

**PERCEPTIONS ABOUT SEX RELATED MYTHS AND MISCONCEPTIONS:
DIFFERENCE IN MALE AND FEMALE**

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ABSTRACT:

Research problem: Perceptions about sex-related myths and misconceptions.

Objectives: To identify the difference in perceptions of males and females over sex-related myths and misconceptions.

Study Design - Community based cross sectional study.

Setting - Self-administered questionnaire study was undertaken in an urban area of Jhansi.

Participants - Married couples with reproductive age wife.

Sample size - 417 couples of the area.

Study Variables- Sex-related myths and misconceptions

Outcome Variables - Masturbation, Penis-size and sexual performance, STD transmission, Intercourse with virgin and cure of STDs, Initiation of sexual act, Bleeding on first night.

Statistical analysis - By chi - square test.

Results: Response rate 63.8%. Only 8.6% females and 33.7% males knew correctly about masturbation. Males also knew better about route of STD infection (73.5%) and about the fact that intercourse with a virgin cannot cure STDs (47.4%). Females, however, outnumber males on the question of relation between man's penis size and his sexual performance (70%), initiation of sexual act (58.6%) and bleeding in females on first night of marriage (70%).

Conclusion: Males and females had significantly different perceptions on sex related myths and misconceptions.

Recommendations: Sex education campaigns should be designed and implemented to eliminate these age old sex related myths and misconceptions.

Key words: Sex, Perceptions, Myths, Misconceptions.

INTRODUCTION:

Sex plays a dominant role in human life. Although, it has been recognized as a basic biological and instinctual need that drives a person to a certain specific behaviour, it is not a subject to be discussed at home or in society, especially in India. On the contrary, the thirst for knowledge and curiosity and excitement to explore this 'untouchable' subject is present in all, that is, in urban and rural persons, in males and in females, in young and in old. Lack of knowledge and understanding about human sexuality, deficient skills in dealing with problems related to sex and / or unsuitable attitudes will not only be of little or no help but may also cause positive harm. Besides this, the association of age old sex related myths and misconceptions add to the burden and may be responsible for unacceptable and unhealthy sexual behaviour. The present study was a part of a large KAP (Knowledge, Attitude, Practice) survey on sexual behaviour of urban married couples¹, and concentrated on sex related myths and misconceptions prevalent in the society. In a couple, it is presumed that perceptions of one spouse can affect the perceptions of the other spouse, the extent may vary from person to person. In this survey, the questionnaires were filled - up by either of the spouse, so that, it could be assessed whether there is any difference between perception of husbands and wives over sexual matters.

MATERIAL AND METHODS:

The present study was carried out in the Department's Urban Field Practice Area in Jhansi city (U.P.) Data was collected using a pretested,

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self-administered questionnaire. Questionnaires were distributed among all the relevant couples of the area by door-to-door visits. Couples were briefed about the necessity and nature of the survey and filling of questionnaire. They were also told that the questionnaire was to be filled-up by either of the spouse. The participants of the study were couples with wife within reproductive age group (15-45years) and both partners living together.

In all, 417 couples were identified in the area and questionnaires were given to all of them. However, only 266 (63.8%) filled - in questionnaires were received and rest of them were either misplaced or the couples were non-cooperative. Out of 266, 196 (73.7%) questionnaires were filled - up by husbands and 80 (26.3%) by wives.

RESULTS:

Sociodemographic characteristics of the respondents are presented in tables I & II. Maximum respondents were Hindus (62.8%) followed by Christians (18.4%). Majority of the respondents were of upper caste (56.8%). Nearly half of the respondents belonged to nuclear families (47.7%). Further, more than half of the respondents (63.5%) were from social class I (29.7%) and II (33.8%). 41% respondents were aged between 25-34 years and almost 29% respondents were educated upto high school or below. Majority of the respondents (53%) were from service class and 19.9% were housewives (75.7% of total female respondents).

Most of the females (28.6%) refused to answer the question on masturbation, one third of the males (33.7%) and only 8.6% females felt that masturbation is a normal phenomenon (Table - III). Difference in the opinion about masturbation between males and females was found significant statistically.

On the question of relationship between man's penis size and his sexual performance (Table - IV), 63.3% males and 70% females felt correctly that there is no relation, but, the difference was found statistically significant.

Almost three - fourth of the males (73.5%) knew correctly that STDs (Sexually Transmitted Diseases) could be transmitted by having a sexual relationship with an infected person (Table - V), in comparison to only 42.9% females, who knew this. The difference was found statistically significant.

While considering an age old myth that "intercourse with a virgin can cure STDs" (Table VI), 47.4% males and 34.3% females knew correctly that it is false, whereas, 54.3% females and 33.7% males did'nt know whether it is true or false. The difference between males and females, however, was found to be significant statistically.

Although more females (58.6%) than males (46.4%) thought that initiation of sexual act is not a males's duty only, the difference was not found statistically significant (Table - VII).

Regarding bleeding in the female partner on the first night of marriage (Table - VIII), males (51%), who felt that absence of bleeding showed that female was not a virgin were more than females (30%), who thought the same. The difference was also found statistically significant.

DISCUSSION AND CONCLUSION:

The results of the study showed that even after increasing openness in the society towards sex, myths and misconceptions are still prevailing. For masturbation, as expected, most of the females had misconceptions. Also majority of the males marked incorrect answer to the question posed to them. Francis et al³, in their study have found that boys were more worried about the adverse effects of the masturbation than girls. Regarding mode of transmission of STDs and relation between intercourse with a virgin and cure of STDs, misconceptions and ignorance were considerably higher in the females. Awasthi et al.⁴ have also reported that knowledge about sex related diseases was low in female students. Bhende⁵ observed that only 9.4% girls and 10.4% boys of underprivileged areas had heard about STDs. In our study, however, females outnumbered males in expressing their correct opinion

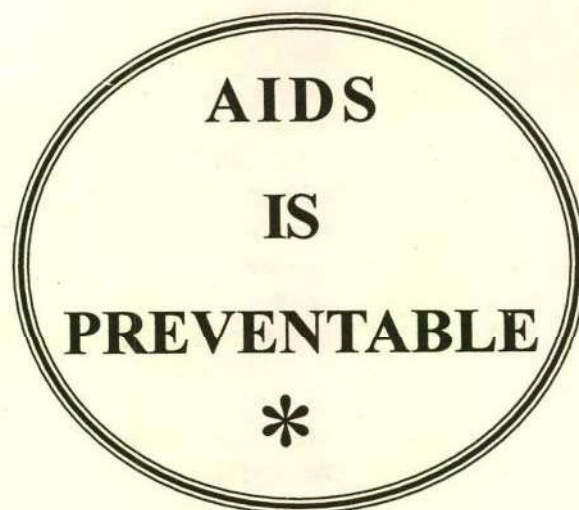
with regards to the relation between man's penis size and his sexual performance, initiation of sexual act, and significance of bleeding in females on the first night of marriage. This could be because they themselves are the assessors in the case of relation between penis size and male's sexual performance and sufferers with regard to beliefs about initiation of sexual act and first night bleeding as the indicator of virginity. Thus, although females had lesser knowledge on some aspects, they showed better attitudes on other aspects. Similar findings have also been reported by Awasthi et al⁴ and Moses and Praveena⁶.

Though it is often presumed that the perceptions of one spouse are affected by those of the other partner, yet, in this study this affect was not seen completely. On various aspects such as masturbation, bleeding on first night of marriage, initiation of sexual act and mode of STDs transmission, females had different opinions from males. Actually, the knowledge and so also, the perceptions of an individual, especially on sexual matters, depend on several factors such as family environment during the childhood, interactions with friends, spouse and access to correct sources of information. As these factors might differ for the two spouses, the perceptions of one partner may not always influence the perceptions of the other.

REFERENCES:

1. Raizada, A., AIDS and Sexuality - A study in the urban area of Jhansi city, M.D. Thesis, Department of S.P.M., M.L.B. Medical College, Jhansi.
2. Kumar P., Social classification - need for constant updating. *Ind J Community Med.* 1993, 18: 60 - 61
3. Francis P.T., Gill J.S, Chowdhury, S., Knowledge, beliefs and attitudes regarding AIDS, STDS and human sexuality among senior secondary students in Delhi. *Ind J Community Med.* 1994, 19 : 19 - 20
4. Awasthi N.N, Mathur B.D, Mitra R, Srivastava R.N., A study on the sex knowledge of school going teenagers of Jhansi U.P. *The Journal of Family Welfare*, 1980, 27 (1) : 35 - 45.
5. Bhende, A.A; A study of sexuality of adolescent girls

- and boys in under - privileged groups in Bomaby. *The Indian Journal of Social Work*, 1994, LV : 557 - 571.
6. Moses S, Praveena C, Sex education - Its need and attitude of adolescents. *The Journal of Family Welfare*, 1983, 30 (2) : 34 - 39



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TABLE - I FAMILY CHARACTERISTICS OF RESPONDENTS

	Characteristics	No. (n = 266)	Percentage
(i)	Religion :		
	Hindu	167	62.8
	Christian	49	18.4
	Muslim	38	14.3
(ii)	Caste:		
	Sikh	12	4.5
	Upper	151	56.8
	Backward	61	22.9
(iii)	Scheduled	54	20.3
	Family type:		
	Nuclear	127	47.7
(iv)	Joint	139	52.3
	Social class* (Per capita monthly income in Rs.)		
	I (> 1000)	79	29.7
	II (500 - 999)	90	33.8
	III (300 - 499)	59	22.2
	IV (150 - 299)	26	9.8
V (< 150)	12	4.5	

*Criteria suggested by Kumar²

TABLE -II INDIVIDUAL CHARACTERISTICS OF RESPONDENTS

	Characteristics	No.(n =266)	Percentage
(i)	Age (Year)		
	15 - 24	48	18.0
	25 - 34	109	41.0
	35 - 44	96	36.1
	> 45	13	4.9
(ii)	Educational status		
	High School and below	77	28.9
	Intermediate & Graduation	120	45.1
(iii)	Above graduation	69	25.9
	Occupation		
	Service	141	53.0
	Business	38	14.3
	Housewife	53	19.9
	Skilled worker and labourer	27	10.2
Professional	7	2.6	

TABLE - III DISTRIBUTION OF MALE AND FEMALE RESPONDENTS BY THEIR OPINION ABOUT MASTURBATION.

Perception of respondents	Male		Female	
	No.	%	No.	%
Normal activity	66	33.7	6	8.6
Misconception	124	63.2	44	62.8
No response*	6	3.1	20	28.6
Total	196	100.0	70	100.0

* Excluded for statistical analysis

$X^2 = 9.74$, d.f. = 1, $p < 0.01$

TABLE - IV DISTRIBUTION OF MALE AND FEMALE RESPONDENTS BY THEIR PERCEPTION ABOUT RELATIONSHIP BETWEEN LENGTH OF MAN'S PENIS AND HIS SEXUAL PERFORMANCE

Perception of respondents	Male		Female	
	No.	%	No.	%
No relation	124	63.3	49	70.0
Relation	57	29.1	11	15.7
No response*	15	7.7	10	14.3
Total	196	100.0	70	100.0

* Excluded for statistical analysis.

$X^2 = 3.94$, d.f. = 1, $p < 0.05$

TABLE - V DISTRIBUTION OF MALE AND FEMALE RESPONDENTS BY THEIR PERCEPTION ABOUT CORRECT MODE OF STD TRANSMISSION.

Perception of the respondents	Male		Female	
	No.	%.	No.	%
Sex with infected person	144	73.5	30	42.9
Misconception	50	25.5	35	50.0
No response*	2	1.0	5	7.1
Total	196	100.0	70	100.0

* Excluded for statistical analysis

$X^2 = 18.36$, d.f. = 1, $p < 0.001$

TABLE - VI DISTRIBUTION OF MALE AND FEMALE RESPONDENTS BY THEIR PERCEPTION ABOUT RELATION BETWEEN INTERCOURSE WITH A VIRGIN AND CURE OF STDs

Perception of respondents	Male		Female	
	No.	%.	No.	%
Intercourse can't cure STDs	93	47.4	24	34.3
Intercourse can cure STDs	30	15.3	5	7.1
Don't know	66	33.7	38	54.3
No response*	7	3.6	3	4.3
Total	196	100.0	70	100.0

* Excluded for statistical analysis.
 $X^2 = 10.60$, d.f. = 2, $p < 0.01$

TABLE - VII DISTRIBUTION OF MALE AND FEMALE RESPONDENTS BY THEIR PERCEPTION ABOUT STARTING OF SEXUAL ACT.

Perception of respondents	Male		Female	
	No.	%	No.	%
Not male's duty only	91	46.4	41	58.6
Only male's duty	88	44.9	25	35.7
No response*	17	8.7	4	5.7
Total	196	100.0	70	100.0

* Excluded for statistical analysis
 $X^2 = 2.09$, d.f. = 1, $p > 0.01$

TABLE - VIII DISTRIBUTION OF MALE AND FEMALE RESPONDENTS BY THEIR PERCEPTION ABOUT BLEEDING IN THE FEMALE PARTNER ON THE FIRST NIGHT OF MARRIAGE

Perception of respondents	Male		Female	
	No	%	No.	%
Absence of bleeding has no significance	96	49.0	49	70.0
Absence of bleeding shows that female is not a virgin	100	51.0	21	30.0
Total	196	100.0	70	100.0

$X^2 = 9.46$, d.f. = 1, $p < 0.005$.