



Adolescence and sex education: Socio-cultural and psycho-theoretical perspectives

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ABSTRACT

Sex education has become an important issue in human development and attracts a lot of debates day in and day out. This article situated itself on the socio-cultural perspective of adolescent sex education espousing permissive and restrictive social-cultural dimensions. The article again confined itself to psycho-theoretical perspectives by dwelling on Freud's psychosexual theory, Eriksson's psychosocial theory, Skinner's operant conditioning, as well as Bandura's social learning theory. All theories are comprehensively reviewed based on their views on adolescence and sex education. Psychosexual theory views sex education as a construct that can be nurtured in the early years of life, psychosocial theory views sex education as a construct that can occur through societal interactions, operant conditioning considers sex education as capable based on behavioral consequences, and social learning views sex education as something that can be modeled.

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INTRODUCTION

Sex education is becoming a common song being sung by many in the ever-developing and changing world of today (Walker & Sleath, 2017). By definition, sex education is an educational programme designed to cover all aspects of human development that is aimed at equipping the individual with the right information to safeguard the self and take decisions for the self (Leung et al., 2019; Nasheeda et al., 2019; Thomas & Aggleton, 2016).

According to Kearney (2008), sex education is the involvement of schools in an inclusive course of action aimed at instilling socially desirable attitudes, practices, and personal conduct in adolescents and adults, where these will best protect the individual as a human and the family as a social institution. As a result, sex education can be defined as a programme that teaches students about the elements of human sexuality, including family planning and reproduction. Body image, sexual orientation, sexual pleasure, values, decision-making, communication, dating, relationships, prevention of sexually transmitted infections, and birth control methods are all included in sex education (Kearney, 2008).

Since time immemorial, adolescence as a phase of human development is being embraced by many in societies and other secular environments or settings. Adolescence is just a step before adulthood and, as such, the attention it generates from varied perspectives is well

called for. There are many areas in adolescence that growth and development experts touch on, however, a more pressing and contemporary is the issue of adolescent sex education. Every parent would want the child to progress smoothly in adolescence, but this wish comes with a challenge in today's world due to sex education (Johnson & Johnston, 2020).

Many parents would take it a fancy to discuss with their adolescent children concerning sex education during adolescence because it is a developmental feature, yet there is always the fear of exposing adolescents to information that may be seen as inappropriate in face value, hence parents recoil (Exalto, 2019). The least or mere mention or discussion of issues related to sex education is sometimes tagged as taboo or contempt for social norms and values (Tupper, 2014). All these are evident and speak ill about sex education but on the blindside, sex education in some situations is socio-culturally as well as psycho-theoretically embedded to serve as bases in teaching the positive values in children who would one day in life draw on such information to themselves as they enrol into relationships (courtship, marriage, etc.) (Tupper, 2014).

Many scholars have had their bit about the pandemonium and these scholars are not limited to societal/cultural figures with their varied values as well as cultural norms and theorists in the field of psychology (Metusela et al., 2017). This article dwelled on the socio-cultural and psycho-theoretical perspectives on adolescent sex education.

A Socio-Cultural Perspective on Sex Education in Adolescence

Virtually, all human beings are the same about acquiring knowledge, but how the knowledge is acquired is what makes people somewhat different. They may differ in one way or the other as a result of cultural differences, geographical area one lives in and the environment one may find himself or herself in. Variations in acquiring information spread to areas of sex education. It is believed that some cultures allow sex education while others frown upon it (Felix, 2019).

According to Cabezas (2018), the vast majority of human beings have engaged in sexual relationships at some point in their lives. However, every society has its own interpretation of sexuality and sexual activity. Adolescent sexual knowledge is influenced by a variety of social and cultural factors posited by Abdelghaffar and Siham (2019) and that the sociocultural backdrop of society, which encompasses all social and cultural forces ranging from politics and religion to the mass media, not only shapes societal standards but also gives conservatism a prominent place within them and that in terms of sex education, norms dictate what is deemed acceptable behavior and what is considered normal or bearable (Al-Muneef et al., 2013).

According to Rios-González et al. (2018), children's sexual socialization begins at home, where parents have the chance to highlight their most strongly held beliefs and standards. Children are taught about decorum, nakedness, and secrecy from an early age, including gender-specific information about appropriate behavior in the family and society as a whole. Children's concept of their own sexuality is influenced by parental responses to newborn masturbation, displays of physical affection between parents, and training about proper physical contact with others. Learning about religious beliefs, which may include views of sexuality as a wonderful gift and sex as confined to marriage, is part of this sexual socialization process. As a result, such topics are sometimes left ignored in classrooms. Exploring and comprehending the effects of family and community on sexuality, on the other hand, is an important aspect of sex education (Abdul Hamid et al., 2020).

Although parents are considered to be the immediate primary contact of every adolescent, and they are viewed to play immense roles in issues about the adolescents' upbringing, they hardly touch on information that relates to adolescent sexuality and health (Santelli, 1999). Parental monitoring and the quality of parent-adolescent relationships in socialization are strongly influential on adolescents' sexual behaviors. Many teenagers find it difficult to discuss sex education with their parents, and most parents, particularly dads, are hesitant to do so (Bennett et al., 2018). This assertion was confirmed by a study conducted on adolescents' communication with their parents on sex-related topics and the results indicated that not only were they uncommon, but the discussions were commonly limited in scope (Rosenthal & Fieldman, 1999).

Sociocultural views on sex education sometimes come with its ideology and stand. Some cultures are permissive while others are restrictive on adolescent sex education. Cultures that allow the free flow of sex-related issues and education see nothing bad about sex education because most cultures view sex education as a component of the normal development process of an individual and encourage it among their adolescents. Mead (1928), in her research on Samoa Society with 600 adolescent girls concerning culture and adolescent period, reported that adolescence was not a stressful time, compared with the expectation of adolescent "stress" in Western societies. She ascribed the disparity to

cultural differences. She claimed that because they grew up in a small culture with a shared value system, Samoan adolescent girls did not have to deal with a lot of conflicting personal choices and demands, and that this conclusion was based on the observation that Samoan cultural patterns were very different from those in the USA. Adolescence in Samoa society, according to Mead, was a seamless transition, with little emotional or mental suffering, worry, or perplexity over sexuality issues as found in the USA. This referred to a society characterized by a lack of profound sentiments, conflict, phobias, and tough situations. Mead indicated that adolescents are psychologically healthier if they engage in sexual activities with even multiple partners before marital life. Mead, therefore, concluded that this was possible because Samoan girls belonged to a stable, single cultural society, surrounded by role models, where nothing concerning the basic human facts of copulation, birth, bodily functions, or death was hidden from the adolescent.

According to Muuss (1975), rapidity of social change, exposure to various secular and religious value systems, and modern technology make the world appear to the adolescent too complex, too subjective, too unpredictable and too ambiguous to provide him/her with a stable frame of reference. Mead (1928) in describing the personality and sexuality of Samoans posited that the psychology of the individual Samoans is simpler, more honest, and less driven by sexual phobias than the West. She describes Samoans as being much more comfortable with issues such as menstruation and more casual about nonmonogamous sexual relations where all fall under sex education.

On the part of somehow restrictive cultures, discussing issues related to sex is generally accepted because sex education is something that can go a long way to help adolescents' development, but at the same time, such cultures conceive some fears that adolescents in one way or the other may be exposed to information that is not appropriate to their level of growth (Reiss, 1960). In countering such perceived danger, restrictive cultures put modalities in place for treating sensitive subjects like sex education. In some other cultures too, the restriction is based on gender, as it is in the case of the American cultures (Reiss, 1960). According to Reiss, the American culture is predominantly restrictive in its attitudes about sex education when it comes to women and sexuality. It is widely alleged that men are more sexual than women, and the belief that men have or have the right to more sexual desires than women creates a double standard. Reiss defined the double standard as, for example, prohibiting premarital sexual intercourse for women, but allowing it for men. This standard has advanced into allowing women to engage in premarital sex only within loyal love relationships but allowing men to engage in sexual relationships with as many companions as they wish without any restrictive situation (Herold & Milhausen, 2002).

THEORETICAL VIEWS ON SEX EDUCATION IN ADOLESCENCE

Sigmund Freud's Psychosexual Theory of Human Sexuality Development

According to Freud (1925), the human personality is made up of three complimentary elements, Id, ego, and superego are the three. These aspects get integrated as a child progresses through the five phases of psychosexual development namely oral, anal, phallic, latency, and genital.

In each of the five phases of development, the Id-directs children's urges/instincts for pleasure are manifested in distinct places of the body known as the erogenous zone, according to Freud (1925). All stages of development, according to Freud, play a role in the development of behavior and personality. However, for the sake of this study, a premium is given to the last two stages namely: latency and genital, where adolescence begins and more sexuality issues are core, although these stages take precedence over earlier ones.

Latency (6-12 years of age)

According to Freud (1925), sexual energies decrease during this stage and children's superegos or consciences begin to grow more. Adolescents begin to act in morally acceptable ways and embrace the ideals of their parents and other influential adults in the community. It is equally the period where children redirect their sexual desires to socially approved activities like sports and casual friendships. But in this, children may understand basically what entails in human sexuality, but society has primed them to ignore the urges/manifestations and concentrate on what is desired for healthy living, which in turn go in consonance with established family and societal norms. This form of education is nothing less than sex education, as children are made not to engage in any immoral sexual acts, but they channel their desires and energies to societal recommended activities.

Genital (12+ years of age)

During this stage, sexual impulses resurface based on successful completion of earlier stages where adolescents are expected to engage in inappropriate sexual behaviors that may lead to gender role development, self-identity, marriage, sexual healthy life, and reproduction. Freud (1925) (as cited in Steinberg et al., 2010) indicated that human beings have strong sexual feelings from a very early age, so sex education is vital as the child progresses on the growth ladder. According to Freud, a successful passage through the stages will lead to understanding one's sexuality and vice versa. It is noted that an inability to progress through latency and genital stages is likely to lead to sexual problems such as psychosexual disorders during adolescence through adulthood. These psychosexual disorders may be categorized into sexual dysfunction, paraphilia, and gender identity disorders.

Sexual dysfunction

According to Nolen-Hoeksema (2014), sexual dysfunction is a sexual problem described as reduced desire, stimulation or orgasm and lack of pleasure or gratification derived from sex. This is possible in a situation where the negative aspect of sex education is exaggerated or overemphasized and as a result, the adolescent develops a different and prolonged negative perception about sex even if he or she has become an adult and is expected to engage in genuine sexual affairs.

Paraphilia (a disorder of sexual preference)

According to Joyal (2014), paraphilia is an unnatural or irregular sexual behavior that does not conform to the established normal standards of sexual behavior by society. This category of sexual disorder shows an abnormal preference for sexual objects that include inanimate objects, wearing clothes of the opposite sex, paedophilia (sex with children), zoophilia (sex with animals), and necrophilia (sex with dead beings). This disorder is likely to occur among adolescents when they are not properly socialized about sexuality, how it occurs and to whom it is directed at and at what time. In a situation where fear is put into children about sex-related issues and eventually they grow with this

fear, such individuals may likely end up going in for those they have power over because rightful sex avenue is being tagged negatively by society.

Gender identity disorders

It is a psychosexual disorder that makes people unable to distinguish between one's sense of sexual identity and the biological one. Those affected display uncertainty about their own sexual orientation, difficulty to fine-tune to the normal sexual lifestyle, and a desire to modify their sexual orientation to become part of the opposite sex (Zhou et al., 1995). According to Davidson (2012), social isolation, anxiety, depression, and loneliness are symptoms of gender identity disorders. Although these psychosexual disorders are not life-threatening, they affect adolescents' social and sexual relationships with partners and could cause a reduction in self-esteem. Disorders may result in expressing other unlawful behaviors, so it is therefore prudent for parents and other significant figures to ensure that children are nurtured in a positive way that will aid their progression into adolescence and adulthood smoothly.

In a nutshell, the psychosexual theory of development values the need for sex education in an adolescent's life. It emphasized that successful progression would lead to a sexually healthy personality while the difficulty in progression will lead to psychosexual disorders that many people try to protect against as agents of change in society.

Erik Erikson's Psychosocial Theory of Adolescence Development

Erikson (1950) is credited as the main proponent of the psychosocial developmental theory that has its genesis in psychodynamics. As a neo-Freudian, Erikson accepted the fact that there is a part of the mind that is unconscious and is perceived to be responsible for later adolescent life but disregarded its dominance and the notion that any maladaptive behavior that occurs due to repressed experiences in the unconscious mind cannot be reversed or corrected as championed by Freud (1925) in his psychoanalytic theory. Rather, Erikson (1950) opined that human behavior and personality is controlled by the conscious part of the mind so whatever antisocial behavior an individual depicts can be modified through socialization throughout the individual's lifespan.

Erikson (1959) outlined eight stage developmental processes and also accepted the id, ego, and superego proposed by Freud (1925) but he emphasized that the ego makes positive contributions to adolescent development by grasping the right attitudes, ideas and skills at each stage of the psychosocial development. This mastery, for him, helps adolescents grow successfully and become key players in society. During each of the eight stages of Erikson, there is a perceived psychosocial conflict that exists and must be successfully addressed to develop the individual into a healthy, well-adjusted adolescent and adult in the future. Erikson (1959) discussed psychosocial stages and not psychosexual stages as championed by Freud. According to McLeod (2013), Freud was entirely an id psychologist, whereas Erikson (1950) was an ego psychologist. Erikson (1950) emphasized the role of culture and society, as well as internal ego conflicts, whereas Freud emphasized the war between the id and the superego. Erikson (1963) coined the term "crisis" to characterize a sequence of internal conflicts tied to developmental phases, and the way a person resolves the crisis.

According to Erikson (1950), will determine their identity and future development. These crises are psychosocial, according to Erikson

(1963) since they include the individual's psychological demands (psycho) colliding with the needs of society (social). According to Erikson (1963) (as referenced by McLeod, 2013), the ego grows as it successfully resolves social crises. This includes fostering a sense of trust in others, establishing a sense of social identity, and assisting the next generation in preparing for the future. Trust vs. mistrust, autonomy vs. shame/doubt, initiative vs. guilt, industry vs. inferiority, identity vs. role confusion, intimacy vs. isolation, generativity vs. stagnation, and integrity vs. despair are the psychological phases of development postulated by Erikson (1959). Like Freud (1925), all stages in the psychosocial theory propounded by Erikson (1959) have their respective roles inputting the individual into shape towards adulthood. However, emphasis is placed on the fourth to sixth stages as these stages represent the period where issues of adolescence are paramount in Erikson's theory. The stages with regards to adolescent development about sex education are explained below.

Industry vs. inferiority (6-12 years)

This stage falls within the early stages of the child where the individual adolescent usually compares the self with others based on the new changes that emerge. According to McLeod (2013), it is a period where primary sexual characteristics of adolescents are seen to be emerging and adolescents begin to like and fancy their new physical looks and learn to appreciate the changes. It can be elaborated that, at this stage, some adolescents may feel handicapped because they can see differences with their sexual development compared to their stage mates, where under normal circumstances they should not feel so. Therefore, it is paramount that sex education is given to them to understand that there are differences in adolescent development, so whatever occurs to their development is what is suitable for the individual adolescent and should be appreciated. According to Erikson (1959), in comparing the self with others, the adolescent may feel a sense of pride and accomplishment because he/she can measure up with those compared. In a similar vein, an inferiority complex can develop during puberty and adulthood if an adolescent is unable to get along with others or has negative experiences at home or with classmates.

According to McLeod (2013), it is a period for adolescents to establish self-esteem, so adolescents must demonstrate specific competencies that society values in keeping themselves neat after menstruation or nocturnal emissions. Adolescents begin to feel productive and secure in their abilities to achieve goals that are acceptable to society when they are praised and reinforced for their endeavors. If parents or teachers do not support and guide this initiative, teenagers may feel inferior, doubt their talents, and hence fail to realize their full potential in terms of sexuality development. Curbing this problem requires the establishment of a balance between opposing views through sex education so that the adolescent can grow to become what is expected of him.

Identity vs. role confusion (12 to 18 years)

This stage correlates partly with the genital stage proposed by Freud (1925) and is purely the adolescent period, more specifically, to the puberty years where many adolescents experience pubescence (McLeod, 2013). The most important hallmark at this stage is which a youngster transitions into an adult. It is noted that adolescents at this stage begin to change order, as in becoming independent from dependency and equally looking out for the future in terms of partnership/relationship with co-equal members, and careers and

strive to be the best part of the bigger family or society (Erikson, 1968). This occurs as a result of changes that take place in the individual's development, including sexuality. This period is considered an important aspect in adolescent stage, as the individual is naturally tasked with identifying his or her role and position in society as an adult in later life. According to McLeod (2013), it is believed that the adolescent examines his identity by finding out who he or she is in society in terms of sex. According to Erikson (1968), there are two identities at this stage, namely sexual and occupational, where the main task of adolescents is developing a sense of self and struggling with questions such as 'who am I?' and 'what do I want to do with my life?'

According to Bee (1992), what ought to transpire at the end of this stage is a reintegrated sense of self, what one wants to do or be, and of one's proper gender role. Adolescents are reported to explore many selves to see the one that will be best for them because of the inevitable developmental changes they encounter. Adolescents who succeed at this age have a strong sense of self and can stick to their views and ideals in the face of challenges and differing viewpoints. Adolescents with a weak sense of self and role confusion may arise when they are unconcerned, refuse to make a deliberate search for identity, or are driven to adhere to the views of others, particularly parental aspirations for the future.

It can be understood that adolescents at this stage should be able to differentiate between boys or girls and what that particular differentiation stands for concerning the society in which they may be found. For example, "if I am a boy, what is expected of me with regards to sex education in relation to societal expectation to develop and become a full functioning personality shortly?" "I am a man and, a potential father, what do I do to my sexual development to be understood by members of the society and be accepted? What do I do to control the night dreams that I encounter most often?" These are rhetorical questions that adolescents may ask themselves and as such, societies and families have to consider sex education as a tool to helping adolescents to understand these developmental changes in their lives because hardly such adolescents would confront any adult for information of this sort, although it would be in the right direction if they could, perceived stigmatization from family and society will deter them.

According to Erikson (1968), in a prolonged way, this can be disastrous to their smooth development during the period of adolescence, which is usually referred to as role confusion of adolescent sexuality. In role confusion, according to Erikson's notion, the adolescent becomes visionless because he or she does not understand the stage he or she has reached in life, let alone understanding the value attached to that developmental mark, and eventually the individual may not be able to mature emotionally in the adulthood. Adolescents may know their gender yet lack the capacities to fulfil the demands of the stage because society in a partial way lagged in making sure the boy or girl is well socialized with regards to human sexuality in relation to their gender differences. In the view of Erikson, establishing a balance between identity formation and role confusion is termed the virtue of fidelity.

Dependent on this stage is the ego quality of fidelity; the ability to endure commitments freely pledged despite the unavoidable inconsistencies and confusions of value systems (Gross, 1987). In infidelity, adolescents learn to embrace others and opposing views to the self even if such views go against their understanding because as

humans they are not the same and they present different views on issues on an individual basis. Gross further reports that during this fidelity period, adolescents explore opportunities and begin to form their own identities based on the outcome of their explorations. It is understood that carving a balance between identity and role confusion is not an issue of coercion on the part of the adolescent but understanding of the stage. Since any push or force to establish identity could lead to rebellion in a form of poor or negative identity development and the feeling of unhappiness in the life of the adolescent, and this can be debilitating to later developmental prospects. For Erikson (1968), if parents and friends are supportive to the developing adolescents and allow some volume of experimentation with sex roles, adolescents will likely end up with a cohesive, full identity that expresses who they are and vice-versa and this is possible through sex education.

Intimacy vs. isolation (18 to 40 years)

This stage of Erikson's (1963) psychosocial development corresponds directly to Freud's (1925) psychosexual genital stage. This period is characterized by finding solace in terms of love and relationship among peers. At this stage, adolescents explore open affairs that lead to longer-term engagement with someone rather than an immediate family member. This period equally marks the beginning of early adulthood and late adolescence as the adolescent strives to blend the established identity with mutual friendship with others (Erikson). This period of crisis signifies the conflict to resolve the reciprocal nature of intimacy, thus achieving a mutual balance between giving love and support and receiving love and support. Usually, adolescents are preoccupied with the sense of being rejected by the immediate family or the planned group to which the adolescent would want to belong (Erikson, 1963).

According to Wilder (2003), some adolescents are allergic to pain and rejection, so painful that some personalities of adolescents cannot withstand it. Adolescents becoming successful at this intimacy stage are likely to enjoy smooth, healthy and everlasting marital life in the future because sex education has impacted their lives through societal figures such as accommodative friends, parents, family and the culture in totality. On the other way around, if adolescents find it difficult to mingle with others as in intimacy, they become isolated and somewhat repelling to friends. Such adolescents would do everything reasonable to them to destroy anything that blocks or encroaches on their views in becoming isolated. It is believed that a sense of isolation can cause feelings of darkness and worry in the later life of the adolescent because proper socialization with respect to the relationship was not accustomed during the development period.

B. F. Skinner on Operant Conditioning on Human Sexuality Development

Operant conditioning is about repeating or not repeating a behavior based on the patterns of outcomes of that behavior (McLeod, 2015). An adolescent performs a behavior (operant), and this behavior may be followed by a reward that can be positive (positive reinforcement) or negative (punishment). The reward determines whether the adolescent will repeat the behavior or not, and if it becomes clear that the behavior is positive to the adolescent, the likelihood is that the behavior will frequently be repeated and vice versa. Some rewards are considered to be primary reinforcers; that is, there is something intrinsically rewarding about them (Ferster & Skinner, 1957).

According to McGuire et al. (1965) (as cited in Bartels & Beech, 2016), sex and relationships are instances where operant conditioning can be applied. Humans can be trained to learn a network of finding a willing sex partner at the end of the network, by exploring other opportunities about sex education. Sexual behaviors in humans play dual roles; in learning theory where it can itself be positive reinforcement, and at the same time be a behavior that is punishable (McGuire et al., 1965). It is understood that the principles of operant conditioning can help explain some aspects of sex education. For example, if an adolescent girl repeatedly experiences pain when she has intercourse (perhaps because she has a vaginal infection either due to lack of sex education or natural occurrence), she will hardly want to engage in sexual activity in the future.

According to Bartels and Beech (2016), in operant conditioning terms, sexual intercourse has repeatedly been associated with punishment (pain), and therefore behavior becomes less common in the life of the adolescent girl. Another useful principle in understanding sexual behavior is that consequences, whether reinforcement or punishment, are most effective in altering behavior when they occur immediately after the behavior. They become less effective the longer they are delayed after the behavior has occurred (McGuire et al.).

In a similar vein, a situation where an adolescent is punished, in a form of physical pain inflicted by parents for engaging in premarital sex, this punishment may not eliminate such behavior but rather teach the adolescent to be sneaky or dishonest and engage in premarital sex without being caught. Operant conditioning brought to the understanding, therefore, that sex education is what is needed, by educating the adolescents on positive and negative domains of their behaviors and not necessarily punishment in getting the adolescent desisting premarital sex until he or she becomes mature and engages in sexual matters after marriage. Operant conditioning as a learning theory believes that human sexual behavior can be learned and unlearned at any time in one's life span occurring in childhood, adolescence, young adulthood, or later (Pierce & Cheney, 2004). Therefore, trying to understand what causes certain sexual behaviors and how to treat people with sexual problems can help to understand them more practically.

Albert Bandura's Social Learning Theory on Human Sexuality Development

Bandura's social learning theory (Bandura & Walters, 1963) is a more advanced version of learning theory that uses operant conditioning as its foundation. This theory acknowledges two processes known as imitation and identification, which are useful in explaining how gender identity and sexual orientation develop as a result of sex education.

Adolescents learn about sex and gender in part through imitation or imitating, according to social learning theory. These teenagers could be copying their parents or other exciting scenarios they've witnessed. Various types of sex education difficulties can be learned through imitation, according to experts. In high school, for example, the most attractive or sexiest girl in the senior class may see that other females are modeling her behavior and clothing. A boy may also watch a film in which the main character's actions appear to attract him, and then try to imitate those actions in his own activities. This emphasizes the importance of mass media as a source of sexuality models that young people emulate and with which they identify.

Once a behavior is learned, its likelihood of being repeated is determined by its consequences, which can be good or negative (Bandura, 1977). According to this notion, if a behavior is not reinforced, the performer is less likely to perform or repeat it. Over time, successful activity experiences build a sense of competence, or self-efficacy, in completing the activity (Bandura, 1982). The notion of self-efficacy has been widely employed in the development of intervention programs aimed at reducing teenage sex-related problems, such as the usage of condoms to prevent the transmission of sexually transmitted illnesses and HIV infection, as well as unintended births (Delamater et al., 2000). These programs provide teenagers the chance to put what they've learned about sex education into practice while also helping them succeed in life. According to the notion, having a sexual self-concept during adolescence is a critical developmental milestone. This is when teenagers strive to make sense of and arrange their sexual experiences in order to comprehend the patterns and motivations behind their sexual behaviors (Andersen & Cyranowski, 1994). According to Andersen and Cyranowski (1994), who cite the social learning theory (Bandura 1969), sexual self-concept not only aids teenagers in organizing their prior experiences, but also provides them with information to draw on for current and future sexual ideas and experiences. Sexual self-concept influences men's and women's sexual behavior, as well as the future development of relationships.

Implications for Counselling and Sex Education

1. Since sexual development begins early in the life of a person parents, caregivers and counsellors should guide children to learn about their sexual growth and choose an appropriate word to describe their body parts.
2. In some cultures, it is taboo to display nakedness or mention sex organs in public, hence the youth must be guided against such behaviors in public settings.
3. It is the duty of teachers and the family to teach sex education at home and the school settings according to maturity levels of the individual, hence the sexual behaviors of children must be closely monitored so that observed misbehaviors are corrected early in life to prevent deep-seated problems in the future.
4. Society must accept that sex education is an essential aspect of the socialisation process aimed at making better sexual decisions throughout life of individuals (Schneewind, 2001).
5. The quality of sexual life and behaviors of the individuals and the society can be enhanced through appropriate rewards and punishment systems and mechanisms put in place by the agents of socialization such as counselors, teachers, and religious personalities.
6. Parents and other caregivers must restrict adolescents on the contents they come across on all forms of media, so as not to corrupt their moral standing.

CONCLUSION

It is evident from the above that sociocultural and theoretical viewpoints are limitless when it comes to human development. Theories, in general, are transgressing to many fields, and the education of adolescent sex is not left out. Although theories are limited to behaviorism, psychodynamic, and social learning in this context, other

solid theories are equally applicable to the development of adolescents in terms of sexual education.

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