years,' and if it is now this is the way a woman should treat herself, like, and a man will probably try this or say that, and a girl that respects herself and a man that will wait, you never ever treat a woman like that.'

Int: You say that to the boy, is it?

No 36: Yes, parts of it the way the conversation goes, and, 'This is the way to treat a woman.'
[No. 36, SEG 6, mother of 4 children (M: 15 yrs, F: 14 yrs, M: 8 yrs, M: 5 yrs)]

In addition, some fathers cautioned their daughters to 'Mind those boys - I don't trust those boys', or passed a remark about 'know[ing] what young men were like', suggesting that the discourse of the male sex drive (Hollway 1996 [1984]) was a stronger feature of fathers' thinking than that of mothers. Thus, while data for fathers are very limited, fathers appeared more likely than mothers to weave between the discourse of the sexually driven male and the vulnerable male. There were also suggestions in the data that girls were made aware they would be the party with whom most of the responsibilities for a pregnancy would reside in practice, and therefore they should ensure that it did not happen (see Section 6.4).

While participants indicated that respect should be reciprocal and should mediate all relationships, their spontaneous narratives indicated that boys were more likely to get messages to show respect for girls and girls that they should respect themselves. For instance, one mother described her husband's advice to her son as follows.

You have to have respect for a girl. You don't just go out and sort of have sex with them for nothing at all – again, to try and instil in them that it is not something that they should be taking advantage of or letting anybody take advantage of them. [No. 10, SEG 4, mother of 4 children (F: 21 yrs, M: 19 yrs, M: 13 yrs, F: 10 yrs)]

In another interview, a mother reported that she had cautioned her 14-year-old daughter about the manner in which she presented herself locally, invoking the notion of respect to get her message across.

But [14-year-old daughter] is after having I don't know how many, but she is not going out with them, she is meeting [kissing] them, that is what they call it now, meeting...And I keep telling her, 'You know the way boys think and all those boys are going to be talking to each other and they'll be saying that you are easy.' I am trying to teach her to have a bit of respect for herself. It is very hard because she just thinks it is funny, she just thinks it is no harm. The boys would be ending up saying that she is easy. [No. 37, SEG 6, mother of 3 children (F: 17 yrs, F: 14 yrs, F: 12 yrs)]

Later in the interview, that mother voiced concerns again about her (other) daughters' sexual reputation, and while she acknowledges the sexual double-standard as something unjust, she accepts it as an aspect of life.

No. 37: I think they [daughter and her boyfriend] are kind of lucky because [names 17-year-old daughter's boyfriend] is her first boyfriend and I think he is the same, do you know what I mean, but I think it is going to be harder with the other two now because you have to watch them because you don't know who they are going to be with or where they have been, so you have to tell them they have to be careful.

Int: So you seem to be worried about the reputation of the girls.

No. 37: Well for their sake you would be. I mean, I try to teach them to have respect for themselves: they have to learn to look after themselves and their bodies.

Int: And what do you think, I know you have no boys, but if you had would you be giving them the same message or do you think they would get away with it more?

No. 37: I don't know, I think girls are more worry, though.

Int: Why?

No. 37: I just think they are, maybe it is because they can get pregnant, I don't know, I just think.

Int: Do you think there is this thing that girls' standards are different and the old kind of notion of...[participant interrupts]

No 37: The girls always [unclear words]...still, no matter what, for her own sake, do you know what I mean?

Int: Do you think that is unfair?

No. 37: That's life, isn't it? You have to learn - that is the way it is. [No. 37, SEG 6, mother of 3 children (F: 17 yrs, F: 14 yrs, F: 12 yrs)]

This mother's concerns about the sexual reputation of her daughters mirrors the perspectives of young women themselves that emerged in an earlier Irish study of adolescents' understanding of sexuality (Hyde and Howlett 2004, Hyde et al. 2008). In that study, young women were conscious of the ease with which derogatory sexual labels could be assigned to them, and young men revealed that a young woman's dress and demeanour tended to be used to classify them as 'sluts'.

When participants were challenged about whether advice about respect was gendered, they tended to correct any impression that they had given that respect for oneself should be confined to females. Many were keen to present themselves as advocates of equality discourses, although the latter tended to be voiced in response to direct questions from the interviewer about participants' perceptions of lines of responsibility (who - male or female - should be responsible for what).

Both mothers and fathers were far more likely to caution their daughters about their dress and demeanour - male dress was never raised as an issue of interest by participants. Parents' concern about their daughters in this regard was rooted in the possibility that their daughters or young, respected friends would be treated as sexual objects.

She [daughter] would have been about 19 and she had a mini skirt and boots and all. And I kind of felt walking into the pub, them dirty old lads are looking at her, at my daughter; she is my daughter, they shouldn't be looking at her, they are too old to be looking at her like that. And that was at 19. But I do think the younger ones now, some of them are a bit...like, one of the girls was walking up the road one day and my husband and [son] were driving down in the car and [husband] told me, 'All I could see was these legs coming up'. And he said he nearly died when he saw who it was, it was one of [participant's son's] friends. And [son's] words to [husband] was, 'Look [name] looks like a slut'. [Son] said that and she is actually his friend. [No. 16, SEG 5, mother of 2 children (F: 21 yrs, M: 14 yrs)]

In another case, the mother of a nine year old allowed her to wear some subtle make-up, but objected to her wearing red lipstick because the mother believed that this make her look 'slutty.' In this example, for the girl to look pretty and nice was considered acceptable, but care had to be taken not to cross a line that would problematise her status.

A good example of the reproduction of traditional notions of gendering is in the case of a working-class participant who overtly normalises and approves of her 15-year-old son's interest in pornography.

No. 15: But he [15-year-old son] was over in [names a city] recently [with his father]. They were over there and they got a lot of freedom but my husband was telling me that you'd want to see them walking down the red light districts, and they were all, like - if they could pool their money together! And here I was, like, obviously not. But he did buy some blue movies when he was over there.

Int: The young fellow?

No. 15: Yes, my son. So he never told me about them but I did find them in his room. And then it came up one time and I kind of said that I'd better let him know that I know he has them as opposed to having them stashed. But when I brought it up to him, I was like, 'Well, you are a boy, it is only natural, I'm cool with it.' And he was, 'Will you go away.' And I was trying to be real, you know, it is cool, it is only normal. [No. 15, SEG 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

Yet at a later point in the interview, when asked whether she thought that her son was sexually active, her expectations of his girlfriend's sexual behaviour was restrictive – while pornography was deemed to signify normal adolescent male behaviour, having more than one partner for his girlfriend was considered to be unacceptable.

No. 15: That never entered my head at all [that the couple might be sexually active]. It's funny, like, but she doesn't seem that kind of girl, I suppose.

Int: Would you have an issue if she was? Or would you think, 'As long as you are using contraceptives'?

No. 15: Well, I suppose if I thought she was with every Tom, Dick and Harry I think I would be saying that to [son]. [No. 15, SEG 5, mother of 2 children (M: 15 yrs, F: 9 yrs)]

By contrast, another parent (who, incidentally, was middle-class) who found her son's pornographic magazines was openly disapproving, and reportedly conveyed to her son that pornography was degrading for women and presented a poor image of what sex was about. In this way, the mother challenged traditional gendered notions of appropriate masculine behaviour.

Many participants were critical of the sexualisation of young girls through commercial interests, and some voiced concerns about this.

You see these young ones with nothing on them – well, you know, fake tan and the minis, and you do think 'Jesus!' and you think, 'That's liberation!' People are laughing at them. Like, the money that's made out of all that glossy stuff and they go out and spend a fortune to look like cheap tarts. You have to feel sorry for them. [No. 43, SEG 4, father of 3 children (M: 17 yrs, F: 15 yrs, M: 11 yrs)]

One father was critical of parents for allowing pre-teens to dress in a sexually suggestive way. However, another father who was concerned about how his 17-year-old daughter might be perceived because of her attire was loath to criticise this heavily in case it fuelled a major argument. He drew on the discourse of the male sex-drive when outlining his concerns about her appearance, as the following quotation suggests.

She is very level-headed but she is also very stubborn and if she has made her mind up to do something and I know if she put something on and I said, 'I don't like that', I just know the whole thing would explode and I'd have ruined her night and it would be straight to [wife], so I tend to say to [wife], 'What do you think of that?' And [wife] is a bit more understanding of female attire. But I am looking at it and saying, 'Wow - that is your daughter', and the others are nice-looking girls but they are young and you know that guys being guys they are going out and about and they'd be eye candy for a lot of guys, you know. So in that respect I would be concerned... My concern is how other people who might be attracted to her, how they would control themselves, and that would be my big concern. [No. 41, SEG 2, father of 2 children (F: 17 yrs, M: 15 yrs)]

In spite of the fact that some parents blamed either parents or social pressures for the way in which young women often seemed to present themselves, there was a sense from both mothers' and fathers' accounts that adolescent girls were more independent and sexually suggestive while adolescent boys were deemed to be sensitive and emotionally vulnerable. A few parents commented that they were aware that adolescent girls were interested in their sons, but the latter – particularly in early or mid adolescence – did not appear to notice this since they were more interested in their peers and in sports. Parents tended to view their sons as somewhat oblivious to the young women around them, whilst the latter were deemed to make every effort to get noticed. One woman narrated how, when she dropped her daughter to the Gaeltacht (Irish-speaking region), the girls were dragging suitcases full of clothes and make-up, while the boys had small holdalls with a single pair of jeans and footwear for the week. Generally, girls' dress and demeanour tended to be the subject of criticism.

You watch, especially girls, going in [to a junior disco] and, God almighty, mini skirts and the high heels and those clothes are way too old for a 12- or 13-year-old girl. So I am not sure. I have only sat in the car once watching them come out [of a disco while waiting for his son] and you really could see the boys were coming out and they were young and the girls looked a lot older when they came out. Now the boys were horsing together when they came out and the girls came tottering in heels. But it seemed to be a different code for the girls than it was for the fellows. It didn't look right. I felt that the girls were putting out a message in the way that they were dressed. The young boys weren't interested. Now, I would say if there were older boys there it would be completely different. [No. 23, SEG 2, father of 2 children (M: 12 yrs, M: 8 yrs)]

No. 40: I would have a big thing, too, about the way that girls do portray themselves, young girls.

Int: In what way?

No. 40: As in young girls wanting to look and not dress appropriately for their age; it is a big thing I think, a bad signal to be sending out.

Int: In terms of make-up and short...

No. 40: Well maybe not so much the make-up but it is the low tops and the shorts... [No. 40, SEG 2, mother of 2 children (F: 15 yrs, M: 13 yrs)]

One mother described her observations of young women outside a disco that her son attended, and commented on her 17-year-old son's judgements of them.

No. 13: I used to pick him up and I used to say to him, 'Jesus, look at them girls, what's on them is belts, not even a skirt.' But I don't know, he'd just say, 'They are all slappers.'...But you see he has his own circle of friends and that is who he sticks with...and he wouldn't go near them. He'd say, 'Sure, I wouldn't look at them.'

[No. 13, SEG 6, mother of 2 children (F: 19 yrs, M: 17 yrs)]

There was a sense in which parents' traditional role as gatekeeper of sexual morality was being eroded by new standards, and that this was implicated in social problems such as crisis pregnancy and STI rates. The following is an account of a father whose work as a taxi-driver put him in contact with the social lives of young people.

The girls are as bad as the fellows. The girls are probably worse...The fellows were always the hunters. I have had girls there in the car [taxi], four girls, and they'd be talking: 'I was with this fellow last night. I'm going to score tonight.' They talk like fellows used to talk. The fellows have a great life nowadays; ah yeah, girls want it same as fellows ever did...I think that they are experimenting earlier. [No. 39, SEG 5, father of 2 children (M: 16 yrs, M: 12 yrs)]

When asked if she worried that her daughter might encounter sexually pushy young men, the mother of a 17 year old was more concerned about the demeanour of the young woman in sexual encounters. In her narrative, the view that females would ultimately have responsibility for contraception comes across, and is linked to how young women conduct themselves.

No. 1: I think it is often the girls, and I'd be less likely to blame the guys...And just going back to one other thing in relation to the alcohol, I think myself that is how it happens. I think it is less that the guys are pushy than the girls are just out of their trees [intoxicated with alcohol].

Int: So you think it is really the girls who should watch themselves, is it?

No. 1: Absolutely. It goes back to the old cliché but I actually do think girls let it happen...I don't know about the pregnancies but having...because the girls then won't insist that he wears a condom or anything like that. I think that is the biggest in everything.

Int: And just on that note, to get a few points, do you think that the girls have to insist because they guys won't?

No. 1: On what?

Int: On using condoms?

No. 1: I think they are too out of it [intoxicated].

Int: But what I am saying is do you think that it should be the girl's responsibility to insist on using the condom?

No. 1: No, but it is her body. [No. 1, SEG 2, mother of 1 child (F: 17 yrs)]

Another participant was also critical of the behaviour of young women, suggesting that young men were being led towards inappropriate behaviour by young women.

Now I think the girls would be much more into the sex side of things, in which case the fellows are getting wised up very quickly - they are being told by the girls. So I would see the girls as being the leaders. So the mummies might say that their son, until he gets to 15 or 16 or he is not involved with a girlfriend, I would say he is picking up a hell of a lot more in school [participant is a school teacher] than she realises. [No. 12, SEG 2, father of 4 children (M: 24 yrs, M: 21 yrs, F: 19 yrs, M: 14 yrs)]

One mother expressed concern about the lack of self-respect of young girls who sleep around with everyone because "that is what they think they should be doing". Another mother contended that girls have become divorced from the emotional dimensions of sexual intimacy:

I think girls have a terrible attitude, more so than boys, about sex...I just don't think they understand the emotional side of sex the way they should. [No. 18, SEG 2, mother of 3 children (F: 22 yrs, F: 21 yrs, M: 18 yrs)]

However, when challenged about the normative criteria they applied to young women, participants were quick to point out their assertion that males and females had similar responsibilities when it came to sexual matters. An interesting feature of data was that

while some parents gave accounts of monitoring how their own daughters' presented themselves in terms of dress and demeanour, many of the narratives moved to a broad criticism of how young women in general presented and conducted themselves in the current climate.

Overall, there was less evidence than expected of the dominance of the message to young women that sex was a site of danger and male power, as Holland et al.'s (1998) study had found, though it did feature nonetheless. Rather, parental attitudes approximated more closely to the notion that young women presented themselves as sexually suggestive and precocious and were likely to lead innocent and sensitive young men astray (particularly younger adolescent men). These constructions by parents contrasted to a large degree with the versions presented by young people themselves in an earlier study by Hyde and Howlett (2004). In that study, female participants tended to associate sex with relationships to a greater extent than did young men, and relationships and emotionality were more important to them. In addition, a considerable number of participants reported and exemplified the pressure that young women experience (from individual men) to extend their sexual boundaries in intimate encounters with men. The disparity between the perspectives of parents - when describing adolescent men and women - and young people - when accounting for their opposite sex peers - indicates the diverse ways in which subjectivity is constructed from particular vantage points. How a fifteen-year-old young man is viewed by his mother or father appears to be quite qualitatively different from how a fourteen-year-old young woman whom he encounters might perceive him. The discourses available to young women around which they construct opposite-sex identities, and their actual experiences in encounters with young men, tend to be different from those available in the mother-son⁸ or father-son relationship. Consider how the following mother's views her 17-year-old son:

No. 13: I am hoping the thing with this young one has passed [brief relationship her son had].

Int: And why would you hope, now, that the relationship has passed?

No. 13: I don't know, I just do...He is my baby, you know what I mean? I think I'd be afraid he'd get hurt.

Int: And you think that if he had sex too young, maybe at this age that he would ...[participant interrupts].

No. 13: I think he is far too young. Maybe I am far too over protective, I don't know. [No. 13, SEG 6, mother of 2 children (F: 19 yrs, M: 17 yrs)]

With regard to the negative construction of young women, parents often referred to young women whom they had seen to be dressed in a particular way that appeared to fuel their perception of young women as sexually suggestive. They also tended to refer to public figures in popular culture (such as Britney Spears and Amy Winehouse) that they had encountered through television, whose dress and demeanour have been subject to public criticism.

⁸ While empirical research into the mother-son relationship is sparse, adolescent sons have been found to be constructed by the mother as more 'needy' of assistance, and adolescent daughters more independent in situations where the two have comparable chronic illness (such as diabetes) (Williams 2000).

Section 7: Key points

- Several male participants embraced versions of masculinity that challenged the traditional representation of masculinity, and reported that they were open to communicating aspects of these to their children. Even so, male participants indicated that their children were more likely to approach their mother, and many had undertaken little or no sexuality education with their children.
- Overall, there was very strong empirical support for the notion that mothers had greater responsibility for sexuality education for both boys and girls.
- A number of participants referred to the greater ease with which fathers and sons and mothers and daughters can communicate about sexuality. In spite of this, neither mothers nor fathers were really comfortable talking to adolescents about sexuality. Furthermore, while some men and women in the study presented the same-sex discourse (that mothers would be better placed to talk to girls, and fathers to boys), several mothers admitted that, at the level of practising sexuality education, some fathers appeared reluctant to engage with their sons. In view of this, boys may miss out on aspects of sexuality education because fathers were reluctant to provide it.
- A number of different discourses on female sexuality mediated parents' accounts: while some accounts portrayed young women as needing protection from the sexual advances of men, a more dominant discourse pervading parents' narratives was that young women were precocious and more sexually forward than their male counterparts.
- Young women's dress and demeanour were of the subject of strong criticism by participants of both sexes; young men's dress and demeanour were not criticised in this way.

8.0 Discussion of findings

In this section findings from this study are linked back to what is known already on the topic, as presented in Section 2, and where appropriate comparisons are made with existing research. In addition, an attempt will be made to illuminate and offer further analytical insights into aspects of data by drawing upon extant social theory. To recapitulate, the data were organised into four substantive areas: patterns of parental approaches to relationships and sexuality education with their children; social processes, practices and attitudes mediating parental sexuality education; the content and substance of parental sexuality education; and, finally, parental sexuality education and gendering. Each of these areas will be discussed in turn.

The findings in Section 4 – the first data chapter - suggest that parents use a variety of approaches to communicate with their children about sex and sexuality. Therefore, notwithstanding the fact that these were presented as exclusive categories, in reality there was often overlap and variability in how the approaches were initiated and used by parents. The once-off talk strategy was rarely adopted by parents, notwithstanding the fact that, for many, this reflected their own experience of sexuality education. For those parents who engaged in “the talk”, this tended to be an uncomfortable experience for both parents and children alike. On the whole, parents relied on less formal strategies to provide sexuality education to their children. In the case of younger children (pre-adolescents), the children themselves tended to trigger the initiation of discussion of sexual matters through questions, a growing awareness of differences between the male and female body or curiosity as to where babies came from. Consequently, rather than parents “accompanying a child” in terms of the provision of sexuality education, instead they ended up “following” their children’s lead - meaning that parents were reactive as opposed to proactive in terms of sexual pedagogy (Frankham, 2006). Moreover, what was evident was that parents practised foreclosure in terms of the information they provided to younger children and those in pre-adolescence – a form of protection on the part of the parent, which stemmed from their belief that children were not ready to be exposed to issues concerning sexuality. In addition, such practice guarded against children becoming “too knowing”:

Delaying the provision of information can...be constructed as a caring act – as the protective family ‘enclosure’...ensuring that their children do not become sexually precocious or too knowing. (Frankham 2006: 243)

Child-initiated discussion tended to fade as children entered their teenage years, resulting in communication being initiated by parents on a sporadic basis, or following a ‘wake-up call’. For instance, parents discovering their child was involved in a romantic relationship might trigger parents to initiate conversation in an attempt to ascertain if their child was sexually active. In keeping with what Rosenthal et al. (1998: 734) describe as “opportunistic communicators” (Rosenthal et al., 1998: 734), parents responded to triggers and events which might occur while travelling in the car or watching television to broach issues regarding sexuality with their children. Consequently, discussion of sex was not the sole focus of the interaction, meaning that parents were facilitated in deflecting discomfort and embarrassment. For a minority of parents, text-based material was an effective strategy to facilitate discussion of sex and sexuality. On the whole, though, reducing

parental communication to a typology of approaches fails to reflect the reality of parental communication experiences, whereby parents employ a range of overlapping strategies which shift according to what parents feel is most appropriate at a particular point in time.

In Section 5, our finding that openness was seen by participants as a facet of good communication about sexuality supports Kirkman et al.'s (2005) similar findings of sexuality communications between parents and young people in an Australian context. Further consistency between their data and that gleaned in the present study is to be found in parents' constructions of 'openness' in discussing sexuality. We noted that situations of genuinely relaxed, two-way dialogue about sexual issues between parents and teenagers were almost never described by participants, mirroring Kirkman et al.'s (2005:53) finding that "adolescents...who described their parents as open in communicating about sexuality...at the same time declaring that they never discuss the subject". As Kirkman et al. (2005:50) have noted, what exactly is meant by 'openness' in the literature tends to remain implicit. Indeed, they argue that pinning down the dimensions of openness and how it may be measured is more complex than many of the quantitative scales normally used can capture.

Concurring with Kirkman et al.'s (2005) study, we found that for parents 'openness' sometimes equated merely with a willingness to respond to questions and believing themselves to have a liberal and open-minded attitude. A further parallel between their study and the present research is parents' notion that openness refers to the need to modify the communication in line with the perceived readiness of the child, but does not equate with persistently focusing on the topic. Similarly, in Solomon et al.'s (2002) study, being open referred to the goal of having a close relationship in terms of intimacy and also the possibility of an equal relationship between parent and child, something to which the bulk of parents in the present study also seemed to aspire. As indicated in data of the present study, 'openness' sometimes represented a desire and positive disposition on the part of parents towards communicating with their children, a phenomenon also observed by Jackson and Scott (2004).

In an attempt to understand further interactions between parents and adolescents, explored in particular in Section 5, it is informative to consider some historical shifts in conceptualising parent-child relations that will help to further illuminate aspects of data. Giddens (1990, 1991, 1992) advanced the notion of the 'pure relationship' when describing the way in which intimacy is constituted in the modern period of the past two hundred years approximately. What he means by this is that, rather than being based on authority by parents and deference on the part of children, modern family relations are ideally based on trust, mutual disclosure and equality. Parents in the present study invoked many of these democratic ideals of the family in their narratives, particularly with regard to trust and respect, mirroring the findings of Solomon et al.'s (2002) British study on intimate dialogue between young people and their parents.

What parents conveyed during the interviews in this study corroborates and is highly consistent with what young people imparted during focus groups in an earlier Irish study, completed in 2004. In that study (Hyde and Howlett 2004) the young people indicated that communication about sexuality was virtually always one way, and that strong parental messages of disapproval resulted in dialogue between parent and adolescent being

foreclosed and prevented young people from being truthful with parents. This contrasts with the findings of Solomon et al.'s (2002) English study that found that many teenagers' narratives were rich with accounts of sharing secrets, disclosure and honesty (p. 971) as they described their evolving relationship with their parents. Furthermore, many parents in that study similarly described open dialogues about issues pertaining to the body and intimacy. Solomon et al. also describe tensions in the notion of openness in the accounts of some parents and teenagers, such as the manner in which some teenagers withhold information from their parents in order to retain privacy, power and control. Overall, however, the young people in that study appeared to be more reciprocal in dialogues with their parents than was the case in our study. This may signal cultural differences in parent-child relations between Ireland and Britain.

In Giddens's (1998: 93-94) analysis of the increasing democracy in relations between parents and children, he makes the point that parents will continue to claim authority over children but in the context of more open and negotiated relationships than previously pertained. Solomon et al. (2002) challenge Giddens's notion based on their assertion that parent-child relations are not equal but rather that financial and domestic arrangements concede greater power to parents. While this is certainly the case in a general sense, our data indicated that when it comes to the specific issue of sexuality education, the young people appear to successfully resist parental authority by foreclosing on openness and negotiations with their parents. Moreover, parents' accounts suggested that they (the parents) tended to be careful not to reassert their authority and force a hearing, but rather succumbed to the agenda of the young person, which usually was a preference to foreclose. In this sense, the young people tended to exercise a greater degree of power than the parents in the interaction, a finding not hitherto elaborated on in existing literature. It should be noted that observations from our data about the lack of reciprocity in talking about sex and intimacy does not necessarily extend to dialogue between parents and children about other aspects of life that collectively determine the status of the child-parent relationship.

The concern by parents for their children's sensibilities – for example their eagerness not to embarrass or annoy the young person by insisting on a discussion – is rooted in the shifting power of children historically and the new cultural aspiration of maintaining harmonious and friendly relations with one's children. Many parents reflected back on the more formal and deferential relationship that they had with their own parents and were keen not to reproduce this with their children. As Jamieson (1998) has noted, being a good mother in the contemporary world does not merely involve providing practical care but also having the capacity to respond to and understand the children's 'inner selves'. Similarly, the expectations of the father nowadays extend beyond the 'disciplinarian patriarchal father' and even 'a more indulgent father-provider' to 'a new sensitive father with a deep knowledge and understanding of his children' (Jamieson, 1998:161). Tip-toeing around the young person's mood and responsiveness seems to be part of this revised approach to parenting. The upshot was that young people seemed to be far more successful at controlling information about their intimate lives and their understanding of sexuality than parents were at asserting their authority to educate. While there were exceptions, the agency of adolescents in exercising control over the content of sexuality education was clearly evident. This may well be adolescents' only way of retaining control over their private lives in the face of unequal relations with their parents. They were

probably accurate in their assessment that any revelations about their intimate lives to their parents may have prompted moral messages and drawn attention to their social movements, with increased control and surveillance by parents, since parents indicated that they used prompts to open topics for discussion.

On the issue of trust that parents relied on for assurances about their children's sexual behaviour, Giddens (1991:6) has written that, 'In the context of the pure relationship, trust can be mobilized only by a process of mutual disclosure.' However, data in this study indicated that parents' reassurances that their children would act appropriately in the realm of relationships and sexuality was based largely on a sense of trust that emanated from other aspects of their understanding of the children's character and not based on disclosure or engagement. In many cases, trust was all that parents had upon which to base their self-assurances, since disclosure was minimal or absent. For this reason, implicit trust of children tended to supersede explicit instruction by parents.

Parents' assumptions that their children were not sexually active must be considered in light of the perspectives of young people in an Irish context that were examined just a few years before data for the present study were gathered.

Parents made two (incorrect) assumptions in relation to their daughters and sex. Firstly, they presuppose that their daughters are not going to be sexually active, and secondly they assume that their daughters are equipped with adequate knowledge about sex. A number of participants, both male and female, believed that parents presumed that young people were receiving sex education at school, which might (partly) explain the fact that most did not themselves educate their children about sex (Hyde and Howlett, 2004:33).

In addition, parents' assumptions that their adolescent would not have opportunities for sex need to be considered in light of the earlier study on adolescent sexuality (Hyde and Howlett 2004), which found that adolescents used a range of opportunities to engage in sexual activity, including babysitting or the temporary absence of parents from the home.

Moving on to Section 6, in order to illuminate aspects of data more fully, the reported messages of parents to their children, and especially to adolescents, will be considered in light of Schalet's (2000) analysis - referred to earlier in the literature review - of differences in how American and Dutch parents construct adolescent sexuality. Schalet's was also a qualitative study involving interviews with parents, so some tentative comparisons may be made between it and the present study, though caution must also be exercised since the aims of each study were a little different. While Schalet's analysis pertains to how parents from these cultures socially define teenage sexuality, our data focused on what parents overtly articulated or covertly transmitted to their children/ adolescents about sexuality. Nonetheless, considering data from the present study in light of Schalet's comparison of Dutch and American parents is revealing in terms of understanding the extent to which parents in Ireland resemble those either in the US or the Netherlands.

Our data indicated that all but one participant reported an acceptance of sex occurring prior to marriage, locating parents in the current Irish study closer to the Dutch than the Americans in this regard. (Some of the latter in Schalet's (p.83) study believed that pre-marital sex was wrong, and other research indicates that the majority of parents in US

studies discuss 'waiting until marriage' with their children (see Eisenberg et al., 2006). Like Dutch parents, participants in our study strongly emphasised the emotional side of a sexual relationship and that sex should occur in the context of a loving relationship. A further parallel between Dutch and Irish parents is the view that young people should wait until they are ready – that is, have reached a point of mental and physical development – before they embark on a sexual relationship. Like Dutch parents, parents in our study spoke of trusting the rational judgement of the young person. The Dutch parents to a greater extent than the Americans focused on the notion that young people would exercise self-imposed moderation and would restrain themselves and commit to others, elements of which were found in the narratives of parents in our study, as discussed in the Section 5.

However, where parents in the present Irish study appear to break ranks with the Dutch and swing somewhat closer to an American outlook relates to the age at which a young person is perceived to be capable of being ready for sex. The majority of participants in the current (Irish) study did not believe young people were capable of being ready for a sexual relationship until about 18 years, and a few hoped that sexual activity would occur at an older age still. (The exception was some of those in the lowest socio-economic group, who indicated a greater acceptance of sexual activity among adolescents.) By comparison, almost half the Dutch parents in Schalet's study believed that their 16 year old was either ready or capable of being ready for a sexual relationship, and most of the remainder of the Dutch participants believed that a young person would be capable of being ready at 17 or 18 years. Schalet noted that there appears to be a greater degree of negotiation between parents and teenagers under the Dutch model, and teenagers learn responsibility by being socialised to 'take into account (p. 93)' the needs of others in the family. Part of Schalet's argument is that Dutch parents have a greater acceptance of adolescent sexuality than their American counterparts, strongly promote sexual responsibility, and accommodate adolescent sexuality into the family routines rather than viewing it a dangerous threat that needs to be controlled in an authoritarian way. Some evidence of this acceptance of adolescent sexuality is that 12 out of 17 Dutch parents in Schalet's study indicated that they would allow their 16 year old to sleep with a boyfriend/girlfriend in the home, while, by contrast, 13 out of 14 American parents reported that they would object to this. Participants in the present (Irish) study tended to have very restrictive perspectives on young people sleeping with sex partners in the parental home, and in this regard were far closer to the American worldview.

Our data were also peppered with participants' constructions of sex as 'dangerous', as associated negatively with alcohol intoxication, and with young people not being capable of relationships serious enough to make sex acceptable. While Dutch parents tended to trust their adolescents to exercise responsibility in relation to alcohol as well as sex (Schalet 2000), a number of parents in the current study indicated their concern that their normally sensible children might behave irresponsibly under the influence of alcohol. In this sense they trusted their children less in relation to alcohol compared to sexual behaviour, perhaps because a few had experiences of their children having been caught drinking furtively and the visibility of teenagers drinking has a high presence in Irish environments compared to the relative privacy of sexual activity.

In the present Irish data, age alone was often referred to as an impediment to the acceptability of sexual relationships. In this regard, the perspectives of parents in our study resembled those of the American parents in Schalet's research. On the whole, data suggest that parents in the present study drew to some extent on both cultural worldviews - Dutch and American - and lie somewhere in between in terms of the discourse they draw upon with regard to the messages that they transmit to their children. What our data point to is a limited social acceptance of adolescent sexuality, largely confined to later adolescence.

To turn to another aspect of the content and substance of parental sexuality education, data indicated that parents were ambivalent about how much and what information they believed they should impart at various stages in their child's development. There were fears expressed by parents that introducing the topic of contraceptives too early would signal their tacit approval of sexual activity that they were actually trying to discourage. Most parents believed that information about contraception was unnecessary if the adolescent was not in a relationship. Thus, it was the initiation of a relationship that sometimes prompted (or would prompt) parents to educate. This may have implications for a young person's sexual safety and habits, as Miller and Whitaker's (2001) research found that parent-child communication on condom-use before the initiation of sexual activity was related to an increased likelihood of subsequent condom-use; however, where this communication happened during the year of first intercourse the communication was not related to later condom-use. In the present study (and supporting earlier research findings (Bruckner and Bearman, 2003, Jaccard et al., 1998a, 1998b)) parents were not always informed by their adolescent that they were romantically involved with a boy/girl, and in a few cases came by this information indirectly. Eisenberg et al., (2006) argue that waiting to communicate to an adolescent about sexual issues until after their romantic involvement has become established represents a missed opportunity for prevention. This assertion has relevance in an Irish context, given the strong theme in data that the issue of contraceptive use was not raised because the young person was not in a relationship.

As indicated in Section 6, many issues such as sexual risk and safety were covered in a very superficial way in parent/child communications, while others such as sexual pleasure and emotions and the complicated contexts in which sexual attractions and relations arise tended not to be covered at all. This pattern supports the findings from international research on the topic (West, 1999). The absence of pleasure narratives in parents' communications combined with an extant analysis of the Relationships and Sexuality Education school programme (Kiely, 2005) suggest that young people in Ireland are exposed to discourses of sexual danger and undesirable consequences at home and school, and discourses of pleasure and desire from other sites.

Turning to the final data section (Section 7), we consider the two central issues raised - the extent to which mothers and fathers have different roles in sexuality education, and parents' attitudes and expectations about the sexual demeanour and conduct of young men and women - in light of existing research findings and current debates on the topic. With regard to the first issue, our broad findings that mothers were the primary educators concurs with much of the evidence hitherto available on parental sexuality education (Measor, 2004). This picture of a pattern of transmission of information about sexuality being primarily mother to children, and to girls to a greater extent than boys,

concur with the practices described by Kirkman et al., (2002). They refer to the traditional role of the mother as the "affectionate heart of the family" (Kirkman et al., 2002: 68). By contrast, fathers have been characterised as disconnected from the role of "emotional communicators" (Kirkman et al., 2002: 68) and therefore lacking the sensitivity necessary to guide children in developing a sexual identity. Based on their narratives, most of the men that we interviewed could not be described as emotionally disconnected and lacking sensitivity, and some appeared highly emotionally engaged and capable of articulating their sensitivities during the interviews; however, the majority nonetheless indicated that sexuality education of their children, including the emotional dimension, was left to the child's mother. In addition, most believed that their children would approach the mother more readily.

It was also noted in data of the present study that some mothers had greater difficulties in communicating with their sons about sexuality and, similarly, some fathers with their daughters. This finding concurs with other research that found that a same-gender discourse impacts on the experience of providing sexuality education to young people. Solomon et al. (2002:975), for instance, noted that frequently relationships between parents and children were forged based on shared gender identity, which resulted in shared common experiences. Such "social blueprints" indicate that mothers should feel comfortable talking to their daughters about sex, but not their sons (Measor, 2004:162,164). In the current study, this was in evidence in the way in which certain female-specific issues such as periods were handled by mothers, whilst male-specific issues such as wet dreams tended to be passed over to fathers. Measor (2004) notes that within this same-gender discourse fathers are expected to tell their sons about sex – something which they often fail to do. The fathers in our study exhibited practices in line with the same-gender discourse whereby those that did become involved in sexual pedagogy did so with their sons, as opposed to their daughters. However, this was not a frequent occurrence, with only a minority of fathers becoming actively involved in the provision of sexuality education to their children of either sex. Therefore, like the boys in Measor's research (2004:162,164), sons of our participants were more likely to find themselves excluded from the patterns of transmission of information about sexuality within the family.

The second major issue associated with gender was participants' impressions of male and female sexual demeanour and behaviour. As indicated, the historically dominant discourse of the need to protect girls more so than boys (Holland et al., 1998; Kirkman, Rosenthal and Feldman, 2001:403) was in evidence in data, though not in a strong way compared to competing constructions of young women's sexuality. The dominant discourse drawn upon by participants portrayed adolescent girls as sexually suggestive and predatorial. Overall, the latter portrayal was a stronger feature of parents' narratives, with judgemental comments being made about young women's dress and the impressions exuded by their appearance. In many narratives, the notion that young men were vulnerable from the sexual advances of such young women was evident, although this was sometimes simultaneously presented with concerns and criticisms about the sexualisation of young women by fiscal interests.

There are a number of possible interpretations of parents' criticisms of the demeanour and apparent sexual disposition of young women. The first is an argument, long advanced by feminist theorists, that women who present themselves as sexual beings - as sexually

interested and as sexually active - risk being branded by derogatory labels such as 'slag', 'slapper' and 'slut'. These labels operate to sexually regulate women, who, unlike their male counterparts, are expected to not display outward signs of being interested in sex. Holland et al. (2003:85) note, for instance, that a modest femininity necessitates that young women display a "disembodied sexuality", thereby producing a passive - as opposed to active - feminine sexuality. Such an ideology of femininity constructs young girls and women as in need of care, thereby engendering a discourse of protection around adolescent girls. Significantly, within this discourse, girls are subject to greater control than their male siblings, as the protection of their virginity necessitates reduced freedom. Consequently, while traditional masculinity dictates that boys "sow their wild oats", sexual activity for girls on the other hand, is restricted to marriage, or a 'steady relationship' at the very least (Abbott, Wallace and Tyler, 2005). Through this double morality, the sexual behaviour of young men and women is evaluated differently (Aapola et al., 2005). Moreover, this double standard regulates women's sexuality in ways that men's is not (Jackson and Scott, 1996). Men are cast as subject of uncontrollable desires, desires which women, despite their relegation to the passive recipients of this desire, are expected to both satisfy and restrain (Jackson and Scott, 1996:17). The argument could be extended to the visual impact of intoxicated women, whose presence increasingly in Irish public culture tends to be judged more harshly than the image of intoxicated males. Thus, one way of interpreting parents' harsh criticisms is that they are inadvertently reproducing age-old double standards, albeit with the good intentions of protecting young women against the risk of an unplanned pregnancy and STIs.

However, there is an alternative way of viewing parents' concerns in light of the growing sexualisation of young women and girls, also a concern of feminist theorists. This is to consider the sexualisation of young women as driven by commercial interests that actually undermine the notion of women as sexual subjects. Thus, rather than view a 13-year-old scantily-clad and heavily made-up young woman as a source of sexual assertiveness, exuding 'girl power' and a subject of her own desires, she may instead be perceived as a dupe of clever marketing ploys that transform her into an object of others' sexual desires, so obsessed with her appearance that aspects of her intellect and personal potential are undermined. Evidence compiled for a recent report by the American Psychological Association (APA) (2007) has highlighted the negative effects of the sexualisation of girls and women. (Although no research on this topic was located in Ireland, The Women's Health Council referred to the increasing 'sexualisation' of children in the media in its Submission to the Joint Oireachtas Committee on Child Protection in 2006.) These negative effects include self-objectification, which is a process that occurs when girls learn to view themselves and treat themselves as sexual objects and their bodies as sources of pleasure and desire by others (Frederickson and Roberts, 1997; McKinley and Hyde, 1996). The APA (2007: 2) report states that:

If girls purchase (or ask their parents to purchase) products and clothes designed to make them look physically appealing and sexy, and if they style their identities after the celebrities who populate their cultural landscape, they are, in effect, sexualising themselves.

Among the negative outcomes of self-objectification are impaired cognitive functioning: self-consciousness about one's body and thinking about the extent to which it matches up with sexualised cultural images has been found to impair mathematical computations and

logical reasoning among young women in ways that do not similarly affect young men (see Frederickson, Roberts, Noll, Quinn and Twenge, 1998; Gapinski, Brownell and LaFrance, 2003; and Hebl, King and Lin, 2004). In addition, poorer physical and mental health, including eating disorders, low self-esteem and depression, as well as diminished sexual assertiveness and/or unrealistic or negative expectations about sexuality have been linked to self-objectification.

Thus, the concerns registered by parents in the present study about how young women present themselves appear to be well-founded. According to Aapola et al. (2005:133), in recent years young women have been "bombarded" with contradictory messages regarding appropriate sexual conduct, resulting in sexuality being one of the most contested spheres within a young woman's life. The difficulty for parents is to manage the fine line between reproducing the sexual double-standard on the one hand, and protecting young women against self-objectification and its negative repercussions on the other.

9.0 Overall conclusion

This research is the first to be conducted in an Irish context that explores parents' approaches to educating their pre-adolescent and adolescent children about sexuality. While many of the findings support those of other Western countries that have been documented in international literature, some issues have come to the fore in this research that are not well developed in existing literature. Specifically, the exercise of adolescents' power in challenging philosophies of openness advanced by parents in the course of sexuality education has not featured in the literature that we located. Similarly, while the discourse of the sexually-forward female has long been available in international scholarship, the strength and dominance of this representation of young women, and its highly negative interpretation by parents, raises questions both about the extent to which young women have achieved sexual equality and exactly what sexual equality for them might mean. A separate issue arising from this research relates to what it tells us about the complexity of parents communicating with their children about sexuality. In the current climate of efforts to develop evidence-based best-practice guidelines in health care, including sexual health, professional practitioners, policy makers and the lay public want to know what works to bring about better health outcomes for the population. This study exposes some real methodological challenges for national and international researchers attempting to develop quantitative constructs upon which to evaluate the impact of parental communication on sexual outcomes for adolescents. We will return to this last issue towards the end of this conclusion. First, a few general comments about the study findings will be made.

It must be stressed that there was diversity in parents' perspectives across the sample on a range of issues. At one end of the spectrum there were those whose narratives suggested a sexually conservative position, discouraging sexual activity until either marriage or when adolescence had passed; at the other end of the spectrum were parents who exhibited much more liberal views and a greater acceptance of adolescence as a time of which sexuality is a part. However, the bulk of parents were located midway between these poles. While a 'typical' worldview of parents in the study must be accompanied with the qualification that it is typical rather than universal, the following sums up the parental message to adolescents.

You can always come to me, your mother/father, if you have any questions about sex. Unlike our own parents who were more authoritarian and conservative, we are open parents who have your interests at heart. We also have expectations that you will make the most of the opportunities that are available to youngsters nowadays. However, although you had far fewer inhibitions when you were younger, we seem to be willing to bring up the topic of sex and sexuality a lot more than you, even if it is a bit uncomfortable, and we get the message that you'd rather not talk about it. We are afraid to push any sex education too much in case we push you away, and you might pull down communication barriers about other aspects of your life too. I don't think that you should have sex until you are in a loving, stable relationship, although I had a few casual sexual encounters myself when I wasn't much older than you, but I don't want to tell you about that. Although I know that kids are having sex way earlier than my generation did, as you are under 18 I don't think that you have ever had penetrative sex, especially as we have never seen you with a boy/girlfriend. For this reason there has been no need for me to go into detail about using contraceptives. A lot of the time, we say

things in an indirect way, but I'm sure you get the message. They cover all that stuff at school anyway, and, as you say whenever we do try to raise the issue, you know it all already, so I suppose you do. Actually, when it comes to things like STIs, I don't know a whole lot (although they are often on about it on the radio) except that you can contract one if you don't use a condom. Also, I believe you to be a sensible kid and we have done our best to bring you up right. Always use condoms when you become sexually active, as a pregnancy is a big responsibility [and for boys, just because you are male does not mean that you can walk away from your responsibilities] [For daughters, you will be stuck holding the baby]. You can also contract an STI if you have sex without a condom. Pregnancies do happen, as you can see from [neighbour/friend]. I don't want you to become pregnant/have your girlfriend become pregnant outside of marriage or at least not outside a stable relationship and not until you are older [at least in your mid twenties]. Alcohol intoxication can lead to many problems, including becoming pregnant or contracting an STI. I don't have any problem with homosexuality, but I doubt very much that you are gay, but if you are, we would have to accept it, although it would be difficult [for mothers, your father would have greater difficulty than me]. I know I would not be at all happy about you having sex under my roof, even in a stable relationship, until you are at least in your twenties.

The extent to which parents accepted adolescent sexuality was an issue that permeated this report, and it is worth further comments in the conclusion to this study. It was noted in the study that there was a relatively small number of participants who manifested liberal approaches based on individual decision-making of the adolescent, supported with adequate information; among these, an acceptance of teenage sexuality was most obvious. It was also noted that parents in the lowest socio-economic group exhibited a higher level of acceptance of adolescent sexuality compared to the sample in general, yet sexual activity and early pregnancies tend to be higher in the lowest SEGs (Wilson et al., 1992; Smith, 1993; Harris and Breugel, 1994; Ingham, 1996).

The Dutch situation of a greater acceptance of adolescent sexuality is often invoked to explain the far lower rates of teenage pregnancy in the Netherlands compared with more restrictive cultures such as the USA (Lewis and Knijn, 2001). This may (erroneously) give the impression that openness and acceptance alone have a protective effect on negative outcomes for teenagers. Our finding that there appeared to be more open banter about sexual issues between parents and adolescents in the lowest socio-economic group (a group found to have higher levels of early sexual experiences and unplanned pregnancies) indicates that openness is a complex and nebulous concept, and on its own may not have a protective effect against negative sexual outcomes for adolescents. (Wight et al.'s (2006) finding that for adolescent men aged 15/16 years greater ease in talking about sex to either parent was related to a higher likelihood of sexual experience should also be noted again here.) The acceptance of adolescent sexuality in the Netherlands compared to the USA must be considered within the wider context of Dutch culture that has been found to socialise young adults in a way that demands 'a more far-reaching orientation and adaptation to the social norms of the family' (Schalet, 2000:98). Thus, the acceptance of adolescent sexuality in Holland does not occur as a free-floating phenomenon liberated from social restraint; rather, expectations of 'mutual consideration, flexibility and negotiation' (Schalet, 2000:80) serve to produce social order. Moreover, liberal approaches do not equate with sexual permissiveness (Weaver et al., 2005). In addition, the manner in

which Dutch young people are educated at school must also be taken into account, as well as the provision of sexual health services for young people that facilitate those who choose to become sexually active to consistently use contraception (Ferguson et al., 2008; Weaver et al., 2005).

Finally, to return to the methodological issues that this qualitative analysis has exposed: In our study, the process of in-depth interviewing has revealed how the conceptual world of participants is characterised by both coherence and inconsistency, and how there is ambivalence in people's narratives when they attempt to make sense of their perspectives. Let us briefly review some of the 'muddiness' in participants' thinking by mentioning a few key issues:

- Participants who professed to be open about sexuality in the home sometimes, when probed, described sexuality education practices with their children that were not much different from those who stated at the outset that they had not undertaken any sexuality education with their children.
- A few participants who gave the opinion that schools and parents need to take a shared responsibility for sexuality education were, when probed, found to be no different in their educational practices from those who indicated that they did not need to undertake much sexuality education with their children, since this was covered by the school.
- A few participants who gave the view that fathers would be better placed to undertake sexuality education with their sons went on to reveal that the child's father was too embarrassed or otherwise reluctant to do so.
- The spontaneous narratives of participants indicated that boys were more likely to get messages to show respect for girls and girls that they should respect themselves. However, when participants were challenged directly about whether advice about respect was gendered, they tended to correct any impression that they had given that respect for oneself should be confined to females and seemed keen to present themselves as advocates of equality discourses.

So how would these perspectives of participants have manifested themselves had participants been responding to one or two items on a questionnaire? How would parents have responded had they been asked if they had ever talked to their children about sex, as has been a measure used in other research? This study has highlighted important issues for future research designed to evaluate the effectiveness of parental sexuality education. It is imperative that such measures are developed because sexual health educators who aim to improve sexual health outcomes for adolescents need to be confident that their best-practice knowledge-base is sound and consistent. The review of existing literature, culminating in Wight et al.'s (2006) UK research, brings no comfort to professionals working towards positive sexual health outcomes. Data in the present study indicated that 'openness', or 'ease in communicating' or crude categories such as 'talked/not talked' on their own are not sufficient indicators of the quality of the sexuality education provided, the level of depth and detail imparted, nor the thrust of the message in terms of fostering a responsible attitude in young people. Neither do they tell us about the consistency with which messages are imparted, nor the young person's understanding of the educational

endeavour. Wight et al. (2006) have already signalled the possibility that sensitivity to question-wording may be partly responsible for the results of their British study being at variance with those of others. In a climate of best-practice based on evidence, evaluation-type research needs to encompass more sophisticated measures, which can capture greater detail and ensure internal validity of measurement constructs - single questions about parental communication or involvement are not enough.

Teenage pregnancy rates in Ireland have been fairly consistent, with annual variations, over the past 30 years (O'Keefe, McGrath and Smith, 2006; Hyde, 1996). Future challenges remain for those involved in adolescent health, be they parents, teachers or health professionals. Overcoming these challenges requires working together to ensure that young people who do not wish to become pregnant are furnished with the knowledge and skills to exercise control over their fertility.

10.0 Recommendations

Introduction

A number of recommendations emerging from the research findings are made below. These recommendations are outlined on the basis of their relevance to particular groups.

For parents we recommend

- That parents recognise their responsibility to talk to their children about relationships and sexuality.
- That parents should not assume that young people's knowledge of sexuality and relationships is accurate, thorough or even sufficient.
- That parents endeavour to ensure that conversations about relationships and sex are ongoing, and their children feel comfortable in asking questions on the subject as they arise.
- That parents need to be mindful of young people's sensibilities in discussing sexual matters, but this should not impede their educational role in equipping their children with essential knowledge about sexuality.
- That whilst sex and sexuality in discussions between parents and children need to be presented in a positive light, light-hearted references to sexuality need to be balanced with more serious references to the real possibility of the negative outcomes of sexual behaviour and with how responsible sexual behaviour can be achieved.
- That parents be aware
 - that they may not be appraised that their adolescent is in a romantic relationship
 - they should not assume that older adolescents are not sexually active
 - that they may face a challenge when providing moral guidance for their children, as the research suggests that presenting moral messages of disapproval of sexual activity may close down communication with the young person.
- That mothers and fathers communicate with one another as to what the other has communicated about sexuality to their child, so that any misperceptions about what an individual parent has communicated may be clarified.
- That parents reflect on whether the messages about sexual behaviour that they impart to their children differ for sons and daughters, and that they consider whether they may be subtly reproducing the sexual double-standard outlined in the research.
- That parents be aware that giving frank, age-appropriate information when a pre-adolescent child requests it may create an environment where the child feels comfortable in revisiting conversations with parents about sex, later on in his/her adolescence.

For schools we recommend

- That school programmes for RSE/SPHE encourage young people to open up to their parents.
- That there be increased liaison between schools and parents with regard to sexuality education. We recommend that all secondary schools develop a strategy for communicating with parents about relationships and sexuality education that occurs at school. This may in turn act as a prompt for parents to open discussions with their children.
- That schools consider including an optional talk on RSE for parents in schools' parent/teacher days.

For the wider community we recommend

- That strategies for raising awareness among parents of the strengths and weaknesses of their individual approach to educating their children about sex should be devised. Organisations such as The Crisis Pregnancy Agency could lead on this.
- That parents be educated about the negative outcomes of sexual objectification for young women, and advise their daughters accordingly.
- That Parentline be encouraged to train its volunteers in providing information to parents on communicating with their children about sex.
- That innovative approaches to stimulating discussion of parent-child communication about relationships and sex be considered. For example, using drama to deliver key messages. Community organisations, including those linked through the Community Development Programmes and other social networks, could be involved in implementing such a programme. Organisations such as The Crisis Pregnancy Agency could lead on this, in partnership with other bodies.

For the research community we recommend

- That future evaluation research into the effectiveness of parental sexuality education uses far more sophisticated measurement constructs than have hitherto been employed, ones that will better capture the complexity of parental sexuality education, as identified in this study. This is the strongest recommendation.

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Appendix 1: Information sheet

Parents' approaches to educating their pre-adolescent and adolescent children about sexuality

Information Sheet

This information sheet contains information to help you decide if you would like to take part in this study

Who is funding and doing this research?

The research is funded by the Crisis Pregnancy Agency, which was established in 2001 under the Health (Corporate Bodies) Act 1961. The Crisis Pregnancy Agency is mandated to prepare and oversee a strategy to provide for a reduction in the number of crisis pregnancies through educational and other services. The research will be conducted by a team of researchers from University College Dublin. The research project commenced in October 2007 and is due to be completed in September 2008. Interviews will be taking place from December 2007-May 2008.

What is the purpose of this study?

The purpose of this research is to explore parents' perspectives on communicating with their pre-adolescent and adolescent children on matters relating to relationships and sexuality. We are interested in talking to a range of parents with at least one child aged between 10 and 19 years of age.

How will this information be sought?

Individual, once-off interviews will be conducted with approximately 40 parents from rural and urban areas around Ireland. Interviews will take place at a time and in a location convenient to you (such as your home or somewhere convenient to your home).

What will my participation involve?

We anticipate that each interview will last roughly between twenty minutes and one-and-a-half hours, in which you will be asked for your views in relation to the study topic. To ensure that we have an accurate account of the information given, a tape recorder will be used to record the interview.

Do I have to participate?

No, participation is entirely voluntary. Parents who may initially agree to participate are also free to leave the interview at any time. So, if you decide that you do not wish to participate, or if you wish to end the interview, you will not be asked to give your reasons; we will accept your decision.

What will happen to the information from this interview?

Once the interview is over, the information on the tape will be transcribed onto paper so that we can read it and begin the process of looking at the data for common meanings across interviews, and indeed differences in parents' perspectives. The study will initially be disseminated in a research report, and later in academic journals.

Where will the information be stored and for how long?

The tape recording will be stored, under an allocated code number/pseudonym, in a locked drawer in the researchers' workplace. The tape recording will then be transferred to a password protected computer. Any subsequent printed transcripts of the interviews will also be stored in a locked drawer. Your name and your child's name will not appear on the transcript, nor in any subsequent publications from the study. Each tape recording and written transcript will be given a number for identification purposes. The researchers will be the only people who will know what number corresponds to your interview this will not be divulged to anyone. Once the tape has been transcribed, it will be destroyed.

Further information

If you require further information, please do not hesitate to contact me - my contact details are: [number provided] (please leave a message on my answering machine if I am not at my desk) or [number provided]. Alternatively, feel free to email me at [e-mail address provided].

If having read the information sheet, you would like to participate in this study, please complete the consent form below. You may keep one copy of this information for your own records.

Thank you very much for taking the time to read this information.

Dr. Abbey Hyde.
Research Director

Appendix 2: Contact sheet

*UCD School of Nursing, Midwifery & Health Systems
University College Dublin*

Parents' perspectives on communicating with their children about relationships and sexuality.

Conducted by a research team at University College Dublin and funded by the Crisis Pregnancy Agency

Are you the parent of a child aged 10-19 years? We want to hear your views as a parent!

We are undertaking a study on the views of parents about the challenges of being the parent of a teenager or pre-teenager in relation to their sexual knowledge or behaviour. Even if you do not feel that you undertake much (or any) sex education with your child, we would still like to hear from you.

Please write your name and contact telephone number below if you think you might be interested in participating in this research, which means being interviewed once by a friendly researcher in your own home, or in a local café if you prefer, about the above topic. Your name and details will be treated in the strictest confidence. Participation is entirely voluntary - there will be absolutely no pressure to take part, and you are not committing to anything here. I just need to be able to make contact with you by telephone to give you further information, and if, after talking to me, you do not wish to participate, I will not contact you again.

Interviews are taking place from January-May 2008.

Name:

Phone No:

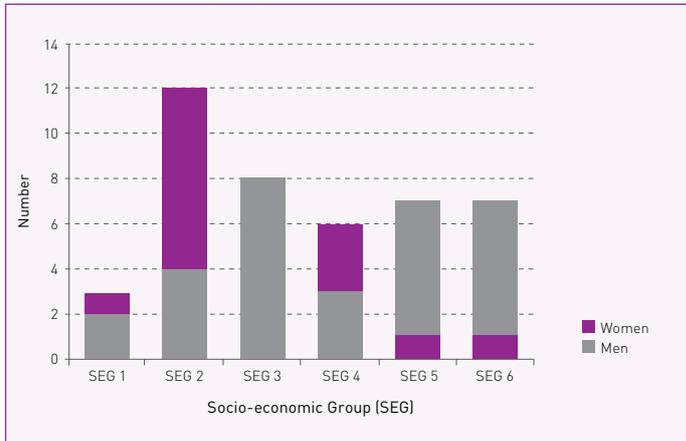
Please return this sheet in the stamped addressed envelope (enclosed).

Best wishes,
Abbey

*Dr Abbey Hyde
Research Project Director
[Contact details provided]*

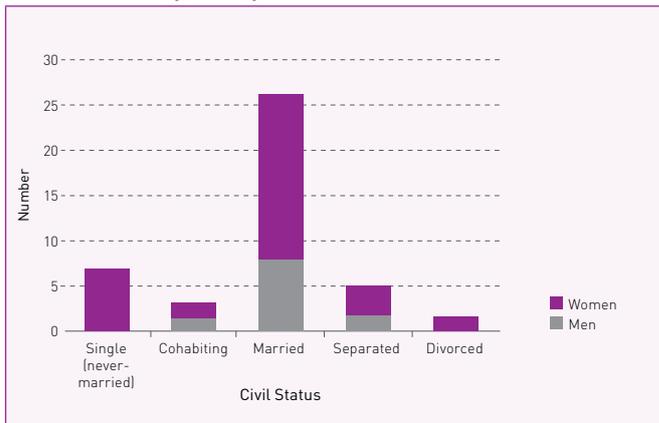
Appendix 3: Characteristics of the sample

Socio-economic group (SEG) status of participants*

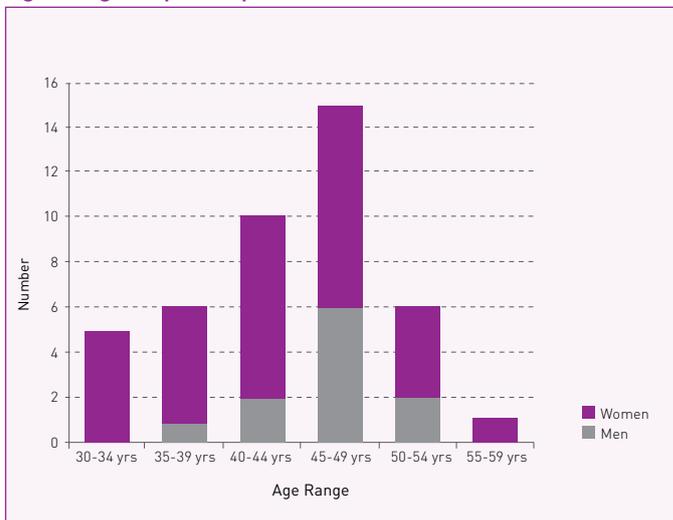


*The socio-economic group classification is based on current or most recent occupation and is the scale developed by O'Hare et al. (1991). The highest socio-economic group is SEG 1, and includes higher professionals, while the lowest socio-economic group is SEG 6, and includes unskilled manual workers.

Civil status of participants



Age range of participants



Appendix 4: Topic guide

- Can you tell me a little about your family – how many kids, ages (general information)?
- Have you ever discussed sexuality with your child/ren?
 - at what age? Describe the communication, what was said etc.
 - a conscious decision/circumstances
 - child prompted/parent prompted
 - once off - i.e. "the talk"
 - sexual content on TV – turn channel/leave the room/talk about issues raised?
 - how parent felt, relaxed, embarrassed
 - how child responded
- When your child was younger (or currently), did issues around 'stranger danger' or internet grooming come up? Describe
- Any communication with partner on how to deal with sex education with child/ren?
 - aware if partner has talked to child/ren about sexuality and what he/she might have said
 - whose responsibility is it?
 - different roles for mothers and fathers?
- Formally/explicitly talked to your child about contraception?
 - how to use various methods correctly?
 - where to obtain contraception?
 - concerns re STIs
 - concerns re pregnancy
 - do you think child knows the details about contraception?
where have they gotten those details?
- Has child/ren got a boyfriend/girlfriend? How have you handled that? Have you talked about:
 - being in a relationship i.e. issues of respect etc.?
 - dealing with sexual intimacy within a relationship?
 - how to handle issues around having sex?
 - using contraception?
 - would you be more concerned if boy/girl going for a night out?
- Influences on child/ren's behaviour?
 - friends/peer group
 - concerns regarding the effect of alcohol/drugs on his/her behaviour?
 - influence of internet and media
 - sexualisation of young children? {ex. girls growing up too soon – dress, make-up etc.}
- [if appropriate] Do they think their teenager is sexually active?

- Any discussion regarding homosexuality with your child/ren?
 - has the issue about homosexuality ever come up? [details]
 - what messages has parent implicitly or explicitly passed on about homosexuality.
 - what kind of messages is child receiving from school?
 - how would you feel if child is gay?

- Any contact or discussions with the school in terms of sex education and dealing with sexuality and relationships?
 - what role do you think the school should play?
 - any courses or material received through the school?

- All told, what would you be most concerned about in terms of your child/ren's sexuality?

- Anything else which we haven't covered which you think is important or relevant?

Appendix 5: Post-interview questionnaire

Questionnaire

Number of children:

Details of children:

Age of 1st child: _____ Boy Girl
 Age of 2nd child: _____ Boy Girl
 Age of 3rd child: _____ Boy Girl
 Age of 4th child: _____ Boy Girl
 Age of 5th child: _____ Boy Girl
 Age of 6th child: _____ Boy Girl

Mother's occupation: _____

Father's occupation: _____

Age of mother/guardian 25-29 30-34 35-39 40-44 45-49 50-54 55-59
 60-64 65-69 70 and older

Age of father 25-29 30-34 35-39 40-44 45-49 50-54 55-59
 60-64 65-69 70 and older

Marital status of parent interviewed _____

Ethnicity: _____

Location: Urban Rural

Appendix 6: Consent form

Parents' approaches to educating their pre-adolescent and adolescent children about sexuality.

Consent Form

I give my consent to participate in the above study.

I understand that my participation in this study is voluntary and that it involves a once-off interview

Signature of participant: _____

Date: _____

Signature of researcher: _____

Date: _____

Notes

Notes