The Parental Role in Child Sexuality: A Phenomenological Study

Manuel Cordeiro¹, Elsa Margarida Magalhães Simões de Almeida², Tânia Teixeira

¹ Polytechnic Institute of Viseu
² Tondela Viseu Hospital Center

Funding: Higher School of Health of Viseu, Portugal
Potential competing interests: No potential competing interests to declare.

Abstract

Child sexuality is an important but often overlooked topic. This phenomenological study explored Portuguese parents’ perceptions and approaches related to addressing sexuality with their young children. Semi-structured interviews were conducted with nine parents of children aged 6-10 years. Content analysis of the interview transcripts revealed that parents generally felt at ease discussing sexuality with their children in an open, honest dialogue, using books and analogies to explain concepts. However, some parents expressed discomfort or ambivalence. Children’s questions centered around biological, psychosocial, and affective aspects of sexuality. Parents’ perceptions of gender identity aligned with traditional gender norms. Overall, parents prioritized themselves over schools and churches for providing sex education to their children. While findings highlight parental openness in addressing child sexuality, they also reveal a strong reliance on conventional gender norms. Further research is recommended to expand knowledge in this important but overlooked area, to inform anticipatory health education and promotion efforts.

Manuel Pereira Cordeiro
Polytechnic Institute of Viseu - Higher School of Health of Viseu, Portugal

Elsa Margarida Magalhães Simões de Almeida
Tondela Viseu Hospital Center, Portugal

Tânia Isabel Martins Fontainhas Teixeira
Group of Health Centers Dão Lafões, Portugal

1. Introduction

Within the scope of the 1st Post-Graduate Specialization Course in Nursing in Child Health and Pediatrics, at the Escola Superior de Saúde de Viseu, there is an urgent need to prepare a Research Work on a topic of choice and for which we
chose “O Papel Parenting in Child Sexuality”. As we consider an interesting topic within our area of study and an attractive challenge, we set out to carry out exhaustive research to enrich ourselves personally and professionally, as well as to leave a small contribution, albeit on an academic basis, to future research.

The scarce production of knowledge in this area aroused in us a great interest in research on this topic.

Within human sexuality, issues of child sexuality are little investigated. (FAVERO, 2003)

Child sexuality is filled with different experiences, according to the child’s development, that leave marks in subsequent periods. The knowledge of these events is indispensable for the structuring and education of the child by parents or educators. (NEDEFF, 2001)

For this reason, we do not characterize childhood sexuality as a whole, opting instead for a cut from 6 to 10 years of the child’s life, when the first cycle of Basic Education begins.

The child is the world’s reason for being and, more than that, represents the future of this world.

Thinking about the future, whatever the dimension considered, both in scientific and moral terms, forces us to think about the child and, above all, to reflect on whether what we invest in children today is enough to guarantee the best of their future, which is, by addition, that of your world. (GOMES PEDRO, 2005)

Childhood sexuality is a topic rarely addressed in Portugal. According to FÁVERO (2003), this represents one of the least explored subjects within the context of human sexuality. The scarcity of scientific studies and essays addressing this reality is a constant both in Portuguese and foreign studies. This was undoubtedly the main reason for our interest in the topic of childhood sexual experiences.

In order to carry out this work, we outlined the following objectives:

**General objective:**
- Study the perception that parents have of Child Sexuality and the strategies they have to address this issue with their children.

**Specific objectives:**
- Deepen knowledge about child sexuality;
- Identify the value that sexuality has in society, namely in the affective life of the child;
- Identify strategies used by parents when addressing the issue of sexuality with their children;
- Describe the thoughts and feelings experienced by parents when their children question them about their sexuality.

In order to achieve these objectives, we relied on a bibliography alluding to the theme and on previous scientific studies.

The present study fits into the category of exploratory-descriptive, phenomenological, and cross-sectional studies, given that it analyzes and explores a reality that has as its goal the confirmation or discovery of facts and it is cross-sectional
research, insofar as it takes place in a certain and limited period of time.

The study method to be used is qualitative research, in which the data collected through a semi-structured interview applied to nine parents of children aged between six and ten years belonging to the Rio de Janeiro Scout Group are analyzed. Wolf – Viseu.

This exploratory-descriptive analysis of the Parental Role and Child Sexuality provided some questions for investigation:

- What feelings do parents experience when their children question them about their sexuality?
- What knowledge do parents have about sexual manifestations in childhood?
- What strategies do parents use to address the issue of sexuality with their children?

This work will be structured in two fundamental parts: a first part in which we make a theoretical framework of the chosen theme, and a second part in which we describe the methodology used (formulation of the research theme, characterization of the study, objectives of the study, characterization of the population and sample and data collection instrument).

Later, we present the data using content analysis and its discussion, ending with the conclusion and some proposals considered relevant.

2. What Is Sexuality?

The term sexuality is difficult to define. When someone is asked what they mean by sexuality, we often find answers like:

- “It is what distinguishes men from women”
- “It’s the genitals”
- “It has to do with sex”
- “We all know what it is, but we don’t know how to explain it”

Sexuality cannot be seen in just one perspective; it cannot be seen as an isolated phenomenon or defined in a few words. We can regard it, first of all, as a science interdisciplinary approach (LOPÉZ et FUERTES, 1999), as it encompasses different human components and dimensions.

“Sexuality is a living force in the individual, a means of expression of affection, a way for each person to discover himself and others” (MOITA, SANTOS, s/d).

According to the World Health Organization (WHO), sexuality is “an energy that motivates us to seek love, contact, tenderness, intimacy; that is integrated into the way we feel, move, touch and are touched; it is to be sensual and at the same time sexual; sexuality influences thoughts, feelings, action and interaction, and therefore also influences our physical and mental health”.

Therefore, and although it is difficult to say what sexuality is given the complexity of the aspects that involve it, we can...
point out its fundamental role:

- In identity: it is sexuality that makes us feel bio-psycho-socially men and women;
- In reproduction: it is through sexual relations (except in special cases) that a man and a woman can have a child;
- In the love relationship: sexuality is a form of physical expression of our love and reinforces the love relationship;
- In desire and pleasure: sexuality is responsible for extremely intense desires and great pleasure, usually accompanied by sexual thoughts and activities. (MIGUEL and GOMES, 1989)

In the course of these statements, we can conclude that sexuality can be experienced responsibly within an affective relationship. It can serve to strengthen a stable relationship and lead to the formation of a family. At the same time, it also contributes to well-being and psycho-affective maturation.

According to LÓPEZ et FUERTES (1999), sexuality is not experienced in the same way by all people, being influenced by the cultural norms of the group to which one belongs, although there is not always a very clear awareness of this phenomenon.

From a phylogenetic perspective, there are certain peculiarities in the human species, such as the supremacy of the cerebral cortex over the hormonal cortex, that allow humans to become aware of sexuality and attribute countless senses and meanings to it. (LÓPEZ et FUERTES, 1997).

In other words, we are biophysiologically sexed through a genetic program, the internal and external sexual organs, the hypothalamic-pituitary axis, and the body figure. We are socially sexed in identity, desire, meanings, conduct, ideas, morals, customs, actions, and laws for health. (LOPEZ, 1987)

Despite the fact that sex is biologically determined, all the differences in behavior and attitudes between men and women are the responsibility of the cultural models of the society in which we live, and which vary from place to place and from time to time.

Sexuality has an undoubted biological dimension. Our entire body, every cell, every organ and every function is sexual.

Our sexual desires and behavior, among other factors, depend on sexual hormones, just as our age and physical condition do (LÓPEZ, 1987).

As stated by LÓPEZ et FUERTES (1999), we are not only sexed biophysically but also psychosocially.

From birth, we are assigned names, clothing, games, and sexual activities, depending on whether a boy or a girl is born. We are even supposed to act in a certain way and have certain thoughts and feelings.

Thus, before the boy or girl becomes aware of their sexual identity, their whole world has already been predetermined.

The social construction of sexuality plays a central role in the elaboration of human sexuality (...) and as a social construction, sexuality implies the coordination of a mental activity and a bodily activity, both learned through culture” (BOZON, 2002)
History has shown us how gender roles have changed. In the past, it was argued that women should be submissive, with motherhood being the primary objective of their lives. Men, on the other hand, were expected to be active and courageous, working to earn a living for their families.

These perspectives, accepted in the past, guaranteed the survival of the species and the population of the planet. However, current life changes have led to several behavioral changes. (LÓPEZ et FUERTES, 1999)

It is in the area of sexual and reproductive health that gender issues acquire their maximum expression. In different societies, female and male attitudes and conduct are expressed differently with regard to the dyadic relationship, sexual activity, and the facts that may result from it.

In Western culture, even taking into account its transformations over the years, what PRAZERES (2003) called the “double standard mediator of male and female behavior” in this matter still exists.

It appears that there are progressive changes in the various aspects related to values, attitudes, and behaviors in the younger generations; there are still many groups of young people who manifest the persistent essence of the differences between the male and female universes in the experience of sexuality. (PRAZERES, 2003)

On the other hand, there is an ever-increasing openness to issues related to sexuality, which is not unrelated to the influence of the media.

The media have an ethical responsibility for the content they show. They cannot alienate themselves from the importance of their participation in social construction, in the formation of mentalities, and in the psychosocial development of children and adolescents. Associating what the media convey in the sole sense of the struggle for audiences, based on the ideology of a globalizing culture, is to disrespect the particularity of the maturation time of each individual’s constitution. (CECCARELLI, 2003)

According to RIBEIRO (2005), the media, and specifically television, exert a significant influence on the daily lives of all of us, especially on children, as they are in a phase of formation of values, concepts, models of conduct and sexual behavior and that remain close to two hours a day in front of the television.

Children’s early exposure to scenes of sex and violence, in a degrading, pornographic way and without any type of series, can interfere with their emotional development. The child stores all kinds of information that he receives.

Television can contribute positively or negatively to children’s education, but the parental role can contribute much more!

Children’s experiences with their parents, the whole process of identification, and the construction of affections exert deeper influences than what is transmitted by the media (RIBEIRO, 2005).

3. The Role of The Family and Sexuality at Different Ages

Children, adolescents, adults, and the elderly are all sexual beings, with sexual interests and behaviors that express their
sexuality, although these vary as age advances, with each period of life having its own characteristics.

Childhood sexuality has many features in common with adult sexuality. However, there are also many differences between the two (LOPEZ et FUERTES, 1999)

Human sexuality, as we mentioned earlier, has a history. Its constituent elements begin long before birth and are closely related to the place that the latter occupies in the parents' imagination and in their relationship.

After birth, the so-called constitution of the subject begins: a process marked by intense instinctual movements, movements that are decisive for the expression of adult sexuality. The way each one lives their own sexuality – in a more or less repressed way, with pleasure, with guilt, in short, the singularities of each one’s sexual manifestations – is built from the first days of life. (CECCARELLI, 2003)

It is, therefore, from birth that one should start thinking about sex education. In this perspective, we must pay attention, at each stage, to the sexed body and the processes necessary for its knowledge and development.

When addressing issues such as sexuality (which in our society is very much covered by a lack of knowledge, blaming, and repression), some contents of which we are not aware are broken. Hence, the family’s need and interest in confronting experiences. This anticipation is necessary to determine a common denominator in the strategies to be used in approaching these themes, which should be provided with attitudes of affection and dialogue, as well as minimal knowledge about psychosexual development. (MOITA et SANTOS, undated)

Sexuality in early childhood (up to six years old)

From a physiological point of view, the sexual organs, both female and male, are formed and respond to tactile stimulation from the first year of life. The labial mucosa, as demonstrated by non-nutritive sucking, and the entire skin, are sensitive to touch and heat.

According to some authors, the newborn is capable of feeling pleasure from birth, namely through skin-to-skin contact.

As previously mentioned, the act of birth immediately assigns an identity linked to sex: boy or girl – gender identity.

This gender attribution will condition the attitudes of adults towards the child, in the choice of his name, clothing, decoration of the room, etc. (LÓPEZ et FUERTES, 1999)

From a very early age, the child must be helped to find his sexual identity, that is, allow him to see himself as a girl or a boy, as a person who belongs to the sex he has. To this end, they are assigned tasks that allow them to act in the society in which they live, in accordance with the behavior restricted to children of their gender (boy/girl) (MOITA et SANTOS, s/d).

During the first two years of life, the emotional bond with the parents (or those who replace them), today technically called attachment, is of central importance in the child’s sexual and affective life. Attachment implies feelings of security and
well-being, as well as search behaviors for proximity, contact, and affection. Attachment is a privileged interaction between the child and their caregivers, due to the intimate contact that is established between them.

These interactions are very demanding for adults, as they take up a large part of their time, as children are practically helpless at this age.

The bond established during this phase will determine sexual manifestations and behaviors throughout the life cycle. (LOPÉZ et FUERTES, 1999)

In the relational experience with attachment figures, children acquire basic trust and security that will provide them with new contact with the physical and social environment. Children will later generalize from these learnings to other social relationships that involve affection and forms of intimate communication, such as:

- The relationship;
- The friendship;
- Sexual relations, etc.

Attachment is the necessary emotional basis for adequate social relationships to exist; it is what makes relationships of greater proximity and trust exist in the future, as well as that these are more lasting.

Children who, in turn, had an attachment history that made them anxious and insecure, experience sudden emotional changes, fear of intimacy and obsession with the possible loss of the other, or even possessive jealousy in their relationships.

Before the age and a half, two years, the interaction between the child and the adult is basically a dyad: child – mother, child – father. From this age, approximately, great changes are produced in the way the child experiences the environment (LOPÉZ et FUERTES, 1999).

At this age, the child acquires greater motor, mental, and linguistic skills that allow him/her an increasing autonomy and a greater understanding of reality. In turn, the attachment figures themselves force the child to acquire greater independence, devoting less time to it.

For all these reasons, the child begins to enter into an inevitable conflict, as he sees that the lack of control, permissiveness, and the egocentricity of his conduct will lead him to respond to the authority and rules now imposed by the parents: The child stops feeling if the center of the universe.

Egocentric and individual thinking begins to translate into a symbolic game of imitation. The child plays with the doll and recreates his own life, completing reality through fiction, fantasy, and dreams. (CORTESÃO et al, 1989)

Around the age of two and a half, there is a period of opposition. The child becomes difficult, stamps his feet on the floor, screams, becomes aggressive. All of this is related to your need for affirmation. It is a period that the child overcomes with relative ease.
The mother, or her substitute, continues to be the reference center, still linked to the need for food, but also to learning how to clean and sphincter control. The elimination of feces gives the child as much pleasure as using a pacifier. If sphincter control exists, the hygiene care provided by the mother is pleasant, and the child feels gratified. If control takes time to appear and is accompanied by repression, more or less violent, anxiety behaviors and disturbances will be unleashed that could mark the child forever. Thus, the child may have feelings of disgust and repugnance for genital organs, which he associates with feces, leading to a non-acceptance of these body parts. This could later lead to sexual problems.

We can then say that, at this age, affective development is centered on the acquisition of control. (MOITA et SANTOS, undated)

Around the age of three, the age of why's begins, triggered by the child's observations of the sexual differences that he notices when he compares his body with that of other children. Anatomical differences, differences in clothes, games, etc. The second most heard question at these ages is about their own origin (where do babies come from?) This question is often asked before the mother's new pregnancies. Another observation made by children of this age is the exchange of caresses between parents (why do they kiss?) (MOITA et SANTOS, undated)

Parallel to the doubts and curiosities that he poses orally, the child will explore his own body, in an attempt to know and promote the feelings that it produces. It is the phase of recognizing their gender, touching and observing, which manifests itself in the child when he shows his genitals and tries to compare them with those of other children in order to know himself, or recognize himself, in this confrontation with the other. (ROUYER, 2005)

Children need adults to give them the information they need, always appropriate to their age and ability to understand, and they also need to see how the models they identify with live their own sexuality naturally. During this period, one of the most important transitions takes place: the formation of identity and understanding of sexual roles (LOPÉZ et FUERTES, 1999).

We know that a large part of the child's development is done by imitation and that the first models to follow are the parents and educators themselves. The quality of the relationships that children will observe will depend, in part, on their subsequent safety and communication skills (MOITA et SANTOS, s/d).

ROUYER (2005) argues that the information given to children about sexuality should simply guide them, giving them clues to progress at the pace of their discoveries.

According to this author, there is no pedagogy of sexuality; sexual information is a mere aspect of education. The child will discover, by his own means, what love is, on the condition that he is first loved by the family and receives from him the interdictions that impose limits on his impulses.

The conditioning to which the child was subjected from an early age meant that he was now able to identify two different genders: boy and girl. However, this classification has two major limitations:
On the one hand, sexual identity is understood not so much by anatomical differences, but by characteristics associated with gender. For example, if we say to a boy: Imagine we put you in a girl’s dress and a girl’s shoes and put on earrings... what are you? The most likely answer is that she’ll say it’s a girl.

Children, on the other hand, think that adults easily switch identities. Children are only aware that their identity is permanent when:

- They know that it is not dependent on their will;
- They know it is consistent despite changes in appearance;
- Recognize its stability over time.

(LOPÉZ et FUERTES, 1999)

The sexual evolution of the child in this period depends greatly on how he resolves:

- Social impositions made on you;
- Jealousy;
- Sexual curiosity about anatomical differences and the origin of babies;
- Imitation conduct;
- Reaction to sexual behavior by adults.

In short, and according to what MOITA et SANTOS (undated) tell us, parents are the most important people in a child’s life. It is natural that during this phase, which involves the discovery of sexual organs and the observation of the differences between the two sexes, new forms of relationships between them arise. Its essential function is to understand, with tenderness, this phase of growth, marking the limits of the children’s dreams and desires, which involves the affirmation of their own affections and the bond of love between father and mother.

Sexuality in early childhood (from six to ten years old)

As in the previous period, children in this age group show a great acquisition of skills, both at a motor and intellectual level. However, these children’s thinking underwent a qualitative transformation: their ability to store images and information increased, and their vocabulary developed.

Starting school is one of the most important events in a child’s life. Upon entering school now, she is faced with a completely new environment, and this will be profoundly reflected in her evolution. (CORTESÃO et al, 1989)

With school, new companions, other adults, important learning and new personal and social demands arise.

We are in a phase considered to promote intellectual development, where the child, attentive to the outside world and the information they acquire, will be able to confront different points of view, integrating their emotions, sensations, and newly
acquired data. (MOITA et SANTOS, undated)

The lack of constant support from parents and educators, the fact that it is one among many, shakes the child and makes him feel that he has to conquer a place for himself: this is the end of the Oedipal period.

The teacher will transmit to the child a new image of the adult: he is the holder of knowledge, which helps to create an affectively less emotional environment. If the child has resolved all the conflicts of the previous period, he will, at this stage, acquire a very large multiplicity of knowledge, given his avidity for everything that surrounds him and which presents itself as new. At these ages, children discover a whole new extra-familiar environment. (CORTESÃO et al, 1989)

Children are also subjected to greater discipline in schedules and activities, as well as acquiring a set of moral rules.

The entrance to school allows the child to become part of a group whose members have characteristics similar to theirs. Thus, they will begin to bond emotionally with their colleagues, forming friendships, which are unstable at first as they change friends frequently. This is the right time to acquire greater autonomy from parents.

According to the same authors, and with regard to sexual experiences, the child is in a latent phase, as if he had forgotten all early childhood experiences. However, they continue to ask questions about sexual topics with the same naivety as in the previous stage.

In this latency phase, auto-eroticism is disguised, accompanied by amorous fantasies. Even in the absence of prohibitions established by the parents, the child experiences feelings of shame and guilt, struggling with himself not to touch his genitals. At that time, he finds other sources of pleasant bodily sensations, such as swinging, jumping, turning on himself, … (ROUYER, 2005)

Parents, educators, the media, and others continue to contribute to the attribution of a sexual role and identity to the child.

During this period, children become aware of their sexual identity, and that this is permanent. That is, the child now understands that if we dress a boy in girls’ clothes, he does not automatically become a girl.

Of course, this does not happen if the child is emotionally disturbed, or has difficulty identifying with the parents, whether this happens due to the absence of the parents or their failure to assume roles as man and woman. Identification with the parent of the same sex, which should have been carried out in the previous phase, is extremely important in the formation of sexual morality (LÓPEZ et FUERTEZ, 1999).

It is normal that there is curiosity to know your body and to observe other people undressed, to caress yourself, and even to show exhibitionist behaviors. However, couples do not form, nor are there sentimental relationships with a sexual component between boys and girls.

During this period, children often talk to each other about sexual problems, remaining silent in front of the adult, so it is necessary to be attentive and available. Adults play a key role at these ages, as they introduce their sexual morality through rewards and punishments.
Adults will, through their behavior, gestures, and examples, form children’s sexual morals, sometimes not in the best way. Thus, it is common for a father to spank a son he finds caressing his genitals, helping to spread the idea that it is a dirty and forbidden act. The daily observation of the relationship between the father and the mother is essential for the child to acquire significant elements of affective behavior. (LOPEZ et FUERTEZ, 1989).

Imitation learning plays a very important role in the acquisition of new behaviors. By observing the conduct of others and its consequences, the observer can learn new responses or alter existing ones. So when children hold hands or caress for the first time, they’ve seen this behavior dozens of times.

Around the age of 9 or 10, we are no longer in the presence of a child. Both from the affective point of view and from the intellectual point of view, great changes took place. Reasoning becomes more abstract, and young people become more capable of reflecting, of building theories. At this stage, young people should have opportunities to participate more actively in social life, to connect with the world, and to develop moral and affective qualities.

This entry into puberty is accompanied by changes at the bio-psycho-social level, marked by greater “sexual maturity”, which place the individual in front of a new way of living with himself and with everything that surrounds him (MOITA et SANTOS, s/d).

Sexuality in adolescence

The various changes that take place at this stage are based on childhood and make the teenager face the world from another perspective. Bio-Physiological Changes – With the arrival of puberty, there is a whole process of transformation of the body: increase in weight, height, maturation of sexual organs. Psychological Changes – Progress in the sphere of cognitive thinking culminates in the capacity for abstract development, classified by Piaget as the stage of formal operations. (WHALEY and WONG, 1997) The teenager has a new way of thinking, formulating hypotheses, reflecting, and drawing conclusions about them. Adolescents question themselves about everything, question everything: parents, school, and social system in general. Adolescent thinking encompasses a greater ability to:

- Think about the possibilities…
- Reflect on own thoughts…
- Ponder other people’s views.

(SPRINTHALL and COLLINS, 2003)
At these ages, there is a great desire to change the world and to shape it to suit them. Soon, the teenager will see how impossible this is.

It is in adolescence that the youth’s personal and sexual identity is finally consolidated. This is even the most important task you face.

If this process unfolds properly, the young person will be able to feel like a sexual person, with a system of values that is coherent over time.

The peer group, which until now consisted of people predominately of the same sex, becomes a mixed group, and becomes an important reference for the teenager. In the group, he finds support and refuge from conflicts with adults. Sometimes, the group makes you feel more free and independent, less covered by social norms.

This does not mean that the family does not play an important role at these ages. Quite the contrary, if parents have been valid role models for teenagers up to now, they will continue to be so.

In adolescence, sexuality is more intense and more defined, establishing a link between sexuality and affectivity:

- In a first phase, it is characterized by self-erotizing and self-experimenting behaviours.
- In a second phase, there is a strong perception of the differences between bodies and, simultaneously, a very critical view of one’s own body.
- In a third phase, affective involvement is more stable, and there is a sort of entry into the world of adult sexuality. (FONSECA, 2005)

This set of transformations that will happen in the boy and in the girl, and that begin with the appearance of menstruation in the latter and spermmark in the boy, should be received by the parents as a positive event. It is a further step in their development and not, as in many families, the onset of “headaches” that will last until the end of adolescence, especially if the adolescent is female (MOITA et SANTOS, s/d).

Thus, from adolescence onwards, sexuality manifests itself through:

- Sexual dreams;
- Sexual desires and excitement;
- Sexual fantasies;
- Masturbation;
- Sexual intercourse. (MIGUEL et GOMES, 1989)

For a better understanding, we will describe each of these items.

Sex dreams

These are all dreams that represent a sexual situation, even if they do not involve sexual activity. These dreams are involuntary, of variable frequency, accompanied by sexual arousal and sometimes orgasm.
In boys, the dream orgasm is often accompanied by ejaculation.

Although having erotic dreams is perfectly normal, some teenagers are worried that it means too much sexual propensity, manifested predominantly by girls. Some boys show some embarrassment about ejaculations at night, because they are ashamed that someone notices that this has happened, namely their mothers.

Sexual desires and excitement

They appear differently in female adolescents (less intense) and in males (more intense).

They are often related to the affective life.

Sexual fantasies

They are very variable from person to person, playing an important role in our sexuality, for their ability to excite and give us pleasure, and for their participation in sexual relations.

Masturbation

It is the process by which a person is aroused until reaching orgasm. Most of the time, manually stimulating the most sensitive areas of genital organs. (MIGUEL et GOMES, 1989)

Masturbation was, for a long time, considered an abnormal activity, with harmful consequences for health. Nowadays, however, the myths about masturbation have been eradicated by the information that young people have about sexuality.

Sexual relations

According to the ICNP – International Classification for Nursing Practice (1999, p.64), sexual intercourse is “a type of sexual interaction with specific characteristics: sexual actions by two people, usually of the opposite sex; sexual union for the purpose of mutual arousal and orgasm.”

It is a form of sexual expression between a man and a woman, which includes the introduction of the penis into the vagina and the execution of rhythmic movements, which increase excitement and lead to orgasm. (MIGUEL et GOMES, 1989)

In most cases, teenagers begin their sexual life, not through sexual intercourse itself, but by limiting themselves to caressing each other, exploring their bodies, and getting excited, reaching orgasm through mutual masturbation.

Many teenagers feel the need to start their sex life because their peers have already started theirs, because they think they are old enough, because their partner wants it. This leads to sexual activity often occurring impulsively, without carefully considering the consequences. (ditto, ditto)

Many parents do not feel prepared to approach sexuality with their adolescent children and alert them to the risk situations
they are subject to, inform them about the new potentialities of their bodies, help them to understand their feelings, and deal with them. They often opt for avoidance, due to the absence of this type of dialogue (MOITA et SANTOS, s/d).

By way of conclusion, when we talk about sexuality, it is convenient to associate it with love, tenderness, well-being, and pleasure. It is somewhat counter-educational, given that, in our society, sex is seen as something sinful and confusing. Therefore, we should encourage children to develop positive attitudes towards sexuality and life.

4. Theories about Childhood Sexuality

4.1. The Freudian Perspective

Sigmund Freud created a revolutionary perspective on sexuality, moving away from the current perspective.

Freud came to the conclusion that the main aspects of his clients’ personal development originated in the first six years of life. He found that he could understand the adult personality by examining just the kind of interpersonal experiences and relationships the adult had in childhood.

According to Freud, most human behaviors are acquired in the first six years of life, also admitting the existence of an infantile sexuality. In order to explain and study this complex development, he decided to divide it into stages, in which he differentiated behaviors and to which he attributed a different erogenous zone (FREUD, 1997).

- Oral stage (from birth to twelve/eighteen months) – begins with the child’s birth because, according to Freud, birth is a moment of great frustration for the child, as it loses an optimal environment. It is called oral because its erogenous zone is the mouth (GARCIA-ROZA, 1995).

The need to suck appears in the first hours of life; the pacifier will soon become a substitute for the mother and a new source of pleasure for the child. The mouth area is particularly sensitive, so any object of interest is taken to the mouth.

At this stage, the child still does not differentiate its body from the mother’s; the importance of feeding makes the mother, or whoever substitutes her, to be associated with the pleasure of sucking. The baby does not have the notion of an external world independent of him, which is why Freud points out the great importance of establishing an attachment relationship. A bad attachment relationship may have negative consequences in the future (FREUD, 1997).

- Anal stage (twelve/eighteen months to two/three years) – this is a very ambivalent phase that Freud differentiated into two sub-phases: a phase linked to the evacuation and destruction of the object and another linked to retention and possessive control of the object. The object is none other than the child’s feces. The erogenous zone at this stage is the anal region and the intestinal mucosa, and pleasure comes from defecation or feces retention (BOCK; FURTADO; TEIXEIRA, 1993).

The child’s need for control and autonomy also leads to some affective ambivalence, especially with regard to compliance with rules related to their hygiene.
Phallic stage (three to five/six years old) – it is in this stage that children question themselves about the origin of babies, become interested in the differences between sexes and in the relationships existing between adults of opposite sexes (GARCIA-ROZA, 1995).

For Freud, this is the phase in which the greatest changes occur in psychic terms for the child, as it is when the Superego, which has moral functions, is formed. It is also at this stage that the Oedipus Complex, Electra Complex, and Castration Complex are resolved.

According to him, the Oedipus Complex is a situation in which the boy feels an attraction for the mother, and that is why, at these ages, it is possible to observe a certain aggressiveness of the children towards the father, as this becomes a barrier to reaching all the attention they want from their mother. In the Electra Complex, the opposite is true; that is, the girl’s attack will not be on the mother, but on the father. The Castration Complex stems from the phallic stage, being linked to a set of unconscious representations and heavily charged with affection, associated with the imaginary fear of mutilation, loss, or lack of a penis. It appears as a fear of deprivation of the advantages linked to the penis, which, according to Freud, is a source of pleasure. In the end, all these complexes end up being resolved when children begin to identify with the parent of the same sex (FREUD, 1997).

Latency stage (6/7 years to 12 years) – there is a phase of infantile amnesia, in which the child forgets the events previously experienced. There is a decrease in sexual activity, which in some cases can be total.

At this stage, the libido is camouflaged by feelings of shame, disgust, and modesty, so the child behaves calmer, allowing a greater development of their skills and knowledge.

The superego manifests itself here with moral concerns (FREUD, 1997).

Genital stage (from puberty to the end of adolescence) – the onset of puberty is like a reactivation of latent sexuality, so it will develop further (FADIMAN, FRAGER, 1983).

Sometimes, some issues, such as the Oedipus complex, are resumed in this period. However, the investment figures are no longer the parents to become the boyfriends. Due to the great changes that adolescents go through at this stage, some past behaviors are resumed. These inadequate mechanisms for dealing with situations are the way adolescents use to hide some emotional aspects (FREUD, 1997).

4.2. Childhood Sexuality Explained by Learning Theories

According to Broderick, these theories are the ones that most criticized Freud’s psychoanalytic theory. (FAVERO, 2003)

Adherents of operant conditioning theories claim that sexual role learning is the result of a process of reinforcing socially acceptable behaviors and punishing socially unacceptable behaviors.

Bandura’s theory of social learning defines learning not only as a process of reinforcement/punishment, but as a process of observation and imitation, which he called behavior modeling. By this, the author means that children, in many of their
sexual manifestations, reproduce behaviors that they observe directly from adults or from the media and that they are merely imitating (FÁVERO, 2003).

This theory also explains the reasons why children begin to hide their sexual manifestations: not only because of society's punishments, but also because they observe that such behaviors are repressed in other children. They learn in this way that they are taboo subjects by the way they are treated in clans or in other family and social environments.

4.3. Childhood Sexuality Explained by Anthropological Theories

Malinowski's study, carried out in 1969, analyzed the sexual manifestations of Melanesian children, where he reports that they are raised with great freedom in different aspects, including sexuality (FÁVERO, 2003).

This author describes that Melanesian children organize themselves into small children's communities, from the age of four until puberty, where they start to gather for all kinds of games to obtain pleasure. These games include the exposure and manipulation of the genitals, as well as their oral stimulation. In contact with adults, they are allowed conversations of a sexual nature, as well as witnessing sexual intercourse. Girls really start their sex life between 6 and 8 years old, boys between 10 and 12 years old.

In 1973, and still within the anthropological perspective, Ford and Beach analyzed 32 different cultures in which they found very permissive attitudes toward children's sexuality.

These attitudes also included the observation of sexual intercourse between adults and the beginning of oral and genital intercourse between the ages of 6 and 8, both in girls and boys (FÁVERO, 2003).

5. Sex Education in Childhood

Sex education becomes more and more urgent, since sexuality is a special moment in each phase of the subjects' development and has great specificity in each stage of life development.

FUERTES et LÓPEZ (1999) state that attitudes are built throughout life as a result of experiences and behaviors learned, referring us to the social and cultural factors that influence them. It is essential that we consider the religiosity factor as an element that dictates moral values and regulates sexual behavior.

It is therefore important to reflect on the weight of religious influence in society, imposing norms and repressions with regard to human sexuality.

The main difference between childhood and youth is marked in our culture by the beginning of sexual activity, or rather, by the ability to reproduce. We cannot neglect that in Christian culture both concepts have been deeply linked (REIS et VILAR, 2004).

LEITÃO (2002) reveals in his study that the lack of dialogue between parents and children is one of the three possible
explanations that may underlie the current situation in our culture, as well as the segregation of sex and its trivialization. In numerical terms, 85% of boys and 90% of girls consider it important to have Sex Education. Thus, it can be inferred that our young people, in fact, feel the need for a lively dialogue with their parents.

Faced with such facts, there is an urgent need to delineate the skills and attitudes of those who address this issue and, based on FUERTES et LÓPEZ (1999), we synthesized the profile of the trainer in sex education.

KNOWLEDGE

- Dimensions of sexuality;
- Diversity of sexual behaviors throughout life and individual characteristics;
- Mechanisms of sexual response, reproduction, contraception, and safe sex practices;
- The ideas and values with which different societies have faced sexuality, love, reproduction, and relations between the sexes throughout history and in different cultures;
- Health problems – and forms of prevention – linked to the expression of sexuality, in particular unwanted pregnancies, Sexually Transmitted Diseases (STDs), sexual abuse and violence;
- The rights, legislation, support, and resources available for the prevention, monitoring, and treatment of these problems.

ATTITUDES

Contribute to:

- A positive and comfortable eating of the sexual body, pleasure, and affectivity;
- A non-sexist attitude;
- A non-discriminatory attitude towards different sexual expressions and orientations;
- A preventive attitude towards illness and a promoter of well-being and health.

SKILLS

- Development of skills to make responsible decisions;
- Development of skills to refuse unwanted behavior or behavior that violates personal dignity and rights;
- Development of communication skills;
- Acquisition and use of an adequate vocabulary;
- Use of safe and effective means of contraception and prevention of STD transmission;
- Development of skills to ask for help and know how to use support when necessary.

According to REIS et VILAR (2004), through the rituals of changing stages, the child should not only understand what it is to be an adult but also what it is to be a man and a woman.

MARQUES et al. (2002), in accordance with the recommendations of the Portuguese Association for Family Planning (APF), present us with important items to be addressed according to the age/level of education in which children and
young people are inserted. As we mentioned earlier, the development stages are specific, as well as the contents that we must transmit, share, ... Thus, we summarize the contents according to the levels of education:

Preschool and 1st cycle:

1. Knowledge and appreciation of the body:
   - Different parts of the body;
   - Highlighting positive aspects of each person;
   - Promotion of positive self-esteem.

2. Sexual identity:
   - Gender and sex role;
   - Confrontation with socio-cultural models;
   - Male Female.

3. Interpersonal relationships
   - Appreciation of affections and expression of feelings;
   - Social integration skills;
   - Positive relationships with others.

4. Human reproduction
   - Mechanisms of human reproduction (Conception, Pregnancy, and Childbirth).

2nd, 3rd, and SECONDARY CYCLES

- Anatomophysiological, psycho-affective, and socio-cultural dimension of sexuality;
- The sexual body and internal and external organs;
- Body hygiene rules;
- Diversity of sexual behaviors throughout life and individual differences;
- Mechanisms of reproduction;
- Family planning and contraceptive methods;
- Sexually transmitted infections, forms of prevention and treatment;
- Mechanisms of human sexual response;
- Ideas and values related to sexuality in different societies (past/present);
- Existing resources for solving situations related to sexual and reproductive health;
- Types of sexual abuse and aggressors' strategies.

According to LEITÃO (2002), it is about integrating Sexual Education into a program with vast objectives, the development of personality, and the integration of all dimensions, with a view to preparing the young person through his autonomy for
adult life and for the responsibilities that, while being sexed, he has to assume in his life project.

Thus, Sexual Education programs simultaneously include an “Education for Affectivity” and “Education for Relationship” dimension. This training process aims at acquiring a set of specific skills capable of enabling the individual not only to know how to listen, understand, value, and welcome others, but also to be able to self-analyze, self-value, and express properly handle one’s feelings. That is, recognizing one’s own affections and those of the other, knowing how to express affections and knowing how to share them, being able to establish satisfactory, harmonious, and responsible sexual relationships.

5.1. Legal Framework

Matters relating to sex education, family planning, and reproductive health have, in recent years, received particular attention from Portuguese society, within the framework of a progressive assertion of citizens’ rights to education and health.

Thus, the State has been assuming, since 1984, objective duties and promoting concrete measures in the realization of these rights, reinforcing the protection of maternity and paternity, introducing training and information on human sexuality in school curricula, creating family planning consultations in health services, providing free contraceptives and developing measures to protect against sexually transmitted diseases.

At the same time, the ongoing processes of reorganizing basic education and revising the curriculum of secondary education have been giving special attention to the need for an integrated approach to this issue, as an essential dimension of the educational and training path of young people.

Law nº 120/99 of 11 August enshrined measures to promote sexual education, reproductive health, and the prevention of sexually transmitted diseases, as well as related to the voluntary termination of pregnancy in cases where this is legally admissible.

The application of the measures provided for in Law No. 120/99 is within the competence of teaching and health establishments, either through specific interventions or by developing joint actions, in association or partnership.

The diploma incorporates subjects related to the organization of school life, with special relevance to the intervention of specialized educational support services in schools, to the curricular organization, favoring an integrated and transversal approach to sex education, to the involvement of students and guardians, and of the respective associations and teacher training.

Decree-Law 259/2000, which came to regulate Law 120/99, states that the curricular organization of basic and secondary education obligatorily contemplates the approach of promoting sexual health and human sexuality, either from an interdisciplinary perspective or integrated into curricular disciplines whose programs include the theme.

5.2. Reality In Portugal
Although the first legislation dates from 1984, both the formalization and the implementation of Sexual Education in Schools have proved to be a long and complex process, the subject of ideological debates and political pressures from various quarters of society. In fact, this process is closely linked to both the social changes that have taken place in our country, and the confrontation between different models of Sexual Education, as well as the evolution of attitudes towards sexuality (LEITÃO, 2002).

COSTA (2005) analyzes the current panorama of the implementation of sexual education programs in Portuguese schools and takes a brief look at the numbers that help to characterize the attitudes of the Portuguese towards sexual and reproductive health.

Sexual and reproductive education is today one of the main concerns within the scope of educational and public health policies in the European Union. Despite not having yet reached the levels of most of its European partners, in recent years, Portugal has registered significant improvements in indicators relating to sexual and reproductive health. The increase in the use of contraceptive methods, the decrease in teenage pregnancy, and the improvement in maternal and child health indicators are some examples of this.

We are, however, still far from being able to say that all or most Portuguese children and young people have access, throughout their school career, to sex education activities.

VILAR (2002) goes even further and states that the situation “regressed in the last three years” due to the attitude of progressive “disengagement” of the Ministry of Education regarding this issue.

The obstacles that have arisen to a faster advance and greater coverage of sex education in schools contribute to a large extent to this situation. Among them is the absence of studies and rigorous data on sex education in Portugal.

On the other hand, many schools and teachers are still unaware of the existing legislation, which obliges them to include sex education in their educational projects and in the curricula of their classes.

Another difficulty concerns the understanding of the very concept of sex education, which “continues to be the object of very diverse, confusing and often wrong understandings”, sometimes understood merely in its medical and biological aspect and without clear ethical references in what concerns refer to the approach to sex and sexual behavior, a fact that, in the opinion of the APF, may constitute a “potential focus of internal and external controversies at schools”.

Finally, the absence of monitoring and supervision seen in many regions of the country, associated with the lack of initiative on the part of the regional education directorates and educational centers in order to lead schools to comply with the provisions of the legislation. (VILAR, 2002)

Framing the Portuguese reality, more specifically in the object of our study – 1st Cycle of Basic Education, this presents as an objective for the 3rd year, in the area of study of the environment: to know and locate, in the representation of the human body, some organs of the corresponding apparatus, namely the genitals (ME/DEB, 1998).

As for the sexual organs that children should know and be able to locate, the program does not mention any additional
information. However, it is understood that knowledge about the male and female genital organs should be sufficient to fulfill the second objective: “To know the basic digestive, respiratory, circulatory, excretory, reproductive/sexual functions.” (ME/DEB, 1998; p114).

Each education and public teaching establishment adopts (DL 369/90, of November 26th – regulates the adoption of school manuals), according to the differences proposed by the publishers, in a pedagogical council, the school manuals in the subsequent academic year, by a minimum period of four years, but that the adopted manuals do not always correspond to the preference of all the teachers who teach each year.

According to SANDERS et SWINDEN (1995), the sex education for students in the 1st Cycle of Basic Education, its main objective is to help children make responsible decisions with regard to their relationships with others, since entering school allows children to broaden their social relationships. Another objective is to contribute to the integrity of your self-esteem, favoring the development of a positive sense of yourself.

In view of what is done in Portugal, SAMPALO (1987) reveals to us, in the results of his study, the opinion of parents and teachers about sex education, of which we highlight some essential aspects:

As for the opinion of parents about their children’s sex education, more than half of respondents feel that their children’s sex education should be the couple’s responsibility;

As for sex education being done exclusively by parents, most respondents believe that schools should also implement sex education in their curricula;

As for the church’s responsibility in the sexual education of children and young people, all respondents are in disagreement as to the fact that sex education should be done, in the first place, in the church, including Catholic parents and non-practicing Catholics.

As for the responsibility of schools, most respondents agree with the statement that sex education for children and young people should be the responsibility of schools. However, the low percentage of responses obtained as being in total agreement indicates that a large part of the respondents do not think that the school should be the only institution providing sex education.

6. Parental Role

It all starts from birth. All psychoanalysts give extreme attention to the first experiences between the mother and the baby. These are the models through which the child develops his later relationships.

The perspectives brought by two theoretical currents of psychology deserve, on our part, emphasis and reflection, as they are indispensable for the foundation of the study in question, namely the attachment theory and the theory of parenting styles. The first constitutes an enormously important contribution to understanding the relevance of early relationships for child development, while the second helps us to understand how different parental attitudes, in terms of educational
practices, influence child development.

Thus, with regard to the theory of attachment, we cannot fail to emphasize the first studies, which date back to the third decade of the twentieth century, developed by John Bowlby, an author who, using concepts from ethology, cybernetics, and psychoanalysis, built the pillars principles of attachment theory (BRETHERTON, 1991).

His conceptions are responsible for advancing studies of the parent-child relationship. According to Bowlby, all children, soon after birth, have a primary social need that, in most cases, is satisfied with the mother, making her the attachment figure (WENDLAND, 2001).

Bowlby specifically talks about attachment and the different types of affective bonds, and focuses especially on the study of attachment and its implications for child behavior and later life as an adult.

Attachment is a relationship of affection in which one person maintains closeness to another, from whom he receives support, protection, and care, and whom he considers stronger and wiser (GIMENO, 2001).

Until about two years of age, the child develops in a “maternal stage”. At this stage, the mother plays a predominant role, and the father intervenes indistinctly as a satellite of the mother, as well as other figures or objects. He undoubtedly has an important role since he must provide the mother with security and an affective balance from which the child will benefit.

For Bowlby, attachment stems from biological predispositions not linked to basic needs (as Freud stated as oral and physiological drive needs), such as proximity and contact maintained with the adult figure (WENDLAND, 2001).

Later, Mary Ainsworth came to translate the fundamental ideas of the theory into empirical data, greatly contributing to its expansion (BRETHERTON, 1991). According to her, attachment theory presupposes that the need to build various emotional bonds is a basic component of human existence, present throughout life. Attachment is defined as an affective bond that, once established, tends to last, whether in time or space (AINSTWORTH, 1991).

SOARES (1996) states that the first and most relevant relationship that we establish with the world arises in the development of an emotional bond that we establish with the figures that take care of us, in the early days of our lives. Attachment processes strongly influence the development of identity and self-knowledge, as it is from this process that we get to know ourselves and the world.

The essential idea of this theory is that there is a significant relationship between lived experiences and those in childhood and adolescence and the ability to build emotional bonds in adulthood.

Weiss (1982), quoted by GIMENO (2001), identifies three criteria for attachment: the need for closeness, especially in times of distress; an increase in well-being when accompanied by an attachment figure; and an increase in distress when access to that person is threatened.

Bowlby, in the course of his studies, distinguished patterns of parental functioning with negative implications for the development of attachment and personality, such as attitudes of rejection or depreciation towards the child’s attachment.
behavior; negligence in parental care; threats to stop liking the child, as a way of controlling him/her; introducing guilt into
the child, by making him or her responsible for the illness or death of the parental figure.

For the author, this type of experience may lead to an insecure attachment, which is defined as a constant anxiety about
not losing the attachment figure or by avoidance reactions due to fear of rejection by that figure (SOARES, 1996).

This leads to the need to favor relationships that provide a secure attachment, which are those that satisfy the needs for
affection in a systematic way, without reaching overprotection or exclusivity, in order to allow the child to discover and
explore the outside world and establish emotional relationships.

Therefore, the child must be given a secure attachment capable of providing stability, basic care, and affection, but which
allows for plural bonds over time, with other family members and beyond. The development of one’s own personal identity
and autonomy and the development of social competence are favored when the family is able to stimulate and facilitate
emotional bonds with other children and adults (GIMENO, 2001)

In short, the attachment theory presupposes that children establish bonds with certain figures who dedicate their care to
them, usually represented by their parents. The quality of these relationships is modified according to the quality of the
care provided by the attachment figures and the way they are experienced by the child. Furthermore, the quality of these
early experiences and relationships exert a significant influence on the child’s later development (SOARES, 1996).

Parental figures are the earliest and most prevalent source of influence on the child’s sexual development (LÓPEZ et
FUERTES, 1999) and their role “is of the utmost importance, namely in the way they relate to each other and to the child
(…) parents are, indisputably, unavoidable figures in the global development of children, so it is admissible that their
“messages” and attitudinal and behavioral proposals are endowed with a special and specific salience” (MARQUES, 2002,
p. 13)

As the author states, this care is mostly provided by parents, building early relationships with their children, which makes
it imperative for us to define the parental role.

According to ICNP (1999, p. 63), parental role is “a type of Role Interaction with the following characteristics: interacting
according to parental responsibilities, internalizing the expectations of family members, friends, and society regarding
appropriate role behaviors or inappropriate parents: expression of these expectations as behaviors and values; essential
to promote optimal growth and development of the dependent child.”

Role Interaction is understood as “a type of Interdependent Action with specific characteristics: interacting according to an
implicit or explicit set of expectations, roles and norms of behavior expected by others” (CIPE, 1999, p. 63).

In this area of parenting, Baumrind’s studies are of particular interest, since the author identified three styles of parenting
practices that are differentially related to the child’s behavior (LERNER et CASTELLINO, 2000).

According to BAUMRIND (1971), parents adopt different ways of acting with regard to the central areas of education of
their children, such as control, communication, affective warmth, and the demands of maturity that they impose on their
children. The parenting styles she outlined illustrate these differences.

Thus, one of the parenting styles identified by the author is the authoritarian style: the parental figure tries to model, control, and evaluate the child’s attitudes and behavior, based on absolute criteria; emphasizes obedience to authority, and imposes high demands on maturity; uses punitive measures to influence the child’s behavior; communication with the latter is not encouraged by the parental figure, as it assumes that the child must abide by its word and rules; manifestations of affection towards children are rare. çaa.

A second style identified by the author is the permissive style (BAUMRIND, 1971): it is characterized by the absence of norms, tolerance, and acceptance by the child; attitudes of affective warmth and positive communication towards the child are verified, not imposing great demands of maturity; the parental figure constitutes a resource for their children, but does not view itself as an active agent in shaping their behavior; the child is given the possibility to manage his behavior, since the parental figure avoids controlling attitudes and does not encourage obedience to external behavioral standards.

Finally, the authoritative style: the parental figure establishes limits and forms of behavior, in an environment of affective warmth and positive communication; imposes high demands of maturity on the child but does not neglect their development needs, their specific interests, and their abilities; attitudes of power are combined with attitudes of affective warmth, and the rights and duties of the parental figure and the child are seen as complementary (BAUMRIND, 1971).

Her research covered a wide range of samples, and the first results on the consequences of these parenting styles for the child’s development came to be supported empirically. Thus, authoritarian parents tend to have children who are obedient but unhappy and insecure; children of permissive parents are not very confident in themselves and have difficulties with self-control; finally, children whose parental figures are predominantly characterized by an authoritative style are the happiest, socially competent and with achievement skills (LERNER et CASTELLINO, 2000).

Although there is consistency in most of the studies developed based on this theoretical framework, the aforementioned authors warn of the fact that there is no formula that guarantees success in the performance of parental functions. Parents who are affectionate may care for children with behavioral difficulties, while, on the other hand, parental abuse and neglect may vary in the effects they may have on the child.

FINE et HENRY (1989) state that the first works carried out in the sense of relating parenting styles with the child’s behavior proved to be very linear and that a broader perspective on the family becomes important, given that this linearity does not actually occur.

In 2004, WEBER et al. revealed the results of their study, carried out with the aim of exploring parenting styles among Brazilian families (inquiring 239 children and their respective parents), in order to investigate the way in which parents educate their children, through parenting style categories, checking the level of agreement between children and their parents, as well as agreement between mothers and fathers.

They concluded that adopting an authoritative parenting style is quite adequate for the healthy upbringing of children. On the one hand, there is a position of control and, on the other, a position of understanding and bidirectionality, which offers
the child greater autonomy and self-assertion.

An extremely important aspect is not only knowing what to do to educate, but also knowing if what you are doing is interpreted by the child as expected.

The authors were also able to verify through this research that the majority of parents are acting inappropriately with their children (45.5% of neglectful parents, 10.1% of authoritarians, and 11.8% of indulgent, totaling 67.3% of non-authoritative parents). Probably, some parents feel confused about what they should do in their children's education, while others believe they are doing the right thing because they were brought up in the same way.

For Maxler and Mishler (1978), referred to by GIMENO (2001, p. 40), the family is defined as “a primary group, a group of intergenerational coexistence with kinship relationships and with an experience of intimacy that extends over time”. The constitution of the family also corresponds to a series of individual actions, but it is no less certain that once configured, it acts as a unified whole, which cannot be described only as the sum of the parts, that is, a reality that goes beyond the initiatives of its members and tends to perpetuate and stabilize.

In most cross-cultural studies, and despite their specificity, the family organizes its day-to-day life to fulfill two basic functions: the personal development of the children and socialization.

The family's basic functions go beyond food and physical health, including protection and affection, as it seeks the personal development of all its members (children, adults, and elderly people) and their active integration into the social environment. In addition to all of this, the family also aims to maintain its own identity, family identity, and cohesion (GIMENO, 2001).

The family is part of the evolutionary context and has its own life cycle. It, too, is born, grows, matures, and usually reproduces in new families, ending its life cycle with the death of the members that originated it and the removal of descendants to form new family nuclei.

Thus, the notion that the family has a life cycle, serves us to emphasize the procedural nature of its manifestations, as well as the brevity of its functions, although it is relevant to emphasize the continuity of the family in the transmission from generation to generation of a matrix pattern of social interactions indispensable for the maintenance of the whole process for citizenship (OSÓRIO, 1996).

Among the innumerable changes that the family has undergone, perhaps the one that stands out the most is the variety of models and structures with which the family has tried to adapt to economic and ideological changes in the environment and, at the same time, satisfy the requests of its members, which are not limited only to health and well-being, but also to integral growth (GIMENO, 2001).

6.1. Difficulties of Parents in Approaching their Children’s Sexuality

Most educators admit that sexuality is fundamental in the psychic life of the child; however, many parents still ignore the role of sexuality in the psychological evolution of the child, fundamentally in the field of sensitivity. (MAUCO, 1986)
Some parents refuse to address this important aspect of sensitivity, citing morality and decency. Unfortunately, this refusal does not suppress the educational problems in this domain, making them more urgent, as it can abnormally value, according to this author, the sexual life that they intend to ignore, thus involving it in mystery.

The accentuated preference that the small child has for the mother or for the father is notorious. In principle, the boy will be more attached to the mother and the girl to the father. On the unconscious level, this form of attachment has a clearly sexual character, from which, in fact, in the near future, affective sexual evolution will come.

For the girl, the father represents the ideal man, especially if he is a successful person. The mother represents the ideal female type for the boy.

As puberty approaches, this attachment becomes more complex, taking on a more clearly sexual character. It may tend to become exaggerated or absurd, but conversely, unconscious repressive forces act to prevent this attachment from assuming an incestuous character. (ARTHUS, 1976)

The little girl who wanted to marry her father stops wanting him. In the same way, the boy ceases to be in love with his mother.

It is at this stage that some conflicts arise between father and daughter and mother and son. However, children are not the only ones to blame for this new attitude, as parents also react to the phenomenon of puberty in their children.

The father, who had a “blind” relationship with his daughter, will not love her any less because she is entering puberty; however, he will feel less comfortable with her expressions of affection. Involuntarily, he will establish a greater distance between the two. For him, she is already a woman, which leads him to adopt a different attitude.

If the father is even a jealous person, he can carry out behaviors that prevent the daughter from approaching the male world, opposing a reasonable freedom. Thus, he will try to educate his daughter severely, especially if he has led an adventurous life himself.

If the father does not lift the opposition he has made to the daughter, he will become such a perfect model for her that in his future relationships, he will not settle for someone who is not the same as the father.

That’s why the young woman will find little fun with boys her age, being interested in older men.

The situation is reversed in the case of the boy. When he becomes pubescent, he feels his attachment to his mother grow, while at the same time, he becomes prone to a certain contempt for the woman. (ARTHUS, 1976)

In the awareness of his nascent virility, he adopts reactionary attitudes towards his mother, whose authority becomes the target of his attacks.

During this period, we saw the emergence of various problems between father and son: the father opposes the masculinity that seeks to manifest itself in the son and tries to keep him in a childish attitude.
The mother, on the other hand, when she feels that her son is trying to escape her authority, assumes a castrative attitude, forbidding her son to develop his sexuality correctly. Things get complicated in such a way that the teenager himself does not always feel firm in his desire for evolution, refusing to abandon the advantages that he enjoys in a more infantile stage.

This “fight” sometimes goes on until very late, in the form of the mother’s opposition to her son’s marriage attempts or the attitude towards her daughter-in-law after the marriage. One way or another, she will be opposing her child’s adult sex life. (ditto, ditto)

Parents influence children through their behavior, their degree of understanding, their conscious feelings, and also for their unconscious reactions; hence, MAUCO (1986) considers that parents should try to understand before intervening.

The child transmits to the parents all the conflicts and all the unconscious affective difficulties that they experienced during their own childhood, hence the tendency to punish their own tendencies in children. Emotional clashes with the child are to be avoided. It is important to help the child in difficult situations such as weaning, jealousy, and the Oedipus complex. It becomes imperative to avoid severe condemnation of infantile manifestations of sexuality. Parents must be honest and approach this issue naturally, responding without embarrassment to the child’s sexual curiosity, and, whenever there is an opportunity, false knowledge must be destroyed. (MAUCO, 1986)

6.2. The Importance of Communication in Sexuality

Every intentional, conscious, and systematic act of education is always accompanied by numerous unintentional contents that can have a great educational influence (posture, gestures, expressions, content of examples, use of language, feelings they provoke, meaning of the educator for the student, adaptation or interpersonal withdrawal, etc.) (LÓPEZ, 1990).

According to PÉREZ (1991), the fact that parents do not address these issues with their children can bring some problems to children, namely:

- Weird ideas about sexuality;
- Seeing sexuality as obscene, dirty, or sinful;
- Misunderstanding of the bio-physiological changes that occur during puberty;
- Maintain a childlike attitude about sexual activity;
- Winning complexes;
- Having difficulties in relationships with the opposite sex;
- Losing trust in one’s parents.

These are some of the possible results of the lack of dialogue between parents and children.

As has already been said, for many parents and educators, it becomes difficult to discuss these personal and intimate topics. The age difference between parents and children often acts as a conditioning factor.
Children and young people also experience this difficulty. A way to resolve these setbacks must be found.

In the first place, according to PEREZ (1991), it is very important not to adopt a moralizing posture, because if parents go down this path, the most natural thing is that children or young people feel inhibited in approaching certain types of events that presuppose a reprimand.

Closed body expressions or expressions that express displeasure, during the dialogue, are not favorable, and can also make communication difficult.

Parents are advised to always maintain an open posture, which demonstrates affective availability, without issuing value judgments. They must speak and express themselves with frankness and tolerance.

There should be nothing in the parents’ speech that gives the feeling that sexuality is being censored; on the contrary, any event that raises doubts in the child, whether it be a television program, a “spicy joke”, or a comment of a sexual nature, should serve as a starting point for dialogue, leaving no room for doubt.

As can be seen here, the first step to be taken by parents must be to gain the child’s trust, so that there can be a sincere dialogue between both parties. This dialogue should then exist from the youngest ages, when the first questions regarding human sexuality arise, with no room for evasive answers or reprimands, as some parents still do. (MAUCO, 1986)

As parents express opinions and make comments in a calm and natural way, communication becomes more fluid. Trust builds little by little.

There are sexual issues that must be addressed before they can be observed, such as the changes that occur during puberty. It is the role of parents to explain that young people will be able to observe the growth of hair in some parts of the body, that they will increase in height, that there is a deepening of the voice in boys, that girls are menstruating for the first time...

If these types of events are not discussed beforehand, young people will feel anxious and “abnormal” when they occur.

PÉREZ (1991) advises that these questions be discussed from father to son and from mother to daughter, given the personal experience that each parent can convey. The idea that parents themselves have been through the same thing and that they are no exception is reassuring for children. Later, children will feel free to talk to either parent.

It is not necessary for parents to tell facts about their private lives, besides being of no interest to children. The important thing is that parents answer clearly and directly to all their children’s questions.

Discussion of issues such as pregnancy and abortion, or other topical issues can be held, even if the child does not have an immediate interest in them. It only helps to have a clearer opinion about them in the near future.

Some parents, when they order sexuality, focus on the more organic aspects, thus giving the impression that sex is something mechanical and cold. They don’t talk about sensations and emotions, how couples are formed, or the pleasure that sex can provide.
It is obvious that both parents and educators cannot know everything and that, in a way, they are conditioned by the education they themselves had; however, they must avoid criticizing or imposing their own ideas. There doesn’t have to be any fear of telling children that they are uncomfortable with certain matters. In these cases, the best thing to do is to consult an encyclopedia or book on sexuality.

Talking about sexuality should be natural, spontaneous, and relatively easy. Information should be provided to children as questions or occasions arise. (MAUCO, 1986)

7. Methodology

The investigation derives from the restlessness of the human being, who seeks to generate new knowledge, in a tireless search for a construction that is as faithful as possible to reality.

Inevitably, research gives rise to new knowledge.

According to FORTIN (1996, p. 31), “research plays an important role in the practice of care.”

Methodology is defined by BARROS and LEMFELDE (1986) as the study of the best way to approach certain problems in the current state of the investigator’s knowledge. It does not seek solutions but rather helps to find them, integrating knowledge about the regent methods in different scientific and philosophical disciplines.

The methodology is the study of the logical problems involved in the investigation.

The methodological phase is of paramount importance, as it ensures the reliability and quality of research results (FORTIN, 1996).

During the methodological phase, “the researcher determines the methods he will use to obtain answers to the research questions posed or hypotheses formulated. It is necessary to choose an appropriate ‘design’ depending on whether it is describing a phenomenon, examining associations or differences, or verifying hypotheses. The researcher defines the population and chooses the most appropriate instruments to carry out data collection” (FORTIN, 1996, p. 40).

7.1. Formulation of The Research Problem

A research begins with a question to which the researcher seeks to answer, or a problem that he would like to solve: the so-called research problem or investigation question.

According to FORTIN (1996), this is a step of extreme importance in the investigation process, since it is equivalent to its starting point. Any investigation derives from a doubt, question, or discomfort related to a certain phenomenon, and raises the consequent need to understand and explain that same phenomenon.

“These are questions that are formulated at the beginning of an investigation and that serve to guide the study”
In nursing research, and according to POLIT and HUNGLER (1993), the four most common sources of problems for nursing researchers are: experience, nursing literature, theories and ideas from other people (external sources). Nurses must be endowed with the aforementioned capacities to, through investigation, break new ground in order to evolve as human beings and as professionals, since "a profession that is aware of its duties must raise questions that deserve to be researched, be willing to allow investigations relating to their activity, and to put into practice the object of their research." (COLLIÉRE, 1998, p. 157).

The elaboration of a research problem is essentially a creative process that shows the researcher's interest in a certain area or subject. The subject must have scientific value, not be too extensive or too restrictive, and be well delineated. ALBUQUERQUE (2006)

According to FÁVERO (2003), child sexuality represents one of the least explored subjects within the context of human sexuality. The lack of scientific studies, or even essays addressing this reality, is a constant both in Portuguese and foreign studies.

The growing interest and dissemination of the topic “sex education” has contributed to a greater awareness on the part of parents of their role, as well as their responsibility in educating their children’s affections.

It was in this context, and because we would like to understand how parents deal with childhood sexuality, that we formulated the following research questions:

- Q1 – What are the feelings experienced by parents when their children question them about their sexuality?
- Q2 – What knowledge do parents demonstrate about sexual manifestations in childhood?
- Q3 – What are the strategies used by parents to address the topic of sexuality with their children?

7.2. Characterization of The Study

The type of study describes the structure used according to the research question; it aims to describe variables or groups of subjects, explore or examine relationships between variables, or even verify hypotheses of causality. (FORTIN, 1996)

According to this author, our study belongs to the category of:

- Level I and II – exploratory/descriptive studies

The study can be further classified according to the time in which the research takes place as:

- Transversal

This study thus fits into the category of exploratory/descriptive and cross-sectional studies, given that it analyzes and explores a reality; it has as its goal the confirmation or discovery of facts; and it is a cross-sectional research, as it is carried out in a determined and limited period of time. The study method to be used is qualitative research with a
phenomenological approach, as it aims to contribute to the understanding of phenomena.

According to POLIT and HUNGLER (1993), qualitative research tends to emphasize (...) the dynamic, holistic, and individual aspects of human experience, trying to understand such aspects in the context of those who experience them. Research that uses the qualitative method (ditto, ditto), rather than focusing on specific contexts:

- Try to understand the totality of a phenomenon;
- Stresses the importance of interpretations of events and their circumstances;
- It does not try to control the context of the research, but to capture it in its entirety;
- Tries to capitalize on the subjective as a means of understanding and interpreting personal experiences;
- Analyzes the information obtained in an organized but intuitive way.

According to (FORTIN, 1996), phenomenological studies aim to understand a phenomenon in order to ascertain its essence from the point of view of those who live that experience. The researcher’s attention focuses on how individuals understand the problem of how this reality is perceived by them: “(...) discovering how the world is constructed and how human beings experience it, through conscious contacts”.

7.3. Objectives of The Study

Quoting FORTIN (1996, p. 100), the objective of a study is “a declarative statement that specifies the orientation of the investigation according to the level of knowledge established in the domain in question”.

The purpose of the study indicates the justification for the need for research on the topic presented, stating the key variables, the target population, and the direction of all research.

In order to study the perception that parents have about Child Sexuality and the strategies they have to address this issue with their children, this investigation was guided by the following specific objectives:

Explore the thoughts and feelings experienced by parents when their children question them about their sexuality;

Identify strategies used by parents when addressing the topic of sexuality with their children;

Identify the knowledge that parents demonstrate to have about sexual manifestations in childhood.

7.4. Population and Sample

According to FORTIN (1996, p. 202), the population is “a collection of elements or subjects that share common characteristics defined by a set of criteria”.

FORTIN (1996, p.202) defines a sample as being “a subset of a population or a group of subjects that are part of the same population”, representing a miniature replica of the population that is intended to be studied, having all its characteristics.
Quoting FORTIN (1996, p. 203), “the description of the population and the sample provides a good idea about the possible generalization of the results. The characteristics of the population define the group of subjects that will be included in the study and specify the selection criteria”.

The target population under study consists of the parents of children between 6 and 10 years old who belong to the Rio de Loba Scout Group, in the municipality of Viseu.

The sample for our study consists of nine parents.

Still, according to (FORTIN, 1996), qualitative methods cannot use large samples due to their nature; according to the author, a large sample size is to be avoided in qualitative research, as it generates a large pile of data difficult to analyze.

This sample was chosen intentionally, as it is a large group, frequented by children from different backgrounds (rural and urban areas), as well as from different social strata, which will provide us with a diversified sample.

The type of sampling used was non-probabilistic for convenience or accidental. Non-probabilistic analysis does not presuppose the selection of subjects or sampling units using random procedures (POLIT and HUNGLER, 1993). In this case, this fact proved to be an advantage for us, since we had to respect the availability and openness to the subject of the target subjects; that is, we selected the most readily available sampling units as subjects of our study.

The inclusion criteria for our sample were being a parent/caregiver of at least one school-age child, more specifically in the First Cycle (6 to 10 years old).

7.5. Data Collection Method

According to FORTIN (1996, p. 245), the data collection method allows “gathering information from the participants regarding facts, ideas, behaviours, preferences, feelings, expectations and attitudes”. POLIT and HUNGLER (1993) state that the research method should be composed of a set of questions that allow the collection of the necessary, valid, and pertinent information to carry out the research work.

Collecting data from a population thus assumes a fundamental role in the preparation of any research work. For this, it is necessary to create a data collection instrument that meets the outlined objectives.

For the elaboration of our research work, we used as a data collection method the semi-structured interview, which we prepared, whose script is attached at the end of this work.

The interview is a data collection method in which one person, the interviewer, poses questions to another, the interviewee, about the subject he or she wishes to study or deepen.

POLIT and HUNGLER (1993) state that (...) in the semi-structured interview, the interviewer guides the interviewee through a set of questions that he uses as a guide. It is through the content analysis of oral communications, carried out in a systematic and objective manner, that we can reach valid conclusions.
The first questions of our interview were aimed at characterizing the study population. The rest were prepared in order to answer the preliminary research questions.

We tried to start the interview with an informal conversation; the location was chosen either by the interviewer or by the interviewee, this being a calm and sheltered place in order to allow privacy.

We recorded the responses, asking for prior authorization from the interviewee. In this way, we were able to collect all the information without the risk of losing any important data.

The interview was conducted by an interviewer who gave total freedom of expression, punctually removing any doubts that arose.

7.5.1. Pre-test

Quoting FORTIN (1996), “the pre-test consists of applying the data collection instrument to a small sample that reflects the diversity of the target population, in order to verify that the questions can be well understood”.

The pre-test is carried out with the aim of verifying the functionality of the interview and validating the data collection instrument. The implementation of this procedure gives the researcher the possibility of correcting or modifying the interview and solving some unforeseen events.

The application of our data collection instrument (interview) was previously carried out with three parents whose ages, educational qualifications, and place of living varied. Questions were put to them, which they answered without difficulties, demonstrating understanding and interpretation of the same.

7.5.2. Data processing

For data processing, we used content analysis, which, according to BARDIN (1995, p. 42), “(...) is a set of communication analysis techniques aimed at obtaining, through systematic procedures and objectives of describing the content of messages, indicators (qualitative or not) that allow the inference of knowledge related to the conditions of production/reception (inferred variables) of these messages”.

All content analysis presupposes the disaggregation of the message into recording units, the name given to the content segments of that same message.

According to VALLA (1996), “(...) a registration unit is a segment of certain content, which is characterized by placing it in a certain category”.

For BOGDAN (1994), the category is a means of classifying the collected data described, so that the material contained in a given topic can be separated from other data.

Thus, the content analysis has to be articulated with the theoretical framework and is considered as the rewriting of a text with intentionality and, where objectivity is related to the signifier, since this is done according to who analyzes the content.
of the answers.

In content analysis, everything is important. That is, the little is as important as the much, which implies looking at the majorities without neglecting the minorities; that is, the singularity must be valued.

After carrying out a semi-structured interview with nine parents of school-aged children (6-10 years old) belonging to the Rio de Loba Scout Group – Viseu, and considering all these aspects, we proceeded to transcribe the interviews, after listening to each one of them in full, which turned out to be a time-consuming but rewarding process. This procedure allowed us to remember the voices of the interviewees and the intonation they gave to each of the ideas they expressed. From our analysis, 6 categories and 24 subcategories emerged, which were grouped and coded to facilitate the understanding of the data.

Each interviewee was assigned the letter E, followed by the number that was randomly assigned to each of the interviews. Thus, each respondent will be designated E1, E2……E9.

Each question in the interview guide was assigned the letter P (for “pergunta”, i.e., “question” in Portuguese) and a number, depending on the number of questions contained in the guide. Thus, we will have the coding of questions from P1 to P12.

The data obtained were treated qualitatively through the N6 program (Richards & Richards, 2002).

For the characterization of our sample, we used descriptive statistics.

Knowing that descriptive statistics focuses on the study of peculiar and dissimilar characteristics of the observed units, statistical indicators are used to describe the data (PESTANA E GAGEIRO, 2003).

In this study, we used the following indicators:

Frequencies:
- Absolute (n);
- Relative (%).

Measures of Central Tendency:
- Average.

Dispersion measures:
- Standard deviation (SD);
- Coefficient of variation (Cv).

The coefficient of variation allows comparing the variability of two variables, for which we selected the degrees of dispersion of this measure as presented by PESTANA et GAGEIRO (2003):
- CV ≤ 15% – weak dispersion;
- 15% <CV ≤ 30% – medium dispersion;
- CV > 30% – high dispersion.

For the treatment of these data and their presentation, we used the computer program Microsoft Office Excel 2007.

### 7.6. Characterization of The Sample

#### Age

As shown in Table 1, our sample consists of seven female elements whose ages vary between 25 and 42 years, obtaining an average of 32.86 years, a standard deviation of 5.84, and a coefficient of variation of 17.78%, which corresponds to a medium degree of dispersion.

With regard to the two men interviewed, the youngest is 39 years old, and the oldest is 42, which gives an average of 40.5 years, a standard deviation of 2.12, and a low coefficient of variation (5.24%).

<table>
<thead>
<tr>
<th>Age</th>
<th>N</th>
<th>Min.</th>
<th>Max.</th>
<th>Mean</th>
<th>Dp</th>
<th>CV  (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>7</td>
<td>25</td>
<td>42</td>
<td>32.86</td>
<td>5.84</td>
<td>17.78</td>
</tr>
<tr>
<td>Male</td>
<td>2</td>
<td>39</td>
<td>42</td>
<td>40.5</td>
<td>2.12</td>
<td>5.24</td>
</tr>
<tr>
<td>Total</td>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 1. Distribution of the sample according to gender and age

For a better global view, we grouped the ages of respondents into five-year intervals. Thus, as we can see from Table 2 and Graph 1, 33.33% of respondents belong to the 35-40 age group. Soon after, in equal percentage (22.22%), the other levels.

<table>
<thead>
<tr>
<th>Age</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>[25-30]</td>
<td>2</td>
<td>22.22</td>
</tr>
<tr>
<td>[30-35]</td>
<td>2</td>
<td>22.22</td>
</tr>
<tr>
<td>[35-40]</td>
<td>3</td>
<td>33.33</td>
</tr>
<tr>
<td>[40-45]</td>
<td>2</td>
<td>22.22</td>
</tr>
<tr>
<td>Total</td>
<td>9</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 2. Distribution of the sample according to age
Marital status

With regard to marital status, we can observe a large percentage (88.89%) of married people. The remaining 11.11% represent single respondents.

The distribution of this variable is shown in table 3 and graph 2.

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married</td>
<td>8</td>
<td>88.89</td>
</tr>
<tr>
<td>Single</td>
<td>1</td>
<td>11.11</td>
</tr>
<tr>
<td>Total</td>
<td>9</td>
<td>100</td>
</tr>
</tbody>
</table>
Degree of kinship

From what we can see in Table 4 and Graph 3, there were 6 mothers who responded to our interview, which corresponds to 66.67% of the sample, and 33.33% were fathers.

<table>
<thead>
<tr>
<th>Relationship</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father</td>
<td>3</td>
<td>33.33</td>
</tr>
<tr>
<td>Mother</td>
<td>6</td>
<td>66.67</td>
</tr>
<tr>
<td>Total</td>
<td>9</td>
<td>100</td>
</tr>
</tbody>
</table>
Number of children

As we can see in the table below, most of the sample (66.67%) have only one child; the remaining two respondents have two (22.22%) and three children (11.11%).

<table>
<thead>
<tr>
<th>Number of Children</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>6</td>
<td>66.67</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>22.22</td>
</tr>
<tr>
<td>3</td>
<td>1</td>
<td>11.11</td>
</tr>
<tr>
<td>Total</td>
<td>9</td>
<td>100</td>
</tr>
</tbody>
</table>

Literary abilities

With regard to educational qualifications, the highest percentage (44.44%) of respondents have secondary education (12th grade). Three of the respondents are graduates, corresponding to 33.33% of our sample, and the remaining respondents are in their 9th year of schooling.

The results are represented in the following table.
Table 6 - Distribution of the sample according to educational qualifications

<table>
<thead>
<tr>
<th>Literary Qualifications</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>9th grade</td>
<td>2</td>
<td>22.22</td>
</tr>
<tr>
<td>12th grade</td>
<td>4</td>
<td>44.44</td>
</tr>
<tr>
<td>Graduate</td>
<td>3</td>
<td>33.33</td>
</tr>
<tr>
<td>Total</td>
<td>9</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 7. Distribution of the sample according to professional activity

<table>
<thead>
<tr>
<th>Profession</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>E.Office</td>
<td>1</td>
<td>11.11</td>
</tr>
<tr>
<td>Hairdresser</td>
<td>1</td>
<td>11.11</td>
</tr>
<tr>
<td>Seller</td>
<td>1</td>
<td>11.11</td>
</tr>
<tr>
<td>Employee Audience</td>
<td>2</td>
<td>22.22</td>
</tr>
<tr>
<td>Emp. Factory</td>
<td>1</td>
<td>11.11</td>
</tr>
<tr>
<td>Photographer</td>
<td>1</td>
<td>11.11</td>
</tr>
<tr>
<td>Teacher</td>
<td>2</td>
<td>22.22</td>
</tr>
<tr>
<td>Total</td>
<td>9</td>
<td>100</td>
</tr>
</tbody>
</table>

Profession

As for professional activity, the panoply we obtained in our sample was vast. Two teachers, two civil servants, an office worker, a hairdresser, a salesperson, a factory employee, and a photographer were surveyed, as shown in the table below.

Area of residence

With regard to the residence, our respondents, for the most part, live in rural areas (66.67%) and the rest in urban areas, as we can illustrate through the table and graph below.

This majority percentage of residents in the rural area could be due to the fact that the Group of Scouts is from Rio de Loba (a parish located on the outskirts of the city), and they classified it as a rural area, even though it belongs to the urban perimeter of the city.
Table 8. Distribution of the sample according to area of residence

<table>
<thead>
<tr>
<th>Residence</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>6</td>
<td>66.67</td>
</tr>
<tr>
<td>Urban</td>
<td>3</td>
<td>33.33</td>
</tr>
<tr>
<td>Total</td>
<td>9</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Urban, 3, 33%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural, 6, 67%</td>
</tr>
</tbody>
</table>

Graph 4. Distribution of the sample according to area of residence

Child Sexuality

When asked if they consider the existence of infantile sexuality, the majority (66.67%) of the parents consider the existence of infantile sexuality; two of the respondents revealed having doubts, saying they did not know whether or not there is childhood sexuality; only one denied its existence, as can be seen in the table and graph that follow.

Table 9. Distribution of the sample according to their perception of the existence of childhood sexuality
As for the notion that the children have about reproduction, according to the parents’ perspective and, as we can see in the table and graph below, the vast majority (77.78%) affirm that the children have a real idea of what reproduction is; one of the parents replied that the child did not know how reproduction works and another said he did not know how to answer.
8. Analysis and Discussion of The Results

Quoting FORTIN (1996, p. 330), "presenting the results consists of providing all relevant results regarding the research questions or hypotheses formulated".

In this item, we will make use of the bibliographic research carried out, trying to confront the opinions of different authors on different themes, and comparing them with the opinion of our sample. This will also be complemented by the opinion of other consulted authors due to problems that arose after the interviews were carried out. We finish with the presentation and analysis of the data in tables, for a better global visualization.

After an in-depth analysis of the interviews and considering the questions asked, it was possible to identify six categories of analysis: I) Knowledge, II) Questions about sexuality, III) Perceived feelings, IV) Strategies, V) Perception of Gender Identity, VI) Educational papers.

The recording units resulting from the interview clippings made it possible to identify several subcategories that were later
integrated into the different categories.

The analysis of each of these dimensions follows, presented in the form of tables. In these, the source is omitted since they result from the interviews carried out.

**Category I - Knowledge**

In the Knowledge category, we intend to analyze the perception of parents about the existence of childhood sexuality and their preparation to address this issue with their school-age children.

This category stems from the question:

- “If you consider the existence of Child Sexuality, what does it represent for you?”

Based on the responses obtained and selected registration units, we arrived at the following subcategories:
- Discovery of the body;
- Gender role;
- Affects;
- Non-existence.

As it is possible to verify in Table 11, almost all parents refer to having knowledge regarding child sexuality, and our objective is not to differentiate between those who have more or less knowledge, so as not to produce value judgments. It should be noted that none of the interviewees made reference to aspects related to reproduction.

It is interesting to see how parents associate the idea of childhood sexuality with the first discoveries of anatomical differences and the expression of affection: “the age of the first crushes.” (E6p2)

None of the parents mentions the phase of recognizing their gender, touching and observing the body, which manifests itself in the child when he shows his genitals and tries to compare them with those of other children. Perhaps they do not consider these practices an expression of childhood sexuality.

For some of the parents, childhood sexuality is only a preparation for adolescence, not being attributed great significance to it.

It should only be noted that E7, like E5, is also not sure that there is infantile sexuality, although, unlike the previous woman, this lady does not categorically deny this possibility.

Parents influence their children through their behavior, their degree of understanding, their conscious feelings, and also their unconscious reactions; hence, MAUCO (1986) considers that parents should try to understand before intervening.

It becomes imperative to avoid severe condemnation of infantile manifestations of sexuality. Parents must be honest and approach this issue naturally, responding without embarrassment to the child's sexual curiosity and, whenever there is an opportunity, false knowledge must be destroyed. (MAUCO, 1986) For this to happen, parents must have a sense of what child sexuality is.

Table 11. Category of analysis: Parents' knowledge about Child Sexuality
<table>
<thead>
<tr>
<th>Category</th>
<th>Subcategory UE register units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge about Child Sexuality</td>
<td>Discovery of one’s own body</td>
</tr>
<tr>
<td></td>
<td>“It’s the ‘awakening to adolescence’.”</td>
</tr>
<tr>
<td></td>
<td>Childhood sexuality was already described by Freud: at the time with much controversy.</td>
</tr>
<tr>
<td>Gender Role</td>
<td>They were asked about differences between the sexes.</td>
</tr>
<tr>
<td></td>
<td>“Discovery of differences between boys and girls.”</td>
</tr>
<tr>
<td></td>
<td>“My daughter is more modest.”</td>
</tr>
<tr>
<td>Affections</td>
<td>“It is the age of the first ‘crushes’”.</td>
</tr>
<tr>
<td></td>
<td>“… My son likes girls. You can see (laughs), he even has a girlfriend at school.”</td>
</tr>
<tr>
<td></td>
<td>There is no “Little kids don’t think about these things, I guess.”</td>
</tr>
<tr>
<td></td>
<td>“I don’t think there is infantile sexuality.”</td>
</tr>
</tbody>
</table>

### Category II - Questions About Sexuality

In the second category of analysis, Questions about sexuality, we integrated the doubts that children pose to their parents regarding their sexuality, resulting in the question category:

- “What are the most frequent questions your child asks you about this topic?”

Based on the answers obtained and the selected recording units, as we can see in Table 12, we arrived at the following subcategories:

1. Biological dimension
2. Psychosocial dimension
3. Affective dimension

As previously stated by MOITA et Santos (undated), the age of whys begins at around three years old. The second most asked question from children at this age is about their own origin. Children question themselves and others about their own origin, such as “Where do babies come from?”. This question is often asked before the mother’s new pregnancies.

Children also make comparisons between their bodies and those of other children, triggered by the findings of sexual differences they notice. We are very intrigued by anatomical differences, differences in clothes, games, etc.

Parallel to the doubts and curiosities that he poses orally, the child will explore his own body, in an attempt to know and promote the feelings that it produces. It is the phase of recognizing their gender, touching and observing, which manifests itself in the child when he shows his genitals and tries to compare them with those of other children in order to know himself, or recognize himself, in this confrontation with the other. (ROUYER, 2005).

It is normal that there is this curiosity to know your body and to observe other people undressed, to caress yourself, and even to show exhibitionist behaviors. However, couples do not form, nor are there sentimental relationships with a sexual component between boys and girls.
During this period, children often talk to each other about sexual problems, remaining silent in front of the adult, so it is necessary to be attentive and available. Adults play a key role at these ages, as they introduce their sexual morality through rewards and punishments.

Adults will, through their behavior, gestures, and examples, form children’s sexual morals, sometimes not in the best way. Thus, it is common for a father to spank a son he finds caressing his genitals, helping to spread the idea that it is a dirty and forbidden act. (LOPEZ et FUERTEZ, 1989).

We can see in Table 12 that, for the most part, the children’s doubts are related to biological, psycho-affective, and social issues.

<table>
<thead>
<tr>
<th>Category</th>
<th>Subcategory UE register units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biological “Where do babies come</td>
<td>(E1p4)</td>
</tr>
<tr>
<td>from and ‘things like that’.”</td>
<td></td>
</tr>
<tr>
<td>“Mostly issues related to your</td>
<td>(E2p4)</td>
</tr>
<tr>
<td>body.”</td>
<td></td>
</tr>
<tr>
<td>“How are babies born?”</td>
<td>(E4p4)</td>
</tr>
<tr>
<td>“When will my titties grow?”</td>
<td>(E4p4)</td>
</tr>
<tr>
<td>“Why do we have pubic hair?”</td>
<td>(E4p4)</td>
</tr>
<tr>
<td>“The 6-year-old asks more about</td>
<td>(E6p4)</td>
</tr>
<tr>
<td>gender differences.”</td>
<td></td>
</tr>
<tr>
<td>“He asks when dad and I can give</td>
<td>(E8p4)</td>
</tr>
<tr>
<td>him a homie.”</td>
<td></td>
</tr>
<tr>
<td>Psychosocial dimension “Questions</td>
<td>(E3p4)</td>
</tr>
<tr>
<td>related to what you see on TV,</td>
<td></td>
</tr>
<tr>
<td>such as: people who kiss and</td>
<td></td>
</tr>
<tr>
<td>caress each other.”             (…).”</td>
<td></td>
</tr>
<tr>
<td>“The 8-year-old is more</td>
<td>(E3p4)</td>
</tr>
<tr>
<td>concerned with pleasing Inês,</td>
<td></td>
</tr>
<tr>
<td>who is his girlfriend.”</td>
<td></td>
</tr>
<tr>
<td>Affective Dimension “He worries</td>
<td>(E6p4)</td>
</tr>
<tr>
<td>about his appearance, acne, he</td>
<td></td>
</tr>
<tr>
<td>feels ugly and says he will never</td>
<td></td>
</tr>
<tr>
<td>get a girlfriend.”             (E2p4)</td>
<td></td>
</tr>
<tr>
<td>&quot; (...) What questions me about</td>
<td>(E3p4)</td>
</tr>
<tr>
<td>my own sexuality.”             (E9p4)</td>
<td></td>
</tr>
<tr>
<td>“He asks me if only married</td>
<td>(E8p4)</td>
</tr>
<tr>
<td>people kiss on the mouth.”</td>
<td></td>
</tr>
<tr>
<td>“Ask why dad gives me kisses.”</td>
<td></td>
</tr>
</tbody>
</table>

VIEIRA (2006) states that parenting practices are shaped by the beliefs that mothers and fathers have about the behaviors that should be encouraged or punished in sons and daughters, with a view to promoting an intellectual development conducive to the formation of psychologically healthy adults. It is, however, important to explain to parents that these “exhibitionism” and comparison behaviors are normal and that they should not be repressed, as they may produce feelings of repression in the child that will affect their adult sexuality.

Category III - Perceived Feelings

Perceived feelings are the category of analysis through which we intend to find out what feelings are experienced by parents when they approach the topic of sexuality with their school-age children.
This category stems from the question:

- “What feelings do you experience when your child approaches you about their (their) sexuality?”

In the category of analysis regarding feelings, it was possible to identify a wide variety of responses, which allowed the selection of several recording units, the most mentioned, directly or indirectly, being “feeling comfortable” talking to the children about the topic of sexuality, and which made it possible to identify the Naturalness subcategory, among five other subcategories, namely: Complicity, Embarrassment, Strangeness, Satisfaction, Rejection.

According to ROUYER (2005), there is no pedagogy of sexuality. The information given to the child should simply guide him, giving him tools to progress, depending on his new discoveries. She will unravel, by her own means, what love is, having the family as a reference.

VIEIRA (2006) states that mothers show a tendency greater than fathers to communicate differently with their daughters and sons. In their dialogues with children, mothers are emotionally more sensitive and expressive. The father’s tendency seems to be to explain and promote the emotional understanding of certain events, without involving the expression of feelings. This may result in the fact that boys feel more discouraged in showing their expressions of affection, as well as in controlling their enthusiasm and crying.

The same author states that although both parents feel uncomfortable talking about sexuality with their sons and daughters, it is the mother who usually plays the main role in this area.

However, fathers and mothers prefer that their children ask them questions, rather than voluntarily providing information about sexuality. The main information given relates to matters of a physiological nature, attention to the dangers of irresponsible sexuality, and, rarely, to obtaining sexual pleasure.

Although we can see that the parents have a feeling of “at ease” when they address this issue with their children, as well as the satisfaction of being able to do it, there is a father who finds his son’s questions strange because he is only 7 years old and another father who rejects having feelings regarding the questions asked by his daughter “These are women’s things” (E5p6)

It is also interesting to note that E1 reveals embarrassment when her son questions her. We should remember that she is a single mother, and we attribute this fact as the cause of her embarrassment.

Due to the popularization of divorce, single-parent families are becoming more frequent, with frequent situations in which women decide to take care of the children alone. VIEIRA (2006) states that regarding education, these mothers tend to be more punitive, but to act in a less stereotyped way.

Perhaps it would have been interesting to study how the absence of this child’s father influenced her sexual development; however, what was at stake here were the feelings experienced by the mother.
Table 13. Category of Analysis: Perceived Feelings

<table>
<thead>
<tr>
<th>Category</th>
<th>Subcategory UE register units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feelings Naturalness “I feel at ease. These are normal questions for age.”</td>
<td>(E2p6)</td>
</tr>
<tr>
<td>“I feel comfortable raising these issues.”</td>
<td>(E6p6)</td>
</tr>
<tr>
<td>“I think he should feel free to talk to me: I’m the mother.”</td>
<td>(E7p6)</td>
</tr>
<tr>
<td>“I do not know! It’s normal”</td>
<td>(E9p6) 4</td>
</tr>
<tr>
<td>Complicity “Complicity…”</td>
<td>(E1p6) 1</td>
</tr>
<tr>
<td>Embarrassment &quot;(...) I feel a little more embarrassed.&quot;</td>
<td>(E1p6) 1</td>
</tr>
<tr>
<td>Strangeness “I think it’s a little strange… it’s only been 7 years.”</td>
<td>(E3p6) 1</td>
</tr>
<tr>
<td>Satisfaction “I am satisfied that I trust my answers.”</td>
<td>(E4p6)</td>
</tr>
<tr>
<td>“It’s beautiful to be able to share her growth with her.”</td>
<td>(E4p6)</td>
</tr>
<tr>
<td>“I’m glad.”</td>
<td>(E8p6) 3</td>
</tr>
<tr>
<td>Rejection “These are women’s things”</td>
<td>(E5p6) 1</td>
</tr>
</tbody>
</table>

Category IV - Strategies

With the Strategies category, we tried to verify the means that parents use when approaching the topic of their children’s sexuality, resulting in the question category:

- “What strategies do you use to respond (to your children’s questions? about this topic)?”

As stated by MOITA et SANTOS (undated), when addressing issues such as sexuality, the family’s need and interest in confronting experiences is urgent. This anticipation is necessary to determine strategies to be used to approach the theme, strategies that should be provided with attitudes of dialogue and affection, as well as some knowledge of psychosexual development.

LÓPEZ and FUERTEZ (1999) reinforce and add that children need adults to give them the information they need, adapting them to their age and understanding capacity, and it is also important that they see them as models with which they identify.

On the other hand, LEITÃO (2002), through his study, reveals to us that the lack of dialogue between parents and children may be at the base of the current situation of our culture, as well as the segregation of sex and its trivialization.

As can be seen in Table 14, the most frequent Registration Units allowed the elaboration of the Dialogue subcategory. Here, the idea appears that parents generally do not raise the topic of sexuality in a conversation with their children, but if the children do, they take the opportunity to clarify their doubts about the topic, which is in line with what MAUCO (1986) states that talking about sexuality should be something natural, spontaneous and relatively easy. Dialogue with the child should be established as doubts or occasions arise.

The way in which parents are able to clarify their children allowed the identification of 3 more subcategories: Books, Analogy, and Escape. Some parents mention that they resort to books or analogies to substantiate their statements.
There is only one interviewee who uses escape as a strategy, referring this dialogue to his wife. This attitude clearly shows the difficulty that some parents still have in approaching this topic. VIEIRA (2006) states that although both parents feel uncomfortable talking about sexuality with their sons and daughters, it is the mother who usually has the main role in this domain.

LOPEZ and FUERTES (1989) state that during this period, children often talk to each other to get answers to the doubts that arise. If parents do not answer these questions, they will seek information from others, most of the time, the wrong one.

Still, in relation to this category, VIEIRA (2006, p.45) states that fathers adopt different strategies from mothers to approach their children’s sexual education. According to this author, “(...) boys are socialized in order to deal more naturally with issues of sex and girls to be more ashamed of their bodies, (...) to be more modest and show themselves to be more modest.”

For VIEIRA, the control exerted by parental figures on issues of sexual education, with less freedom with regard to the education of girls, is linked to the fact that fathers and mothers are afraid that they will become pregnant. However, they are not equally worried about the possibility that their children could get someone else’s daughter pregnant, so they do not place so many restrictions on leaving home.

For this author, there is no doubt that sexual education, which fathers and mothers provide to boys and girls, can exacerbate or minimize all social pressures around what is considered desirable in terms of manifestations associated with sexuality.

<table>
<thead>
<tr>
<th>Table 14. Category of analysis: Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strategy</strong></td>
</tr>
<tr>
<td>Strategies Dialogue “I answer only what you ask me.”</td>
</tr>
<tr>
<td>“I answer directly and use the correct terms.”</td>
</tr>
<tr>
<td>“When you ask me something, I answer.”</td>
</tr>
<tr>
<td>“I respond normally appropriate to his age.”</td>
</tr>
<tr>
<td>“The truth is always the best.”</td>
</tr>
<tr>
<td>Books: “I try to find easy ways to answer. Sometimes I resort to books, etc…”</td>
</tr>
<tr>
<td>“I answer with the truth, I resort to books…”</td>
</tr>
<tr>
<td>Analogy: “I make comparisons with animals that also have babies and I never run away from the answer.”</td>
</tr>
<tr>
<td>Escape: (he said laughing) “I answer: go to your mother”</td>
</tr>
</tbody>
</table>

Category V - Perception of Gender Identity

This is followed by the Perception of Gender Identity category, through which we obtained the perception that parents have of the Gender Identity that their children have and the reasons they defend for affirming it.
This category stems from the question:

- “Please name two reasons your child would like to be a boy or a girl.”

As previously mentioned, the act of birth immediately assigns an identity linked to sex: boy or girl – gender identity.

This gender attribution will condition the attitude of adults toward the child, in the choice of his name, clothing, decoration of the room, etc. (LÓPEZ et FUERTES, 1999).

From a very early age, the child must be helped to find his sexual identity, that is, allow him to see himself as a girl or a boy, as a person who belongs to the sex he has. To this end, he is assigned tasks that allow him to act in the society in which they live, according to the behavior restricted to children of their gender (boy/girl) (MOITA et SANTOS, s/d).

As shown in Table 15, the male role, manifested by the Registration Units contained therein, is centered more on issues of strength and the taste for football, while the female role is more connected with clothes, adornments, and the use of make-up. BERSCHEID and WALSTER in VIEIRA (2006) state that women feel the need to be physically more attractive than men. These authors state that the norms of appearance transmitted to women include certain parts of the body, weight, clothing, make-up, and posture.

While girls are taught how appearance appears as a crucial aspect of their lives, men are taught the idea that it is the achievements that count, and a demonstration of strength and virility is expected from them.

VIEIRA (2006) states that the themes that appear in boys’ fantasies, in the stories they invent and in the scenarios they build when they play with other boys, involve danger, conflict, strength, destruction, heroic actions, and demonstrations of physical strength. The themes of the girls revolve around domestic or romantic scripts, which include characters committed to maintaining or restoring order and people’s safety.

As previously mentioned in the bibliographic review, from birth we are assigned names, clothing, games, and sexual activities, depending on whether a boy or a girl is born. We are even supposed to act in a certain way and have certain thoughts and feelings.

Thus, before the boy or girl becomes aware of their sexual identity, their whole world has already been predetermined.

| Table 15. Category of analysis: Perception of gender identity |
Category VI - Educational Roles

This is followed by the Educational Roles category, through which we tried to show how parents attribute responsibility for their children’s sex education.

This category stems from the following questions:

- “Who do you think your child talks to most about these issues?”
- “Where do you think your child learns most about these subjects?”
- “Who do you think these issues should be addressed by? List in ascending order of responsibility.”

PÉREZ (1991) reinforces the difficulty that many parents and educators have in discussing these personal and intimate themes, with the age difference between parents and children often being a conditioning factor.

The fact that the child is a boy or a girl illustrates what PÉREZ (1991) suggests as a facilitating form of dialogue on the subject. He advises that these issues be addressed from father to son and from mother to daughter, due to his personal experience.

The data obtained in Table 16 corroborate those obtained by SAMPAIO (1987), in which more than half of the respondents mentioned that the sexual education of their children is the responsibility of the couple. It is within the home that information about the sexuality of their children should be conveyed, which is in line with what MARQUES (2002) and LÓPEZ et FUERTES (1999) state: parents are the fundamental icon in the sexual development of the child. Most of the
identified Registration Units were included in the Family Subcategory, followed by the School.

According to SAMPAIO (2007), the family is the privileged emotional space for the development of healthy attitudes and behaviors in the area of sexuality. The example of parents and siblings, the way in which family members communicate values and beliefs regarding sexuality, comments on news in newspapers, TV programs or websites, are very important models and references for someone who is making his way personal, in search of identity and autonomy only achieved at the end of adolescence.

As previously mentioned in the bibliographic review, the affective bond with the parents is of central importance in the child's sexual and affective life, implying feelings of security and well-being; behavior in search of proximity and contact, of affection. Bonding is a privileged interaction between the child and their caregivers, through the intimate contact established between them.

The bond established with the parents will determine the manifestations and sexual behavior throughout the life cycle. (LOPÉZ et FUERTES, 1999)

In the relational experience with attachment figures, children acquire basic trust and security that will provide them with new contact with the physical and social environment. It is the attachment that makes relationships of greater proximity and trust exist in the future, as well as that these are more lasting.

In second place comes the School Subcategory, which was referenced in seven Registration Units. SAMPAIO (2007) also mentions that the school should also be considered as an important context to enable students to increase their knowledge in the area of sexuality and to promote appropriate attitudes and behaviors with lower risks. The current school, by integrating students from very different cultural backgrounds, plays a fundamental role in the attitudes of respect that these different sensitivities deserve, without ever being able to forget the family as the fundamental emotional space where they originate.

From the perspective of SANDERS et SWINDEN (1995), sex education for students in the 1st Cycle of Basic Education has the main objective of helping children make responsible decisions with regard to their relationships with others. Going to school allows children to expand their social relationships.

The school, namely in the 1st Cycle program, addresses contents such as knowledge and appreciation of the body; sexual identity; interpersonal relationships, and human reproduction (MARQUES et al., 2002).

After the family, the school, and the Church, we can see that the priority is not on Health Professionals, but on the Media, followed by the role of friends.

Regarding the "Virtual World", and according to what was said earlier in the bibliographic review, the media, and specifically television, exert a significant influence on the daily lives of all of us, especially on children because they are in a phase of formation of the values, concepts, models of conduct and sexual behavior and spend about two hours a day in front of the television.
Children's early exposure to scenes of sex and violence, in a degrading, pornographic way and without any type of series, can interfere with their emotional development. The child stores all kinds of information he receives. (RIBEIRO 2005)

Television can contribute positively or negatively to children's education, but the parental role can contribute much more! The action of parents and educators should focus on sincerely answering the questions asked and taking advantage of situations to promote dialogue, such as reading books, commenting together on movies, television programs, scenes from everyday life, etc.

Children's experiences with their parents, the whole process of identification, and the construction of affections exert deeper influences than what is transmitted by the media. Therefore, it is necessary to convey to parents the importance of helping their children to select the most correct information in these media.

The role of friends, mentioned here only by one of the parents, will later be one of the most important for the child/adolescent. From the social point of view, the family's close dependency relationship becomes 'tempered' by other, increasingly significant, references centered on the peer group and on other adults outside the family. The peer group becomes an important reference for the adolescent. In the group, he finds support and refuge from conflicts with adults. Sometimes, the group makes you feel more free and independent, less covered by social norms. Peers provide the necessary social space for the development of a series of behaviors that in other contexts could be inappropriate, also enabling self-knowledge and the training of new skills.
With the last question of our interview, we asked parents to rank in descending order of importance the institutions that should intervene in their children’s sex education. Thus, we present the result in Table 17. As can be seen, eight of the parents give priority to the family with regard to disseminating information about child sexuality. In second place appears the school, mentioned by 6 of the parents, followed by the Church (5 parents).

With regard to the role of the church, LÓPEZ et FUERTES (1999) give it special importance, since attitudes are built throughout life and are influenced by social and cultural factors, of which we cannot neglect the religiosity factor.

The results obtained are in line with those of SAMPAIO (1987), who states that Catholic parents (the totality of our sample) also disagree with the predominant role of the Church in sex education.

**Table 17.** Ranking of Institutions in Children’s Sex Education

<table>
<thead>
<tr>
<th>Category</th>
<th>Subcategory UE register units</th>
</tr>
</thead>
<tbody>
<tr>
<td>papers</td>
<td></td>
</tr>
<tr>
<td>Educational Family “Father...”</td>
<td>(E1p5) (E3p5)</td>
</tr>
<tr>
<td>“With me (father)”</td>
<td>(E9p5)</td>
</tr>
<tr>
<td>“Mother, (…)”</td>
<td>(E4p5) (E6p5) (E9p5)</td>
</tr>
<tr>
<td>“With me (mother)…”</td>
<td>(E8p5)</td>
</tr>
<tr>
<td>“(…) With the family”</td>
<td>(E8p5)</td>
</tr>
<tr>
<td>“(…) Grandmother.”</td>
<td>(E2p5)</td>
</tr>
<tr>
<td>“(…) Grandmother.”</td>
<td>(E4p5)</td>
</tr>
<tr>
<td>“Only if they talk to the mother, she never spoke to me.”</td>
<td>(E5p5)</td>
</tr>
<tr>
<td>“At home.”</td>
<td>(E1p9) (E3p9) (E6p9) (E8p9) (E9p9)</td>
</tr>
<tr>
<td>“With the mother, maybe…”</td>
<td>(E5p9) 17</td>
</tr>
<tr>
<td>School “At school”</td>
<td>(E1p9) (E3p9) (E6p9) (E8p9) (E9p9)</td>
</tr>
<tr>
<td>“At school with the questions you ask.”</td>
<td>(E4p9)</td>
</tr>
<tr>
<td>“You should talk about these things at school. I think that’s where they learn that.”</td>
<td>(E7p5) 7</td>
</tr>
<tr>
<td>Media “(…) Internet.”</td>
<td>(E2p9) (E6p9) (E5p9)</td>
</tr>
<tr>
<td>“(…) Sometimes on TV.”</td>
<td>(E7p9)</td>
</tr>
<tr>
<td>“(…) In books”</td>
<td>(E9p9) 5</td>
</tr>
<tr>
<td>Friends “(…) Friends.”</td>
<td>(E4p5)</td>
</tr>
</tbody>
</table>

1
9. Ethical and Legal Considerations

Whenever an investigation involves the participation of human beings, it is urgent to reflect on ethical and moral issues.

According to POLIT et HUNGLER (1993), any research with individuals constitutes some kind of intrusion into their personal lives. Therefore, it becomes pertinent for the researcher to ensure that the research will not be more invasive than necessary, guaranteeing privacy and anonymity.

Any and all investigations involving human beings should only be carried out if the fundamental rights and freedoms of the persons interviewed are not jeopardized.

The collection of data and the discussion of the results obtained can and should make their contribution to scientific evolution; however, their misuse can go beyond the limits that protect human rights.

The increase in research involving people brought with it ethical concerns in order to safeguard them.

In order to clarify the parents about our intentions regarding this interview and the purposes for which the study was intended, before asking for their collaboration, we always had a small dialogue with them.

However, we always felt some embarrassment regarding their collaboration in our work, which we think is due to the theme.

10. Conclusions/Proposals

According to ABREU (2005), with regard to sex education in childhood, it is important and useful for several reasons. Many educators, professionals or not, still consider that the awakening of sexuality manifests itself in adolescence. It is a restricted view of the concept of sexuality and the need for sexuality education from birth. Some educational interventions are based on common sense and do not promote intentional and reflective methodologies. Due to communication difficulties, or lack of information and training, our answers are sometimes too technical or too childish.

With regard to the particularities of sex education and if we consider the ages of children in the first cycle, this principle must be further reinforced. Children of these ages are very dependent on significant adults. They are your reference and conduct models. Children are still not very autonomous in producing their own value judgments. This fact causes dissonant ideas and contradictory rules to generate confusion and not contribute to the purposes of support and
clarification that, in principle, should guide the basic constructs of sex education. MARQUES (2002)

During the writing of our work, there was an exhaustive concern to create coherent, precise, and clear texts in order to build a complete working tool for future consultations on the subject in question.

This path passed through bibliographical research, construction of the theoretical foundation and methodological procedures for subsequent implementation and application of the interview, and finally proceeded to the presentation, analysis, and discussion of the results obtained.

The first part of this study allowed us, in a way, to understand and deepen our knowledge in this vast world that is child sexuality (but, at the same time, so little explored and valued) and to support the second part, referring to the practical component.

Approaching it succinctly, sexuality is not only a natural fact, but also a cultural one, for which learning and information are essential.

Reinforcing this idea and expressing ourselves in evolutionary terms, in our society, sex education was transmitted through the silence of parents and educators. However, with the passing of time, human sexuality ceased to be referred to as the secret and the obscure and was considered an imperative and positive component in personal development, throughout the various stages of life, whose expressions contributed to personal well-being and relational (ALVERCA et al., 1992).

In the demystification of sexuality, the role of parents is crucial, as they are the first model for the child and, simultaneously, the first partners in the child's sensitivity (MAUCO, 1986).

Although the results obtained in our study have some limitations due to the fact that we used a small sample and because some of the interviewees did not provide very complete answers, we believe that these are satisfactory for the elaboration of the work that we initially proposed and for some small conclusions:

- The parents who make up the study sample are between 25 and 42 years old, most are female;
- With regard to marital status, a large percentage of respondents are married;
- Have Secondary Education qualifications, work for others, live in rural areas, and have between 1 and 2 children;
- From what we could find out, almost all parents reported having knowledge regarding child sexuality, and our objective is not to differentiate those who have more or less knowledge, so as not to produce value judgments;
- We could see that most of the doubts about children's sexuality are related to biological, psycho-affective, and social issues;
- We found that a feeling of “at ease” on the part of parents is predominant when they address the issue of sexuality with their children, as well as the satisfaction of being able to do so;
- In terms of strategies, the idea emerges that parents generally do not raise the topic of sexuality in a conversation with their children, but if the children do, they take the opportunity to clarify their doubts about the topic;
- We concluded that the male role focuses more on issues of strength and the love for football, while the female role is...
more connected with clothes, adornments, and the use of make-up, when considering gender differences;

- Parents give primacy to the family with regard to disseminating information about child sexuality. In second place appears the school, followed by the Church.

From what we inferred from our sample, and according to the references of the authors cited in the bibliographic review, mothers have a higher level of knowledge than fathers with regard to information about child sexuality. It is also noticeable that the two respondents from the older age groups are those who refer to difficulties in approaching sexuality issues with their children, a fact previously mentioned as not facilitating dialogue between generations.

As for the difficulties in approaching issues related to the sexuality of their children, it is interesting to note that the parents who mention difficulty have daughters, which could correspond to the fact that the parents feel uncomfortable talking about sexuality with their daughters: it is the mother who usually has the main role in this domain, according to VIEIRA (2006).

The general conclusion we reached with our research was the preponderance of a feeling of ease on the part of parents to address the issue of sexuality with their children, some of these because they have a great complicity with their children, others because they have training in the area of infantile sexuality. Through this conclusion, we can say that the interviewees are aware that it is within the home that information about the sexuality of their children must be conveyed.

Carrying out this work entailed difficulties, mainly due to the innovative nature of the study and the scarce bibliography, at least in Portuguese, but throughout its realization and, as we must point out, it was a rewarding task, and we believe we have achieved the objectives what we originally set out to do.

After going through the stages of elaboration of the research work, we concluded that its realization enriched us both personally and professionally.

Finally, we propose that this study serve as a starting point for future approaches to the subject, using a more representative sample, and that the knowledge obtained contributes to boosting the realization of projects in the field of Child Health, involving parents, educators, and, why not, the children?

Since we belong to a dynamic Higher School, with an active Research Unit, why not promote research in this area, in order to obtain intervention projects?

Another of the suggestions we make is that sexuality is always valued as a component present in the child’s life, from the beginning of its conception, also valuing anticipatory care as a health promotion and disease prevention factor, providing parents with the knowledge necessary for the best performance of their parental role.

We emphasize the need for all of us, health professionals, to be attentive to situations that can be corrected, and that could negatively affect the health of the child, acting promptly.

We believe that this reflection does not end here, as scientific studies are always an unfinished work; they promote new reflections, enriching the knowledge of those who elaborate on them and, perhaps, of those who consult them.
Sources of funding: Higher School of Health of Viseu, Portugal.

Bibliography

• GOMES-PEDRO, J. (2004). What does it mean to be a child? From genetics to behavior. Psychological Analysis, 1, 33-42.
• LOPEZ, F., & FUERTES, A. (1999). To understand sexuality. Lisbon: APF.
  Sexuality and Family Planning.
• MARQUES, A.M. (2002b). Affects and sexuality in preschool education: A guide for educators and trainers. Lisbon:
  Text Editora.
  Text Editora.
• Ministry of Education, Department of Basic Education. (1998). Curriculum organization and basic education programs –
  1st cycle (2nd ed.). Lisbon.
• MOITA, M. G., & SANTOS, M. R. (n.d.). Let’s talk about sexuality: A guide for parents and educators. Lisbon:
  Association for Family Planning.
  Psychology, 2, 83-91.
• PESTANA, M. H., & GAGEIRO, J. (2003). Data analysis for social sciences: The complementarity of SPSS. Lisbon:
  Editions Silabo.
  Health.
• RAMALHO, A. (2005). Writing studies and systematic review projects: With and without meta-analysis. Coimbra:
  Formasau.
  Analysis, 22(4), 737-745.
• RICHARDS, T., & RICHARDS, L. (2002). Non-numerical Unstructured Data Indexing Searching & Theorizing.
Qualitative Data Analysis Program (Version 6.0). Melbourne, Australia: QSR International Pty Ltd.

- SANDERS, P., & SWIDEN, L. (1995). To get to know me, to get to know you... Sexual Education strategies for the 1st and 2nd Cycles of Basic Education. Lisbon: Association for Family Planning.