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Sex education and the influence on sexual wellbeing

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Abstract

Objective: To identify any links between knowledge about sexual matters sex education and sexual wellbeing

Material & Methods: A global survey was undertaken of 26,032 participants across 26 counties.

Results: 49% of people who have received formal sex education were highly satisfied with their sex lives, compared with just 40% of those who have not. Similarly, 49% of women and 48% of men do not think that they received enough advice and information to get the best from their relationships especially about the emotional aspects.

Conclusions: People who have enough information to enjoy their sex life to the full are significantly more likely to be satisfied with many aspects of their sex life.

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Keywords: Global survey, sexual behaviour, sex education, well being.

1. Introduction

Sex is important to people in the bedroom and elsewhere. Sexual activity is as important to people as having a good night's sleep, a healthy diet, a good recreational life and a fulfilling vocation. Despite this many people express dissatisfaction with their sex life and their sexual relationship with others and there are differences between men and women and between individuals between countries.

The basic definitions of sex were revisited by an expert group with sex, sexuality and sexual health defined. Sexual health can be identified through the free and responsible expressions of sexual capabilities that foster harmonious personal and social wellness, enriching life within an ethical framework. This has the potential to allow a more directed focus in promoting sexual health in general (Coleman, 2002).

The findings reported here are part of the results from a large international study. The report of the sexual behaviours of individuals and the link with sexual well being has been published (Wylie, 2009).

2. Method

The Sexual Well Being Global Survey (SWGS) involved 26,032 respondents world wide from 26 countries. The survey was conducted electronically (on the internet) over a seven week period between August and September 2006 and carried out by Harris International, a large market research agency. The exception was in Nigeria where the survey was done by face-to-face interview. A number of questions were asked of respondents and all questions had to be completed for the data set to be accepted into the database. In the case that an individual declined to answer, the detail was excluded from total bases. The analysis focused on both sex education - those who received it versus those who did not and sex knowledge - those who fully agree (strongly agree/ agree) that there is enough advice/ information to enjoy their sex life to the full versus those who disagree (strongly disagree/ somewhat disagree).

3. Results

In total 26,032 respondents participated in the study worldwide. The minimal age was 16. 12,966 (49.8%) were women. With regards sexual orientation 90% reported being heterosexual, 2% gay, 1% lesbian and 3% bisexual with a further 4% declining to answer. The countries involved and number of participants is shown in table 1.

Country	Number of participants
Australia	1036
Austria	542
Brazil	1123
Canada	1005
China	1132
France	1137
Germany	1037
Greece	1017
Holland	1039
Hong Kong	1129
India	1000
Italy	1013
Japan	1090
Malaysia	1026
Mexico	1122
New Zealand	1143
Nigeria	500
Poland	1050
Russia	1042
Singapore	1021
Spain	1008
Switzerland	557
UK	1017
USA	1005

Table 1. Countries involved and number of participants

Overall, those who received sex education have significantly higher levels of sexual satisfaction in a number of parameters than those who had not received any sex education (table 2).

Sub categoriesHas received educationHas not received educationSatisfaction with overall sexual wellbeing5950Satisfaction with current sex life4940Satisfaction with emotional side of sex5246Satisfaction with physical side of sex4939

Table 2. Overall satisfaction with sexual parameters %

52% of respondents (51% women, 52% men) completely agreed that "There is enough advice and information available to enjoy your sex life to the full" Those who fully agree that there is enough advice and information to enjoy sex, are more confident in dealing with sexual issues as shown in table 3.

Table 3. Confidence in dealing with sexual issues %

Sub categories	Fully agree sufficient info to enjoy sex	Disagree at all
How to avoid pregnancy	79	64
How to protect self from STIs/STDs	78	61
How to have a happy and fulfilling sex life	69	44
Where to seek help, advice or guidance	67	38
on sex		

The countries with the highest and lowest level of agreement that "there is enough advice and information to enjoy your sex life to the full" are shown in table 4.

Table 4. Agreement about enough advice and information to enjoy sex life to the full %

Country	Number of participants
Mexico	80%
Spain	76%
Brazil	71%
South Africa	66%
Canada	65%
Netherlands	65%
USA	62%
France	62%
New Zealand	59%
Australia	59%
Nigeria	55%
Switzerland	55%
India	52%
UK	52%
China	48%
Poland	48%
Greece	44%
Singapore	43%
Malaysia	42%
Italy	41%
Austria	38%
Hong Kong	38%
Germany	35%
Thailand	35%
Japan	19%

Formal sex education at school plays a key role. Worldwide it is reported as a major source of sex information amongst those who have received sex education as shown in table 5.

Table 5. Major sources of sex information %

Source	Has received sex education	Hasn't received sex education
School	57	5
Friends/Peers	51	52
Books	46	47
Magazines	45	42
Internet	38	26
TV	37	23
Partner	31	37
Parents/Guardians	25	13
College/University	20	6
Newspaper	17	10
Health Clinic/Doctor	16	8

Nevertheless, there are some significant country variations in the percentage mentioning school as the major source of sex information as shown in table 6.

Table 6. Country variations in the percentage mentioning school as the major source of sex information

Country	Percentage
Netherlands	78%
Mexico	76%
Brazil	71%
Austria	69%
Germany	67%
Nigeria	66%
Spain	66%

Italy	63%
Japan	62%
Poland	62%
Switzerland	61%
New Zealand	60%
Thailand	59%
Canada	58%
US	56%
Australia	55%
Hong Kong	55%
South Africa	55%
Singapore	54%
ÜK	53%
China	53%
Greece	52%
India	43%
France	37%
Malaysia	36%
Russia	23%

The topic areas that were most covered in sex education is shown in table 7.

Table 7. The topic areas that were most covered in sex education

Topic area	Male	Female
Puberty	54	57
Menstruation	37	69
Pregnancy	49	55
STIs	45	39
Contraception	36	39
Conception	35	37
HIV/Aids	33	28
Relationships	31	24
Sexual Identity	31	22
Abortion	19	20
Emotional aspects	22	15
Where to find further info	16	14

When asked what the person wished that they had been taught about, the most common response was about the emotional side of sex followed by issues around relationships (table 8). Worldwide 43% wished sex education covered the emotional side of sex and this applied across all age generations, along with the other key topics.

Table 8. What the person wished that they had been taught about

Topic area	Male	Female
Emotional aspects	41	47
Relationships	34	37
Where to find further info	35	35
HIV/Aids	32	36
Contraception	32	33
STIs	30	35
Abortion	25	29
Sexual Identity	23	28
Conception	20	22
Pregnancy	21	22
Puberty	16	14
Menstruation	15	12

4. Discussion

This is the most comprehensive world wide study of sexual behaviours published to date. The survey was a development of previous annual surveys by a multinational manufacturer of condoms and related products to understand the sexual behaviours and needs of the general population and potential customers. By use of a

structured questionnaire and by employment of an independent third party agency Harris International, more robust data was obtained than in previous internet surveys.

Sexual knowledge relates directly to enjoyment of a fully satisfying sex life with those who have enough information to enjoy their sex life to the full being significantly more likely to be satisfied with many aspects of their sex life. Knowledge provides sexual confidence with the know-how of sexual function, how to protect themselves and their partner from pregnancy and STI's and overall, how to be resourceful (i.e. where to seek further information).

Just over half of the respondents fully agreed that there is enough information available to enjoy their sex life to the full. For many across the world, formal sex education provided at school is the major source of information, hence its central role in providing some of the fundamentals that will assist in achieving greater levels of sexual happiness. However, young people's recall of school based sexual health education has been shown to poor for positive areas of sexual health, such as having good relationships, rights and responsibilities and being good parents (Black et al, 2005) even if this is provided in a curriculum. As such, retention may need to be attended to which may lead to an improvement in overall sexual wellbeing. Nevertheless, there is scope for a more comprehensive coverage of sexual issues from biological topics to those regarding emotions and relationships.

5. Conclusion

The findings of the sexual wellbeing global survey show a rich diversity and difference between groups, countries and cultures. A number of reasons to account for this have been considered. A number of factors can affect sexual satisfaction and sexual intimacy including shame, envy, self consciousness, trust, love, attachment, motivation for pleasure and self esteem particularly within minority ethnic and culture groups.

One of the roles of sex therapists and sexual medicine physicians is to enhance the opportunity and experience of intimacy within both the individual with self satisfaction as well as within relationships. The interplay of sexual well being and sexual satisfaction and maintaining levels of sexual desire that are favourable for both partners must be a stated and agreed goal. Clinical attention to issues that assure sexual satisfaction and sexual wellbeing can have considerable influence on overall sexual desire and so general well being.

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