# Knowing about sexuality: knowledge of parents or responsible for adolescents

Saberes sobre sexualidade: conhecimento de pais ou responsáveis por adolescentes Conocimiento de la sexualidad: conocimiento de padres o tutores de adolescentes

## **RESUMO**

Objetivo: Identificar o conhecimento de pais ou responsáveis por adolescentes de uma cidade de Minas Gerais sobre sexualidade, responsabilização sobre educação sexual e percepção de risco. Métodos: A população de amostra deste estudo foi composta por vinte e um pais ou responsáveis por adolescentes que responderam a um questionário de pesquisa através do Google formulários. A coleta de dados ocorreu no mês de outubro de 2020, o estudo baseou-se em análises de cunho quantitativo, transversal e descritivo. Resultados: A pesquisa mostrou resultados positivos em relação à educação sexual dos filhos visto que a maioria deles concorda que essa é de responsabilidade dos pais, também dever da escola. Conclusão: Foi possível notar que é necessário estudo e investimento em programas e ações que incentivem ainda mais os jovens a praticar o sexo seguro evitando infecções sexualmente transmissíveis e gravidez indesejada.

**DESCRITORES:** Adolescente; Educação sexual; Saúde sexual e reprodutiva.

#### **ABSTRACT**

Objective: To identify the knowledge of parents or guardians of adolescents in a city in the state of Minas Gerais on sexuality, responsibility for sex education, and risk perception. Methods: The sample population of this study consisted of twenty-one parents or guardians of adolescents who answered a survey questionnaire through Google forms. Data collection occurred in October 2020; the study was based on quantitative, cross-sectional and descriptive analyses. Results: The research revealed positive results in relation to the sexual education of their children, since most of them agree that this is the responsibility of the parents, as well as a duty of the school. Conclusion: It was possible to observe that it is necessary to study and invest in programs and actions that encourage even more young people to practice safe sex, avoiding sexually transmitted infections and unwanted pregnancies.

**DESCRIPTORS:** Adolescent; sex education; sexual and reproductive health

#### RESUMEN

Objetivo: Identificar el conocimiento de padres o tutores de adolescentes de un municipio del estado brasileño de Minas Gerais sobre sexualidad, responsabilidad en la educación sexual y percepción de riesgo. Métodos: La muestra de población de este estudio estuvo conformada por veintiún padres o tutores de adolescentes que respondieron un cuestionario de encuesta a través de formularios de Google. La recolección de datos ocurrió en octubre de 2020. El estudio se basó en análisis cuantitativo, transversal y descriptivo. Resultados: La investigación arrojó resultados positivos en relación a la educación sexual de los chicos ya que la mayoría coincide en que es algo de responsabilidad de sus padres, bien como un deber de la escuela. Conclusión: Se pudo constatar que es necesario estudiar e invertir en programas y acciones que incentiven a los jóvenes aún más a practicar sexo más seguro, evitando infecciones de transmisión sexual y embarazos no deseados..

**DESCRIPTORES:** Adolescente; Educación Sexual; Salud sexual y reproductiva

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#### INTRODUCTION

dolescence is a life cycle defined by sudden growth, manifestation of secondary sexual characteristics, personality formation, environmental suitability and social inclusion. 1 At this stage of life, the teenager goes through several physical transformations and conflicts due to insecurities, identity and self-esteem formation, family and social fragility and understanding of body image. <sup>2</sup> Among these transformations, the young person seeks to detach himself from the childhood stage and adopt behaviors that transform him into a socially accepted adult. 1

In this cycle of changes, there is the emergence of sexuality, which according to the World Health Organization (WHO) is an energy that moves the human being in the search for love, tenderness, contact and intimacy. It is part of the way of feeling, moving, touching and being touched, going beyond the biological and reproductive aspects, involving the behavior of the individual manifested in caresses, kisses, looks, fantasies, hugs, desires, dreams and pleasure. Sexuality then manifests at any time and space in which the individual is inserted, regardless of sex, and is influenced by gender relations,

identity, fantasies, beliefs, values and attitudes of the environment in which they are inserted. <sup>3</sup>

In this transition phase, and in the search for pleasure and satisfaction, through the exercise of sexuality, the early initiation of sexual practices can happen, which can also be related to biological changes such as early menarche and behavioral changes, as well as to social factors such as family income, schooling, religion or violence. It is also worth mentioning that the search for a definition of sexual identity influenced by psychic advances helps young people to try new sensations through sexual practices. <sup>1</sup>

In this context, with evident and striking sexual issues, adolescents can assume risky behaviors without being prepared, becoming susceptible to sexually transmitted infections (STIs) and unwanted pregnancy. There is an urgent need to offer information to adolescents, and the home, the basic health unit and the school are the ideal spaces for this educational process to take place. However, the family and health and education professionals are not always prepared to deal with these issues, restricting the biological aspects of the issue and sometimes disregarding the biopsychosocial and cultural aspects.3

Although the role of education in all sectors of life is understood, when it comes to sex and preventive education in adolescence, barriers arise, such as taboo, tradition, religion, beliefs and opinions, who work in the implementation of actions directed to this issue. In this way, many parents refuse to discuss with their children about teenage sex. <sup>4</sup>

At this moment, it is important that the adolescent uses contraceptive and preventive methods, however, some factors influence the use of these methods. Some of these factors are access to methods, side effects, knowledge, social influences, beliefs, personal motivations, and relationship factors. 5

As already mentioned, in addition to the risk of pregnancy, Sexually Transmitted Infections (STIs) are one of the main public health problems in the world and an aspect of great relevance when dealing with adolescent sexuality. This occurs because the early onset of sexual life, associated with non-adherence to prevention measures for STIs, associated with the need for acceptance and insertion in social groups, increased consumption of alcohol and other drugs, in addition to gender issues, make this population more susceptible to these infections. 6

Adolescents need clear information,

support and understanding on the subject. In this context, sexual orientation during this stage of life is essential due to the need for adolescents to obtain the necessary security, to realize that their sex life is starting and that they have the assistance of health professionals, to receive correct information on the subject. 7

The scarcity of in-depth studies by education, health and social service professionals can be considered a problem, since there is a possibility of using available resources in an educational way to control early pregnancy. Thus, it is important to study in depth the social relevance of sex education and how it can influence the lives of many young people, preventing unwanted pregnancy and other problems related to unsafe sex. 8

Therefore, the objective of this study was to identify the knowledge of parents or guardians of adolescents in a city in Minas Gerais about sexuality, accountability for sex education and risk perception.

# **METHODS**

This is a descriptive, quantitative and cross-sectional study carried out in a city in Minas Gerais. The study population consisted of 21 parents and guardians, who responded to the questionnaire built through Google Forms, and related to the participants' knowledge about sexuality, accountability in sex education and perception of risk of sexuality.

The questionnaire link was made available on social media, WhatsApp, facebook, Instagram and email, of the participants, using the snowball methodology. In this way, the questionnaire link was sent to some parents of adolescents from an intentional selection, appearing in the authors' agenda. After responding to the survey, they also shared the questionnaire in their networks of contacts, complying with the inclusion criteria of the study, whi-

ch were to be parents or guardians of adolescents.

Thus, the participants, after opening the guestionnaire link, were directed to the free and informed consent form (ICF) online, only those who accepted to participate in the research by answering the ICF affirmatively continued to the study.

To carry out this study, the ethical precepts of Resolution n° 466/12 were considered: all interviewees were informed about the research objectives and permission was requested to use their information, guaranteeing them anonymity and the right to withdraw if they deemed it necessary. The study was submitted to and approved by the Research Ethics Committee of Faculdades Unidas do Norte de Minas under opinion number 4,301,081, and is registered through the Certificate of Presentation and Ethical Assessment (CAAE) number

36520920.6.0000.5141.

Data were treated from descriptive analysis with calculation of percentages and average and were described through tables.

## **RESULTS**

Twenty-one parents or guardians of adolescents participated in the research. Table 1 presents the sociodemographic profile of the participants. Most respondents (61.9%) were female and 38.1% male.

Regarding schooling, most 38.1% have high school, 42.9% had two children, in relation to family income most had an income of one to three minimum wages and 38.1%, they also had a family income of three to six salaries.

Table 2 shows that 66.6% of parents/guardians of adolescents partially agree that almost all young people have sexual intercourse before

Table 1 – Sociodemographic pro Montes Clar	ofile of parents of adolescent os, MG. October-2020	ts interviewe	ed,
Variable	N	0/_	

Variable	N	%		
Gend	leo			
Male	8	38,10%		
Female	13	61,90%		
TOTAL	21	100,00%		
Education				
Elementary School	7	33,33%		
High School	8	38,10%		
Higher Education	6	28,57%		
TOTAL	21	100,00%		
Monthly	income			
Up to a minimum wage	4	19%		
From 1 to 3 minimum wages	8	38,10%		
From 3 to 6 minimum wages	8	38,10%		
More than 6 minimum wages	1	4,80%		
TOTAL	21	100,00%		
Source: Own authorship (2020).				



the age of 18. When asked about the possibility of pregnancy if there is sexual intercourse during the menstrual period, 28.6% of respondents partially agree. Regarding the maintenance of romantic relationships due to the practice, 47.62% totally disagreed.

Table 3 presents the answers regarding accountability on sex education. When asked about the responsibility of the family in the orientation of adolescents in relation to sexual and reproductive development, 85.71% answered that they totally agree and 14.29% partially agree. Regarding the possibility of an adolescent asking for condoms and the pill at the health center or in other consultations for young people without needing parental authorization, 47.62% totally agree.

When questioning that it does not matter when the pregnancy occurs, as long as the teenager has a stable union, 61.9% totally disagree and 28.57% partially disagree. With regard to the school, 38.1% totally agree that it is the institution's obligation to provide counseling to adolescents about their sexuality and sexual initiation, 33.33% partially agree, 19.05% totally disagree and 9.52% partially disagree.

Of the participants who answered the questionnaire, 38.1% totally disagreed that the school should provide condoms to adolescents and 57.14% totally agree that any counseling in the area of sexuality that takes place at school should be made known to those in charge of education; 100% of the participants responded that they fully agree that parents have a responsibility to talk to their children about sexuality (Table 3).

Table 4 shows parents' perception of risk in relation to adolescents' sexuality. It can be seen that 47.62% totally agree that a young woman can get pregnant even if the boy does not ejaculate inside the vagina, 71.43% totally agree that alcohol consumption reduces the perception of risks in sexual behavior. With regard to teenage

pregnancy, 85.71% fully agree that it can bring harm to adolescents of both sexes, bringing social, psychological and biological risks.

### DISCUSSION

Adolescence is a phase in which adolescents are exposed to risks and vulnerabilities, in this way, having a reference adult can work as a protective way to the behaviors that offer these risks and vulnerabilities. Risk factors for adolescents are: pregnancy before the age of 18, obstetric complications with maternal-fetal repercussions, school dropout, loss of youth, early adulthood and interruption of studies due to children. <sup>9</sup>

A study carried out in several Brazilian capitals and in the Federal District showed that more than a fifth of

adolescents aged between 12 and 17 years old have already started their sexual life. At 17 years of age, more than half of the adolescents had already started their sexual life, a fact already expected, since this event tends to occur after 15 years of age. <sup>10</sup>

It is necessary to consider, in relation to Table 2, that the much lower prevalence of sexual initiation observed among adolescents aged 12 to 14 years does not minimize its importance. On the contrary, it reinforces the need for sexuality education to take place in the early years of adolescence. <sup>10</sup>

Furthermore, sexual orientation during adolescence is essential, since the adolescent needs to acquire the necessary security to realize that his/her sexual life is starting and that he/she has the support to receive correct information on the subject, whether

Table 2 - Perception of Parents' Sexuality in relation to their children, Montes Claros, MG. October-2020.

VARIABLES	N	%	
Almost all young people have s	ex before the a	age of 18	
Partially agree	6	28,57%	
Totally disagree	14	66,7%	
Partially disagree	1	4,76%	
TOTAL	21	100%	
A young woman does not become pregnant if she has had sex during her period			
Partially agree	5	23,80%	
Totally disagree	5	23,80%	
Partially disagree	6	28,60%	
TOTAL	21	100,00%	
Having sex maintains a loving relationship			
Totally agree	3	14,29%	
Partially agree	5	23,81%	
Totally disagree	10	47,62%	
Partially disagree	3	14,29%	
TOTAL	21	100,00%	
Source: Own authorship (2020).			



Table 3 – Accountability for sex education, Montes Claros, MG. October - 2020.			
VARIABLES	N	%	
It is the fami	ly's responsibility to guide the ado	lescent in relation to sexual and reproductive development	
Totally agree	18	85,71%	
Partially agree	3	14,29%	
TOTAL	21	100,00%	
A teenager does not nee	ed parental permission to ask for a	condom or pill at the Health Center or other youth care appointments	
Totally agree	10	47,62%	
Partially agree	3	14,29%	
Totally disagree	4	19,05%	
Partially disagree	4	19,05%	
TOTAL	21	100,00%	
Δς	long as the teenager has a stable i	union, it doesn't matter when a pregnancy occurs	
Partially agree	2	9,52%	
Totally disagree	13	61,90%	
Partially disagree	6	28,57%	
TOTAL	2 <b>1</b>	100,00%	
TOTAL	21	100,00%	
It is the school	l's obligation to provide adolescent	s with counseling about their sexuality and sexual initiation.	
Totally agree	8	38,10%	
Partially agree	7	33,33%	
Totally disagree	4	19,05%	
Partially disagree	2	9,52%	
TOTAL	21	100,00%	
	The school must provide condon	ns to adolescents who have sexual initiation	
Totally agree	6	28,57%	
Partially agree	5	23,81%	
Totally disagree	8	38,10%	
Partially disagree	2	9,52%	
TOTAL	21	100,00%	
Any counseling in the area of sexuality that takes place at school must be made known to the guardians			
Totally agree	12	57,14%	
Partially agree	6	28,57%	
Partially disagree	3	14,29%	
TOTAL	21	100,00%	
. 3 11 12	21	100,00%	
Parents have a responsibility to talk to their children about sexuality			
Totally agree	21	100%	
TOTAL	21	100,00%	
Source: Own authorship (2020).			



from the family, teachers or health professionals. 8

A study carried out by Queiroz and Almeida 8 addresses that there is a need to build teachers with essential skills and recycle knowledge through updating and training programs aimed at sexuality. Therefore, the teachers would be able to create and maintain a bond of trust with the teenager and fulfill the goals of sexual orientation at school: lead them to reflection and the application of knowledge for the construction of citizenship.

In the case of Table 4, where the parents' perception of risk in relation to adolescents' sexuality was analyzed, it was possible to identify that the majority of parents, about 47.62% totally agree that a young woman can get pregnant even if the boy does not ejaculate inside the vagina, and about 71.43% totally agree that alcohol consumption reduces the perception of risks in sexual behaviors. Meanwhile, 85.71% fully agree that teenage pregnancy can bring harm to adolescents of both sexes and about 85.71% fully agree that teenage pregnancy can bring social, psychological and biological risks.

However, as it constitutes a period of several changes, adolescents are extremely vulnerable to the use of psychoactive substances, since, during this period, new attitudes and postures are assumed to be accepted in social groups. At the same time, family conflicts may arise from the parents' loss of control and power over their children, who seek the image of an adult in the group of friends. <sup>11</sup>

In our studies, when asked about the anticipation of sexual initiation, 28.57% of parents or guardians reported that the anticipation of sexual initiation has been identified as a relevant factor for a series of negative implications in the lives of young people, such as exposure to STIs, unplanned pregnancies, excessive alcohol consumption and smoking.

Table 4 – Parental risk perception in relation to adolescent sexuality, Montes Claros, MG. October-2020.				
VARIABLES	N	%		
A young woman can get pregnant ev	en if the boy d	oes not ejaculate inside the vagina		
Totally agree	10	47,62%		
Partially agree	7	33,33%		
Totally disagree	3	14,29%		
Partially disagree	1	4,76%		
TOTAL	21	100,00%		
Alcohol consumption decreases the perception of risks in sexual behaviors				
Totally agree	15	71,43%		
Partially agree	5	23,81%		
Totally disagree	1	4,76%		
Partially disagree	0	0,00%		
TOTAL	21	100,00%		
Teenage pregnancy can harm adolescents of both sexes				
Totally agree	18	85,71%		
Partially agree	2	9,52%		
Partially disagree	1	4,76%		
TOTAL	21	100,00%		
Teenage pregnancy can bring				
Totally agree	18	85,71%		
Partially agree	2	9,52%		
Partially disagree	1	4,76%		
TOTAL	21	100,00%		
Source: Own authorship (2020).				

In addition, a study carried out in three Brazilian capitals, with young people of both sexes, which aims to observe the temporal sequence between school dropout and teenage pregnancy, showed that among the poorest there is a higher proportion of girls who dropped out of school at the time or after pregnancy. This information also applies to boys who, in their teens, got their partners pregnant. 2

## CONCLUSION

The research shows that the majority of respondents are female, have elementary education, have more than one child and earn one to two minimum wages, a reality for most Brazilian families. Positive results were found in relation to the sex education of their children, since most of them agree that sex education is the responsibility of the parents and the school's duty, and should be taught together.

There was a deficit in the knowle-



dge of adolescents and their parents about STIs and early pregnancy, which reflects the parents' perception of their children's sexual education and their decision-making.

From this perspective, health education is essential, both with topics related to family counseling, on issues of how to deal with the sexuality of adolescent children, and also in the school environment and in health services, thus guaranteeing access to young people to reliable information.

Investment in programs and actions

that encourage young people to develop safe sexuality, develop self-confidence and self-esteem, can help them practice safer sex, avoiding STIs and unwanted pregnancies.

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