

# Construcción de la sexualidad infantil en el ambiente familiar

## Construction of infant sexuality in the family environment

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#### Resumen

La construcción de la sexualidad infantil se halla invisibilizada en la sociedad. Las personas adultas consideran que los niños y niñas infantes son seres asexuados y subsisten los tabúes alrededor de la sexualidad humana. Ocultar el tema mantendrá la ignorancia sobre la sexualidad infantil. La investigación sobre la sexualidad generalmente ha estado dirigida hacia la adolescencia como supuesta etapa en la que la sexualidad aparece en el desarrollo humano. El objetivo es verificar si mediante un proceso formativo cambian las formas en cómo los padres/madres de familia procuran formación e información sobre la sexualidad a sus hijos e hijas. Se implementó un programa de sexualidad infantil con representantes legales de un Centro de Desarrollo Integral para la Primera Infancia de la ciudad de Quito. Esta investigación es de tipo cuasi experimental. Se aplicaron encuestas de entrada y salida a los actores directos e indirectos del programa, divididos en grupos experimental y de control. La conclusión final es que el programa tuvo un impacto significativo en el cambio de perspectiva de los padres/madres de familia. Incluye las prácticas de diversas posibilidades de educación sexual con sus hijos e hijas. De igual forma, se presenta la posibilidad de educar a progenitores en los ámbitos escolar y comunitario para mejorar la calidad de vida y de gestión familiar.



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## Palabras clave

Creencias, familia, género, infancia, sexualidad.

#### Abstract

The construction of infant sexuality is invisible in society. Adults consider infant children (boys and girls) to be asexual and taboos about human sexuality persist. Hiding the topic will maintain ignorance about child sexuality. Research on sexuality has focused on puberty and adolescents as periods of sexual development in humans. The objective is to verify if, through a training process, the ways in which parents provide training and information about sexuality to their sons and daughters change. An infant sexuality program was implemented for the legal guardians of the children in an early childhood program in the city of Quito. This research is quasi-experimental. Survey will be given at the beginning and end of the program to people directly and indirectly responsible of the program. Additionally, there will be an experimental and a control group. The final conclusion is that the program had a significant impact on the change of perspective of the parents. It includes the practices of various possibilities of sexual education with their sons and daughters. In the future, there is the possibility to educate parents in the school and community environment to improve the quality of life and family management.

#### Key words

Beliefs, family, gender, infancy, sexuality.

#### 1. Introduction

The scientific literature on child sexuality is limited. The emphasis placed on adolescence as the main focus of investigative attention to human sexuality has restricted the inquiry of the childhood period. An essential factor of incidence is that there is the idea that children are beings (Hernández and Jaramillo, 2003). Thus, child sex education, as the management axis of some projects and programmes, is developed with preponderance in educational institutionality. When implemented in the family environment it is usually complementary and subsidiary to school.

Family competences are applied in a fledgling way or simply not implemented in terms of sexuality training and information. Therefore, the recurrence of parents to hide the genital organs and their physiology in colloquial, inaccurate and inappropriate language. The teaching practices that adult family members apply in everyday life contribute to a formation full of fears, feelings of shame, guilt, and unfounded beliefs that rather disturb and inhibit sexual expressions.

The research purpose includes characterizing the use of language and maternal-parental educational strategies in child sex education. It is also necessary to see their influence on the knowledge, beliefs and attitudes of the sexuality of infants aged 4 to 5 years. This research covered a child sexuality program developed with the mothers and parents of a Center for Integral Development for Early Childhood Tax Support. The hypothetical approach was that the implementation of this programme will influence the parent strategies applied in the family environment so that it has an impact on the notions that girls and boys can learn or assume.



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The document was presented as research work in the Master of Initial Education at the Faculty of Philosophy, Letters and Educational Sciences of the Central University of Ecuador. It contains some theoretical elements for conceptual framing and the methodological process applied. Then the results obtained and their respective analysis and discussion are presented. Finally, the conclusions and literature consulted are available.

## 2. Related Concepts

#### 2.1 Historical and legal references in Ecuadorian educational institutionality

In Ecuador, policies and programmes that have been implemented in terms of sex education have their eyes on adolescent students. The most important effort that in the field of sexuality education has made the Ecuadorian state, was through the Ministry of Education. It was developed from the Sexuality and Love Education Act enacted in the Official Register 285, in 1998, as considered in Ministerial Agreement 403 (Official Register 386, p. 1). His organization was carried out with the National Education Plan for Sexuality and Love in 2000. The execution was formalized through the National Sexuality and Love Education Program (PRONESA) in all Provincial Directorates of Education. In this way, its implementation in the schools of the basic and high school levels of the educational system was sought.

Subsequent to this national policy, other processes have been developed that have been translated into substantive regulations that describe efforts regarding compliance. So you have: Ministerial Agreement No. 3393: Special Regulations and Mechanisms for the Knowledge and Treatment of Sexual Offences in the Educational System (Official Register 431,2004, p. 4-8). Ministerial Agreement No. 403: Institutionalizing sex education in the country's tax, private, physcomest and municipal educational establishments through the PRONESA (Official Register 386, 2006, p. 14-15). Executive Decree No. 620: Declaration as a State Policy of the "National Plan for the Eradication of Gender-Based Violence against Children, Adolescents and Women" (Official Register 171,2007, p. 3-4). Ministerial Agreement 062: National Plan for the Eradication of Sex Crimes in education (Ministry of Education and Culture, 2006).

The Inter-ministerial Agreement No. 0247-2018 of the year 2018: Intersectoral Policy on the Prevention of Pregnancy in Children and Adolescents Ecuador 2018 - 2025 (Official Register 529, 2018, p.1-44) In its extract it states that pregnancy in children and adolescents is a social and public health problem. It shows inequality, social injustice and a clear violation of human rights, with an invaluable social, economic and cultural impact. The Ministries of Health, Education, Justice and Economic and Social Inclusion participate in this policy.

The Educating in the Family Programme promoted by the Ministry of Education 2015 takes a comprehensive approach to education on sexuality and affectivity. It is the broadest and most inclusive effort that the ministerial body has in this area and is being fully implemented.

A preliminary evaluation of the actions, processes and implementation of the legal regulations mentioned indicates that there is partial implementation of the policies. This is due to the scarcity of financial resources needed for their implementation, the low availability of the required human talent and the insufficient coverage of such programs. These elements mean that the underlying social problem is contained in some educational institutions and sectors and has increased in others. No policy has been directed towards



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the preparation of parents and early education students. State decisions to provide for the training of parents and students are not a starting point in the training process for these social subjects. A comprehensive process at all educational sub levels and with the involvement of key actors, quality sex education can be achieved.

#### 2.2 State of Play

For this study, the family environment is the space in which the teachings on notions of sexuality applied by mothers and fathers are developed. The forms and strategies are based on their own knowledge that includes the knowledge, beliefs and attitudes around the subject. The family environment is permeated by elements of community and social culture that influence their educational actions. The research has among its principles the gender focus as a conceptual and analytical category. It makes it possible to understand, explain and transform the relations of inequity, domination, discrimination and violence existing between men and women. This is not only based on sex, but also in relation to age, ethnicity, class and sexual options, according to the guidelines for the inclusion of the MINEDUC-VVOB (2019). Gender is assumed to be the "set of practices, beliefs, representations and social prescriptions that arise among the members of a human group based on a symbolization of the anatomical difference between men and women. (Lamas, 2000, p. 2). This concept accounts for the way human beings are socialized according to the sex they are born with.

According to Julia Suárez, stereotypes are preconceptions, simplified and generalized ideas about a group of people. According to the MINEDUC-VVOB guide (2019), gender stereotypes are caricatural beliefs about female and male groups (Suárez, 2016). Androcentrism is a view of the world referenced around men in masculine terms and the reconstruction of the sociocultural from that perspective. They contribute to the devaluation of the former and the valuation or overvaluation of the latter, in accordance with the unequal social order between the sexes.

It is important to specify that sex has to do with the biological, anatomical, morphological, chromosomal and physiological characteristics that define men and women. Sexual orientation determines the sex of people for whom there is attraction, desire, love and interest (MINEDUC-VVOB, 2019). In this field we must consider homophobia, which is the fear or hatred of homosexual men and women. Sexual identity "includes the way a person identifies as a woman or a man, or a combination of both, and the person's sexual orientation" (WHO/PAHO, 2000, cited by Alcantara, 2012, p. 1). Gender identity "has to do with how people feel male or female and their own deep-seated experiences. (National Council for Gender Equality, 2018, p. 34). The starting point then is that sex equals biological and gender equals cultural.

Heteronormativity is defined as "the political, social, philosophical and economic regime that generates violence towards all those people who do not follow a pattern of gender, sexuality, practices and desires associated with heterosexuality" (Moreno, 2019, p. 6). Inequitable relationships based on gender are normalized and accepted in society. Among the concepts assumed is that of androcentrism, which refers to "the vision of the world that places men as the centre of all things, constructs a masculine view as universal and unique as possible, and entails the invisibility of women and their world. (Morales, 2013, p. 3). From this position, men are historical and social subjects of action, while women are more objects than subjects, since they are acted upon. Anthropologically, patriarchy is understood as "an organization of the world in which men and the masculine are established as dominant and constitute a system of beliefs and ideas that structure the way we see and understand the



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world. (Rosso, 2016, p. 2). The imposition of heterosexuality on other sexual identities has become naturalized in society. So have the cultural patterns that impose the power of men over women in general.

Finally, we take the concept of sexuality from the World Health Organization (2018) which defines it as:

A central aspect of the human being that is present throughout his life. It covers sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. It is felt and expressed through thoughts, fantasies, desires, beliefs, attitudes, values, behaviors, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, ethical, legal, historical, religious and spiritual factors (p. 3).

The nuances that each of these concepts and others that are linked, are understood from the inclusiveness and rights approach. Thus, the framework of concepts helps to understand a specific socio-educational reality such as the construction of child sexuality in the family environment. This social space includes fundamentally the parents as affective and knowledgeable references for children. It is assumed as a "construction" since different aspects of sexuality are learned.

## 3. Methodology

#### 3.1 Population and sample

The student population of the Virginia Larenas Center for Integrated Early Childhood Development is 438 children. The population of parents and legal representatives is 430. The sample was made up of 20 legal representatives from the experimental group and 20 from the control group, equivalent to 9.3% of the population. The student body of the experimental group was composed of 20 children aged 4-5 years, corresponding to the experimental group of parents. The control group was 20 students from different parallels taken at random. These groups correspond to 9.1 per cent of the population. All individuals in the student survey were in the age group 4-5 years.

#### 3.2 Research design

The operational design of the research was quasi-experimental with the intervention of an experimental and a control group. The formation of these groups was based on the list of participants provided by the educational institution. The development of the child sex education program was determined with the experimental group. The application of the entry and exit surveys (test and retest) to both groups was also determined. The test and retest are questionnaires that investigate knowledge, beliefs and attitudes about child sexuality. These instruments were used to determine the incidence of the applied training program.

The application of the test and retest of the experimental group was with the same people who participated in the program. The application of the retest of the control group was with different people than those who answered the test, although from the same educational institution. Thus, the characterization is that it is a pre-test - post-test design with a non-equivalent control group (Murillo, n.d. p. 25). The instruments for data collection were



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questionnaires. In the case of the parents, it is composed of 36 items of different types: checklist, Likert-type assessment scale, and open-ended questions. For the student, it had 18 items with checklist and open-ended questions. Anecdotal records were made of relevant aspects of the child sexuality education program applied to the experimental group of mothers and fathers.

#### 3.3 Intervention program: Family Sex Education Program-PSIF

The Family Sex Education Program (FSE) is a sex education process for parents of young children. It was designed by the author of this article. It contains the justification, objectives, general pedagogical and methodological guidelines, workshop cycle and bibliographical references. There is a social environment of media overexposure to sexuality, which requires sexual education in natural spaces for children. The pedagogical principle assumed is that the family environment is the ideal one for achieving a comprehensive education for children. The programme provides information and guidance on aspects that parents do not know how to transmit. It takes into account that some knowledge, beliefs and attitudes are the product of ignorance regarding the development of the child.

The FIPP has two objectives: 1) To reflect on the importance of sex education in the family environment; and, 2) To identify attitudes and actions that parents should have or apply so that they help their children to know and respect their bodies, establish sexual differences between men and women, and reflect on gender differences. The training cycle involves eight workshops of 1.5 hours each, for a total of 12 hours of management. Each workshop includes its respective agenda with its title, specific data, objective, activities, resources, evaluation, and specific bibliographic reference.

## 4. Research Result

In the first part, the surveys asked some socio-demographic questions to establish characteristics of the group of legal representatives who applied the instruments. For this article we have the results corresponding to sex, academic training and religiousness.

Options	GE-	PMF	GC-PMF	
	f	%	F	%
Men	3	15	0	0
Women	17	85	20	100

Table 1: Sex of participating parents

In the exit survey, the Parent Control Group (PCMC) has 100 % women. In the Experimental Group of Parents (GE-PMF) 85 % of women and 15 % of men. There is therefore a majority presence of women, which is very common in the educational institutions of the sector (Table 1).

Seventy percent of participants in the GE-PMF have a high school diploma and 25% a university degree. The GC-MFP, claims to have basic training 55%, secondary 30% and university 10% (Table 2).



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One element to be known was the relationship between the beliefs and knowledge that mothers/parents have about sexuality and its effects on the notions of their children. Hence the importance of knowing if they profess any religion. Fifty-eight percent claim to be non-believers and 42% claim to be so (Table 3). The responses are surprising for a society like Ecuador's and for the sector of the population surveyed.

Table 4 shows the results in terms of the impact that the PSIF had on the experimental group. This is both in relation to the control group and to itself. The significance for this study was established in four ranges: Very significant, Medium significant, Not very significant and Not at all significant.

Opciones	GE-PMF		GC-PMF	
	f	%	f	%
None	0	0	1	5
Basic (complete or incomplete)	1	5	11	55
High school (complete or incomplete)	14	70	6	30
University (complete or incomplete)	5	25	2	10

Options	GE	GE-PMF		GC-PMF	
	f	%	f	%	
Yes	7	35	8	40	
No	13	65	12	60	

Aspects of the Research	Items	Level of significance of Parents				
		A. Experimental group vs Control group				
		B. Impact in group experiment (test vs retest)				
		Very	Mildly	A little	Not at all	
		significant	significant	significant	significant	
Development of sexuality	10	$\checkmark$	-		-	
Age of mediation	11	$\checkmark$				
Defined sexual orientation	12		$\checkmark$			
Educational mediation	13.14		$\checkmark$			
Obtaining information	15		$\checkmark$			
Child masturbation	16.17	$\checkmark$				
Clarity of information	18.19	$\checkmark$				
Fears about sexuality	20		$\checkmark$			
Perception of mediation capacity.	24	$\checkmark$				



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Sex education stimulates sexual activity.	25.26	$\checkmark$			
Sexuality as pleasure	27			$\checkmark$	
Heteronormativity as a cultural pattern	28	$\checkmark$			
Exclusive sexual practices within marriage	29		$\checkmark$		
Men's initiative in sex	30	$\checkmark$			
Active sex life as a male right	31	$\checkmark$			
Active sex life as a woman's right	32	$\checkmark$			
Relationship between religious teaching and sexuality.	33				$\checkmark$
Search for information.	34		$\checkmark$		
Assessment of sex education received.	35		$\checkmark$		
Masturbation as a harmful situation	36	$\checkmark$			
20 aspects researched (100%)	24 ítems	11 55%	7 35%	1 5%	1 5%

Table 4: Levels of significance of the impact of the PSIF of the experimental group of parents in relation to the control group and in relation to their own development

Aspects of	Number	Level of significance in students				
the	of Items					
Research		C. Experimental group vs Control group				
		D. Impact in g	roup experiment	(test vs retest)		
		Very	Mildly	A little	Not at all	
		significant	significant	significant	significant	
10 (100%)	16	6	2	1	1	
		60 %	20 %	10 %	10 %	

Table 5: Levels of significance of the impact of the PSIF of the experimental group of students in relation to the control group and in relation to their own development

For the experimental group of mothers/parents, it can be inferred that the PSIF had an important impact with a medium and high 80% significance. The aspects of little or no significance are those that were not addressed due to issues of the program's curricular structure. This is the case of the absence of information on the genital apparatus of men



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and women. It also depends on the intentionality of the program as it is the laicism that was maintained in its application.

As a statistical summary, in the case of the student body, Table 5 shows that the level of significance is 60% "Very significant", 20% "Moderately significant", 10% "Not very significant" and 10% "Not at all significant".

The Spearman correlation coefficient was also used to relate data. This is because the research corresponds to a non-parametric correlation: a) it has a sample of less than 30 individuals, b) it does not necessarily have a normal distribution, c) it has psycho-social variables that were quantified (Camacho, 2008). The application was made with fourteen items whose indicators contain correct answers and better responses.

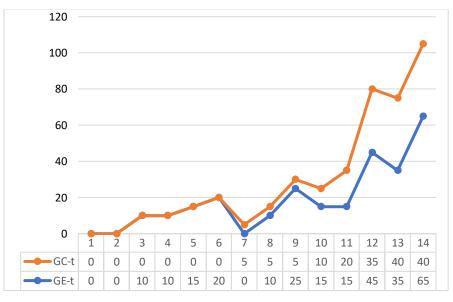


Figure 1. Spearman 1 Correlation: Experimental Test Group - Control Test Group

For the Spearman 1 coefficient (Figure 1), the Experimental Group and the Control Group were correlated with the data obtained in the test or input survey. The Spearman correlation coefficient obtained is 0.84, which is between a "considerable positive correlation" and a "very strong positive correlation" (Cabrera, 2011, p. 81). The two groups respond in a very similar way and their characteristics in terms of knowledge, beliefs and attitudes about sexuality are quite similar.

For the Spearman 2 coefficient (Figure 2), the Experimental Group and the Control Group were correlated with the data obtained in the retest or exit survey. The Spearman correlation coefficient obtained is 0.16 which is characterized as a "very weak positive correlation". Two different groups are presented in their knowledge of sexuality, as a result of their participation in the Experimental Group's PSIF sex education program.



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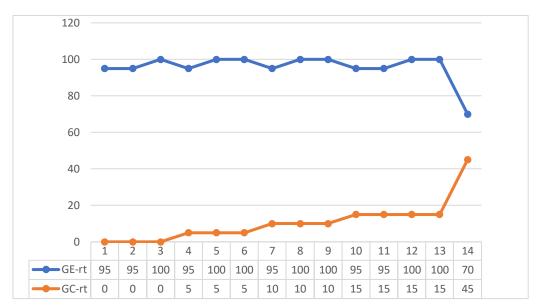


Figure 2. Spearman 2 correlation: Experimental retest group - Control retest group

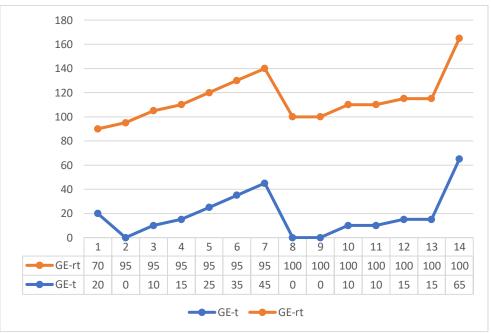


Figure 3. Spearman 3 correlation: Experimental test group - Experimental retest group

For the Spearman 3 coefficient (Figure 3), the Experimental Group was correlated in their answers to the test and in their answers to the retest. The Spearman correlation coefficient obtained is 0.06 which is characterized between "no correlation between the variables" and a "very weak positive correlation". The comparative differences in knowledge, beliefs and attitudes towards child and human sexuality in general are very wide as an impact of the FIP. Knowledge, beliefs and attitudes changed significantly at both points for this group of mothers and fathers.



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## 5. Discussion of results

The fact that the majority of women are involved in the primary care of children shows that mothers are almost exclusively responsible for their children. By extension it is assumed that this is common in Ecuadorian society. It is the result of a division of responsibilities with a strong gender inequitable component that is maintained in this local population and at the national level. As Royo (2011) points out, "in domestic tasks such as education, it is where there are disparities between men and women that an asymmetrical distribution of family work exists" (p. 120).

With regard to educational level, it can be inferred that the higher the level of education, the greater the interest in training as parents. It should be noted that membership of the PSIF was voluntary. The willingness to broaden knowledge is explained by the need to form an educational background in each of these persons.

One of the essential questions is to know the criteria regarding whether children's sexuality develops naturally or instinctively. There is an initial preference among mothers/parents of both groups to accept that sexuality develops without the intervention of adults. This tendency is repeated in the GC-MFP in the exit survey.

The GE-PMF group, passes in the retest to 5% in their affirmative answers which is considered as very significant. The learning path of the GE-MFP, as a product of their participation in the FIP, leads them to consider sexuality beyond genitality. This is the result of the program's approach, which reflects on the fact that sexuality involves the affective interrelationship of people. It occurs in the family and school context, and involves the emotional closeness of the mother/father and child bond, or other family members. This group sees sexuality as the discovery of themselves as human individuals and of others through social interactions. It is assumed then, as stated by Barriga-Jiménez (2013), that "sexual behavior, like any other behavior, is shaped in the process of socialization from the earliest age" (p. 3). The parents of the GE-PMF become aware of the importance of this socialization through the FIP.

The influence of the FIP is evident in changing perceptions about the age at which sexuality dialogue should be initiated. The GFMD believes that it should be from birth. Thus, there is a dislocation of the naive, very widespread idea of the asexuality of girls/boys. The group consider it is necessary to dialogue about sexuality from birth in a perspective of acting proactively in education and behaviour prevention. This change implies a break with a series of common errors that parents have in their personal positions as a result of a social attitude towards sexuality. Among the errors are the manifest disinterest of families in the subject of sexuality, that infants will learn on their own, the argument that they now have more opportunities than parents had in their childhood, that sexuality begins at puberty, that these subjects will be dealt with at school and that teachers will save them work and worry. Font (2002) further mentions that it is thought "that sex education encourages sexual practice, and that different sexes must be assigned different tasks" (p. 48). Mistakes arise from the mistakes made in one's own individual and family histories. The sad fact is that in most cases the anachronisms have been reinforced by the formal education system.

Another issue that had a very significant change was with respect to child masturbation. In the baseline data of the two groups and the output of the GC-MFP, the responses are directed towards repressive behaviour or supposed parental indifference. The GE-PMF responds in the retest with more adequate alternatives for a parental educational intervention that



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attends to the emotional side and better psychological development of girls and boys. This is an expression of assuming in a more sensitive way the intervention of adults. The reflections of the PSIF considered the child's curiosity factor and body self-recognition when the child is touching or rubbing his or her genitals with his or her hands. In addition, there should be a pause by the parent to assume a response that is not impulsive or even aggressive. In the closing of the event, have a conversation time to talk about the indispensable privacy of these touching behaviors.

It is very clear that the transformation of beliefs, knowledge and attitudes regarding child masturbation is possible. This transformation seeks a comprehensive and harmonious sexual education of children and the family in general. There is no difference in terms of gender and the responses of parents are very similar regardless of the sex of their children.

Another important transformation is related to the intra-family dialogue of the complex issues of human sexuality. The GE-PMF leads to this communicational exchange being clear, truthful and concise, which shows an innovation in its cognitive and attitudinal structure. This change agrees with Luisi (2013) who says: "an explanation is necessary more than a prohibition, otherwise, children grow up disoriented, with doubts that will be solved with the less indicated person and with information that is not completely correct" (p. 5). These people most of the time are not your father or mother, but another friend who only feeds the confusion.

To meet the objective of investigating the use of language applied by mothers/parents on child sexuality, they were asked to write the designation to human genital organs in their community and family environment. The answers for "the female genital organs" were: chepa, chepita, chucha, conchita, cosita, cuca, cucaracha, pajarita, paloma, palomita, cocks, pollita, pulp, sapito, sapo, tortilla, vagina. For "the male genitals" the answers were: buddy, thingy, snake, ass, sparrow, güevo, egg, egg, mandingo, bird, stick, stick, dove, pigeon, dove, penis, penis, penje, pepe, pepito, pincho, pee, pito, banana, chick, chicken, cock, vevo,

The names given are part of the inventive and illustrative terminology of the popular heritage. These ways of calling the genitals express in a generalized way the taboos and myths that subsist in society. Amaya, (2005) states that "in this way ignorance, the limitation of knowledge and the fact that human expression, as essential as sexuality, is developed with distortions and deviations, are maintained" (p. 1). Designations other than those that exist in the Spanish language will produce confusion in children. Because of their training, it is difficult for adults to pronounce the correct names for the genitals. In this, "surely the learning ability of their infant children is being underestimated" (Mateo-Morales y Represas, 2007, p. 251) and this has been evidenced in the classroom coexistence by nursery school teachers.

There is an idea that children are protected from sexuality by hiding or restricting information, but it is also distorted, as in the case of the naming of genitals, and that it is a characteristic of society. "Child sexuality has been seen as a growing problem Today children who show great sexual interest continue to be judged as deviant or abnormal" (Molina et al., n.d., p. 2). The transformation of beliefs about sexuality is feasible with specific and profound reflections such as those developed in the PSIF. This complex and enriching educational process makes it possible to address the problem of information/training on sexuality from a human perspective.



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One issue that tends to be accepted even at the level of educators is that talking about sex stimulates the sexual activity of children and young people. This idea is changed very significantly with the FIP. The experimental group of parents expressed their disagreement with this statement which has become a myth of sex education.

Among the topics consulted, the GC-MPF considerably increased their fear that their son or daughter is homosexual. This increase in fear could be explained by the ideological environment that was produced in the approval of equal marriage at the time of the research. The GE-PMF remained stable in response rates. It is inferred that the experimental group was able to face the conservative media avalanche through personal reasoning and explanations in the development of the educational program. This group surely evaluated the positions set forth in the Constitutional Court's resolution. In this way, it assumed what they considered to be the adherence to the rights approach that was one of the axes of the PSIF.

Two aspects that were developed have to do with the androcentric vision and can be translated into strategies for teaching about sex. It refers to sexual initiative and active sexual life as a cultural heritage or exclusive right of men. These issues refer to male dominance over sexuality that is naturalized in society and accepted by both men and women. Bourdieu (2000) specifies that "the strength of the male order is discovered in the fact that it dispenses with any justification: the androcentric vision imposes itself as neutral and does not feel the need to enunciate itself in discourses capable of legitimizing it" (p. 24). The principle of heteronormativity and the masculinized cultural pattern affecting society is ratified.

This arbitrary hegemony has been fractured, probably initially but very evidently by the PSIF as shown by the comparative statistics between the GE-PMF and the GC-PMF. It encourages the possibilities that with an educational process, these canons, which are very deepened, can be disrupted. It is possible that this group of women and men will walk a path towards gender equity, facing norms imposed by the patriarchal society.

In the statistical results of the research, no gender differences are evident. In the first place, it should be considered hypothetically that there are gender differences in the sex education of female and male infants. Mateo-Morales and Represas (2007) point out that "when we talk about sexuality, we also transmit feelings, ideas, values and prejudices generated from our own experience" (p. 17). It can be reasonably understood that gender differentiations slide very subjectively in the tone of voice, the type of words used, with the reactions of the face and body, with the silences and responses, among a wide range of linguistic and paralinguistic communicative possibilities. Secondly, it would be an interesting topic to investigate gender constructions at early ages.

The aspect that the PSIF could not influence and from there its null significance has to do with the relationship between religion and sexual education. The FIP programme in which the EG-MFP participated did not contribute to this topic because the process was approached from a secular perspective and with respect for the religious beliefs of those who attended. The refusal of the group of participants to allow religious institutions to address sex education is due to the secularization evident in the statistics. The rupture comes from the same society that does not see with good eyes the religious practices of its priests, pastors, elders or the same believing population.



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We will now proceed to analyse and discuss the statistical information obtained from the student surveys. These were conducted in individual interviews at the Virginia Larenas Center for Early Childhood Development. The experimental group of students (GE-E) are those sons and daughters who are assumed to be indirect participants in the research, since their mothers or fathers attended the PSIF workshops. The control group of students (GC-E) were those whose representatives did not participate in the program.

For all students in general, it is not difficult to locate body parts such as nose, leg, and belly. However, pointing out their genitals ("Penis/Vulva") is no longer as easy in the two GC-E entry and exit surveys. It is statistically evident that what was learned in the PSIF by their parents was developed in the EG-E. This is in the sense that the genitals should be given the appropriate names. In addition, that it can or should be done in a spontaneous, natural way as it is done with the other parts of the body.

The location and naming of the genitals is changed from a traditional prohibition to an indicator of healthy sexuality. It is possible, through educational processes of cultural deconstruction, to unlearn these kinds of socially imposed proscriptions towards the family and individuals.

When you find out about the shame of talking about the external sex organs of men and women, there are important changes. The significant impact on the experimental group of parents shifted to that of their children in overcoming this attitude to their bodies and fundamentally to their own genitals. It is necessary to specify that the GC-E keeps intact this fear or discomfort when they talk about the penis or the vulva in public. This is due to the cultural pattern in their family and community environment that results from talking about the sexual organs as something lewd and that must be hidden.

In the question of whether they like to touch their genitals, the majority and total answer is yes for both groups of students. In this issue, there is also no evidence of differences between girls and boys, and no gender contrasts can be established in the answers. The boys and girls complemented their answers by referring to the fact that they like to touch each other "but that they don't let me" by their parents and that will be seen in the following aspect.

The analysis of information corresponding to children's responses to what their parents do when they masturbate requires a qualitative rather than statistical look. A good part of the responses is directed to parental anger ("She gets angry", "She gets angry"), to cut the behavior untimely ("Let me stay still"), to verbal responses ("She talks to me"). These perhaps impulsive parental reactions are typical of the inability to deal with situations of child eroticism and are impregnated with adult-centred attitudes and beliefs. There are situations in which fear is instilled ("He's going to send me to the doctor", "He's already washing him"). Possibly there is also concern about health in answers such as: "Is it going to bite me?

In the GE-E the answer: "It doesn't burn my hands anymore...we already forgive each other" of a student, surprised by the manifest emotion. The situation was corroborated by the mother's crying. Before her participation in the PSIF, when she saw her son touching her genitals, she would take a spoon, heat it on a stove in the kitchen and burn the boy's hands. The mother understood after the program that masturbation, as an exploration and satisfaction of the child's curiosity about his own body, was in no way harmful to her son.



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So, the mother apologized to her son, the two of them hugged and cried over the experience before and after.

Most of the answers given by the children of the GE-E, show that their mothers and fathers have a more inclusive and humane attitude towards child masturbation: "He tells me to touch myself", "That only I can touch my penis", "He doesn't hit me anymore", "He says I should touch myself", "He doesn't talk to me anymore". The maternal and paternal attitude behind the child's responses also shows that there is a communication bridge. It provides an opportunity for children and young people to talk to their parents about sexuality with greater openness and confidence.

To the question "How did you hear them tell you to "make love"", approximately half of the students in the two groups of infants, in the test and retest, answer: "Nothing" "Doesn't know/No answer mom/dad". Disdain for sexual relations is already expressed at this age when they respond "Cochinadas" or "Púchilas". Expressing the sexual act in phrases of popular invention such as "Cositas" or "Cuchicuchi", implies anyway hiding and keeping these human relations invisible. The fact that 20% of the EG-E respond with expressions such as "Love each other" and "Make love", can be pointed out as statistical evidence that is somewhat significant in the impact of the PSIF and that there was a cognitive change in this regard.

As regards the birth of people, the EG-E in the test and the GC-E in the two surveys give evasive answers or answers of direct ignorance. The majority options are: "It's not said", "It's not said anything", "I was taken out of my belly" and "Doesn't know/No answer mom/dad". In the retest, the GE-E the totality of the answers: "Because of Mommy's vagina", "They cut out my mommy's belly" and "Because of the belly", give an account of a more precise language. It is assumed that this is a product of better communication by the parents who participated in the PSIF.

Regarding the process of fertilization, the EG-E in the test does not give any answer that can be considered adequate or correct. In the retest, the majority of this group of students refines the answers considerably: "The father puts the baby in, he puts the sperm in the belly", "When they make love, the father puts the seed in", "For the seed that my daddy puts in", "For the vagina they go in, the father puts the seed in". In the GC-E in general, the answers in the two surveys are inaccurate and inappropriate. A more accurate conceptual handling is evident in the EG-E after his parents.

#### 6. Conclusions

The general objective was to verify if through a formative process the ways in which parents seek formation and information on sexuality for their sons and daughters change. The final conclusion is that, through an appropriate educational programme, the knowledge, beliefs and attitudes of parents change. It provides tools and strategies to build an enriching sexuality in children. These elements are materialized in different aspects that constitute the specific objectives.

In relation to the specific objective: "Investigate the use of language applied by parents on child sexuality", it is concluded that the majority of the parents surveyed use terms and phrases that are different from those established in the Spanish language. The use of these expressions in everyday life is due to the insecurity that parents have regarding their



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knowledge of sexuality. This topic is still considered a taboo subject in society. In that sense, the vocabulary tends to be hidden in a popular, folkloric language, separated from science.

With regard to the specific objective "To know the mother and father strategies used by mothers and fathers for sex education of children", there are two groups of conclusions: 1) those applied by mothers and fathers for sex education of children in the experimental group before the FIP and the control group before and after the surveys, and 2) those applied by the experimental group after the FIP.

Within the strategies of the first group, it is concluded:

On various issues of sexuality, the student body responded in an incorrect or inappropriate way. This is the effect of the evasions or indirect responses that their parents give to their precise concerns.

Prohibiting the discussion of sexuality or related situations is a common way of hiding information. It encourages a distortion of childhood sexuality by the absolute majority of parents.

When avoidance and prohibitions are insufficient, physical or intellectual repression is the direct strategy of imposing silence or fear around the topics of sexuality by the parent in the home. Comparisons or similarities of human sexual organs with objects or animals in the environment are a pseudo-educational way of instilling sexuality.

Within the strategies of the second group, of those who participated in the FIP, there are several transformations. It is concluded that parents applied, during and after the process, dialogue as a timely and direct way of addressing children's concerns about sexuality. They implemented moments of conversation on their own initiative and not only in a reactive way to children's curiosity. There is reflection in terms of an enriching two-way communication, of mutual learning and health. This strategy is their new way of taking on information and sexual education with their offspring during the process of participation in the FIP.

A more precise conceptual management is evident in the students, sons and daughters of the parents who participated in the PSIF. The clarity and concreteness of the responses are two of the essential characteristics of the communicative interrelationship that the experimental group assumes as fundamental in the process of teaching and learning about sexuality in the family setting.

One of the research objectives is to "describe the knowledge, beliefs and attitudes about sexuality held by young children". Those who participated in the programme state that it is necessary for adults to intervene in the education and comprehensive development of children's sexuality. The training process determines that sexuality is considered a social construction and that these learnings can be motivating for children.

The self-perception of their own communicative abilities changes radically in the group of parents after their participation in the FIP. The control group maintains its original ideas. The experimental group looks for appropriate answers if they do not know them. It is predisposed to understand ideological positions that exist in this matter and to exchange information and knowledge even within its family or community environment.

The FIPP as a re-learning program allows for a change in attitude towards heterosexuality as a social norm. The experimental group demonstrates a tolerant and inclusive attitude



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that breaks with the imposed ideological-educational structure. In this line, they agree that masturbation or physical touching of the genitals by girls and boys is part of a healthy construction of child sexuality.

Three topics are placed in prospective for future research from this work. The first is to characterize the way in which gender is constructed at the initial ages of the human being. The second is to determine the influence of religion on aspects such as sexuality or others that have to do with the education of children and young people. The third is to define the construction of child sexuality with broader and more socially, economically and culturally different populations. These issues with multidisciplinary teams that address the phenomenon of early human sexuality from different perspectives.



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