

## Sexually Explicit Materials among Adolescents: Its Prevalence and Impact

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### ABSTRACT

*It is almost impossible to overlook the influence mass media has on the lives of individuals. It is all the more worrying when the consumers are children and adolescents. Given the fact that the Internet has entered every house and is on everyone's finger tips, access to anything and everything is plausible. Internet, if a source of education, is also a source of misconceptions. Lack of strict protocols makes it very easy for uploading and downloading information of any kind. The article is an attempt to present certain impacts of sexually explicit materials (SEMs) among adolescents as explained by various researches in the past. Early initiation of sex, teenage pregnancy, and STDs among teenagers are major concerns of reproductive health of children and adolescents. Increased health risk and increased risk of victimisation are just physical aspects. Beyond reproductive health and physiological aspects of adolescents, it is also important to know what shapes their sexual attitude and behaviour. Premature sexualisation, becoming desensitised towards high-risk behaviours and offenses, being involved in sexual offenses towards peers or other children, skewed gender perception, imbibing unrealistic perception of sexual relationships, and shaping the expectations about one's own body are a few damaging impacts. The article also shares the findings on the prevalence of SEMs among adolescents in the Delhi NCR region, India, collected by conducting a focus group discussion among male and female adolescents hailing from the different economic strata of society. The article is relevant to professionals working in the field of children and adolescents, parents, and other stakeholders.*

**Keywords:** *Adolescence, Sexually Explicit Material, Pornography, Sexual Development, Sex Education*

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## INTRODUCTION

A culture of silence on matters related to sex and sexuality has been one of the key features of the Indian socio-cultural milieu. In general, parents, teachers, guardians, and elders refrain from talking about sex related matters to their children, pupils, and younger ones, which may have serious consequences, in terms of sexual violence and abuse, and mal-adjustments in intimate relationships and marital life. While surveying Indian women and men between the age of 25 and 49 years, it was reported that 11% of women and 1% of men initiated their first sexual intercourse before the age of 15, whereas 39% of women and 7% of men initiated their first sexual intercourse before the age of 18 (NFHS-4, 2017). If we talk about sexually transmitted infections (STIs), 0.04% women between 15-17 years and 0.04% men in the age group 15-19 years are HIV positive, which is significant in absolute numbers. There might be several reasons for early sexual experiences and STIs among young men and women, but one of the least studied and most prevalent reason is early exposure to sexual content or sexually explicit materials (SEMs). According to the National Family Health Survey 2015-2016, there is an increase in the rate of exposure to different kinds of media among men and women (NFHS-4). Early initiation of sex, teenage pregnancy, and STIs among teenagers are major concerns of reproductive health of children and adolescents. Increased health risk and increased risk of victimisation are aspects of physical ramifications. Beyond physical aspects, it is also important to know what influences their sexual attitude and behaviour. In the absence of any other healthy and authentic source of information, children often rely on sexually explicit materials. These SEMs do have a bearing on premature sexualisation among children, their desensitisation towards high-risk behaviours, their involvement in sexual offenses towards peers or other children, their skewed gender perception, their imbibing unrealistic perception of sexual relationships, and shaping the child's expectations about one's own body.

Sexual self is understanding oneself as a sexual being (Peter & Valkenburg, 2010). The curious minds of the adolescents try to quench their doubts on sexual developments through the media, especially through SEMs/pornography and predominantly available online. Around 75% of adolescents surf the Internet to seek answers for their health-related issues and mostly sexual health (Rideout, 2001), with an adolescent spending an average of 12.5 hours on the Internet in a week (Chartier, 2008).

Studies reveal that pornographic sites are the most common sources of sex education among young men and women (Hunter, Figueredo & Malamuth, 2010). Often these sources do not convey the correct information, and are also incomplete as they do not convey the consequences of risky sexual activities (Pardun, L'Engle & Brown, 2005).

In the present research, SEM is taken as any picture, text, drawing, sculpture, motion picture film, or similar visual representation that is obscene for children, and which depicts nudity, sexual excitement, sexual conduct, sexual intercourse, or sadomasochistic abuse, or a book, magazine, or pamphlet that contains such a visual representation. Pornography and other related SEMs is a huge industry with an unbeatable profit, consumed across the globe. Its easy access and availability has made it prevalent among children and adults equally (Sun, Bridges, Johnson & Ezzell, 2014). Though these industries target adults, studies show that many of the adults have been exposed to or initiated consumption very early in their lives, especially during adolescence. A retrospective study reveals that 99% of men and 62% of women have initiated consumption of SEMs during adolescence (Svedin, Ackerman & Priebe, 2011), before reaching 16 years of age (Sabina, Wolak & Finkelhor, 2008).

There is an overflow of content available online, and even easily available; this raises several doubts about its ramification on the sexual lives and health of adolescents. Compared to any other age group, adolescents have made Internet a part of their lives, and SEMs available online can be accessed anytime and anywhere (Peter & Valkenburg, 2010). Many researchers have tried understanding the impact of SEMs on the growth and development of adolescents, especially on their mind and attitude. Specifically, while they grow up viewing content representing a lack of affection, gender equality, and consent (Brosius, Weaver & Staab, 1993).

## **THEORETICAL PERSPECTIVE**

While we understand SEMs and their impact, it is important to throw light on what influences human behaviour. Let us view SEMs in light of the theories of learning and development. The Freudian theory states that every child passes through various psychosexual phases, where the libido or the sexual energy is expressed through various body parts and in various ways. As we study Freud, there is an established association between psychosexual and psychoanalytical theory that explains pleasure seeking behaviours at every stage of development. In view of the consumption

of SEMs, the Freudian theory of sexual development and the theory of operant conditioning by B. F. Skinner can be associated. Skinner argued that pleasing or the benefiting consequence of any behaviour was likely to increase the frequency of that behaviour. Thus, a pleasure-seeking experience in the body, i.e. sexual arousal, may influence the frequency of consuming SEMs. As we move further and check Bandura's social cognitive theory, it explains how both internal and external factors affect the mental process. A huge social learning takes place involuntarily through various models in the immediate environment. It will not be at all incorrect to count the media as an immediate environment. A lot of human values, thoughts, and patterns are learnt from the representations and images in the media (Bandura, 2002). This theory is well supported by the theory of cultivation by George Gerbner: the more time an individual spends living in the world of television (in the current scenario other media), the more likely they are to understand 'the real world' in the context depicted by television. The transition occurring within and outside adolescents may influence the consumption of SEMs and its impact on their growth and understanding of the reality of sexual concepts in human life.

## REVIEW OF LITERATURE

### Prevalence, Antecedents, and their Various Sources

Exposure to SEMs is a global problem. In a study conducted among 503 adolescents in Hong Kong, 222 were reported to have viewed SEMs the previous year, ranging from watching just once to 18.4% watching it once or twice a week and 4% watching it almost daily (Toa, Ngau & Kan, 2012). A Swedish study among 2,015 male students aged 18 observed that 10.5% were frequent users of pornography, confirming their involvement in more risky behaviour than those who are not users (Svedin, Akerman & Priebe, 2011). A study conducted in the US among a sample of 810 adolescents ranging from 13-18 years old concluded that 50% of the adolescents seek sexual content (Bleakley, Hennessy & Fishbein, 2011).

Valkenburg and Peter (2013) concluded through their study that consumption of SEMs and its prevalence are influenced by the age and gender of the adolescents. It starts early among males than females (Wolak, Mitchell & Finkelhor, 2007), and older adolescents relate to the sexual content better than the younger ones, argue Vandenbosch and Peter (2016), and thus likely to initiate the usage early. The chances of

being accidentally exposed are more for girls than boys (Sabina, Wolak & Finkelhor, 2008), whereas 30% of boys are exposed accidentally (Wolak, Mitchell & Finkelhor, 2007). Exposure to SEMs is a gendered issue (Luder, Pittet, Berchtold, Akre, Michaud & Suri, 2011); the reasons for seeking SEMs might be different for both boys and girls (Bleakley, Hennessy & Fishbein, 2011).

There are only three possibilities of encountering SEMs by adolescents. They are exposed either accidentally, or by someone, or actively searched. A report from Kaiser Family Foundation Survey conducted by Rideout (2009) states that 70% of the 15-17 years old they surveyed, have encountered SEMs accidentally and never actively searched for it. Similarly, in a study covering 10-17 years old US nationals, 42% of them reported that they were exposed to pornographic sites, of which 66% never wanted to be exposed and were exposed fortuitously (Wolak et al., 2007). Bleakley et al. (2011) raise the role of media, family environment, and private access to television as factors influencing exposure to SEMs. Luder et al. (2011) in their study have cited the work of Duimel and DeHaan (2007); they suggest that even academic choice acts as an antecedent in case of exposure. They argue that academic choices that need the use of Internet had more chances of accidentally exposing SEMs to adolescents, than in the case of students of other subject choices.

### **Sexually Explicit Materials and their Impact**

The effect of media and sexual content in the media is wide ranging. Often, children and adolescents are unable to distinguish between reality and fantasies, and adopt maladaptive health behaviours, influenced by the depiction in the media (Escobar-Chaves, Tortolero, Markham, Low, Eitel & Thickstun, 2005). Researches have suggested that exposure to SEM may lead to conflicts or uncertainty in their sexual beliefs and values, as there might be a huge lag between what they have gathered from SEMs and what they have grown up hearing or learning from their parents, teachers, and others (Peter & Valkenburg, 2008). Harris and Christina (2002) list the effects of exposure to sexual content in the media as follows. Firstly, physical change, that is, arousal; secondly, change in the sexual attitude; and thirdly, change in behaviour.

The adolescents in the United States have been found involved in sexual activity at an early age and also being engaged with more than one sexual partner. Adolescents influenced by the media also engage themselves in high-risk health maladaptive behaviours, alcohol abuse,

violence, and eating disorders (Escobar-Chaves et al., 2005). They continue to highlight that not enough has been explored on how mass media contributes in developing maladaptive sexual attitudes. Brown et al. (2002), while measuring the frequency of adolescent's exposure to SEMs, reported that the higher the exposure, the higher is the chance of initiating sexual activities. Rojas and Braun-Courville (2008) studied 433 adolescents and reported that 55.4% have been visiting SEMs while using the Internet. They continued to prove implication of consuming SEMs on sexual attitude and behaviour of adolescents. They posited that adolescents exposed to SEMs were more likely to have more than one sexual partner, abuse substance, held more sexually permissible attitudes, and were also involved in high-risk sexual behaviours. Certain retrospective studies concluded that males and females with Internet access and exposure to SEMs, between 17-20 years of age, were reported to have initiated oral sex and first sexual intercourse, rather than individuals with no access to the Internet or SEMs (Kraus & Russell, 2008 and Collins, Elliott, Berry, Kanouse, Kunkel, Hunter & Miu, 2004). The early exposure caused children to initiate oral sex and first intercourse as early as at 12-14 years of age (Brown & L'Engle, 2009). Some researchers studied 12-17 years old till they were 15-20 years, and found that teens who were exposed to a high level of sexual content on the traditional media were twice as likely to experience pregnancy as those who were exposed to lower levels of sexual content (Chandra, Martino, Collins, Elliott, Berry, Kanouse & Miu, 2008).

Research suggests that exposure to SEMs may impact sexual attitudes of adolescents, which may develop instrumental attitudes, i.e., viewing sexual relationships as casual games and to be carried out for only ones own pleasure, with affection and emotions being overlooked (Peter & Valkenburg, 2010). There is an established relationship between adolescents' exposure to SEMs, especially online, and a developed recreational attitude towards sex; this they say is due to the perceived reality of the SEMs consumed (Peter & Valkenburg, 2006).

It can be more worrisome to know that exposure to SEMs was related to perpetration of sexual harassment and even the scripts of the SEMs may reinforce in adolescents male dominance and female submissiveness, thus predicting less reformed gender norms (Brown & L'Engle, 2009). The adolescents under the influence of media may show greater reception and acceptance to problematic gender stereotypes and sexual norms, and may view women as sexual objects (Ward & Friedman, 2006). There are high chances of females equating their self-worth, particularly in terms

of sexual worth and physical appearances with the representations in the SEMs (APA, 2007), also influencing how men treat women in real life.

The most dangerous impact can be SEMs encouraging sexist and objectifying attitudes among women, thus making the female consumers more vulnerable to sexual violence (Flood, 2009). An Italian study is univocal in this argument as they could establish a relationship between watching pornography and victims of sexual violence (Bonino et al., 2006). Consuming SEMs may put children and adolescents at risk of sexual abuse, as many perpetrators use pornography materials as a strategy to perpetrate abuse on children, as children already consuming SEMs may find it difficult to resist or avoid or escape abuse (Russell & Purcell, 2005).

Certain research (Foubert, Brosi & Bannon, 2011) further explain that SEMs may even weaken the ability to voice an opinion as a bystander while witnessing a sexual offence. Consumption of more violent sexual content may result in being less sensitive towards rape victims (Linz, 2010).

The purpose of understanding adolescents and their exposure is not to condemn them and label them as morally wrong. Rather, as shared by Savin Williams and Diamond, cited by Peter and Valkenburg (2010) in their work, the consumption of SEM among adolescents should be perceived in the context of their sexual development and a phase of their heightened curiosity.

## RESEARCH GAPS

There is a good amount of literature available on implications of SEMs on children and young adults. However, there is a dearth of research studies done in India. The dominant existence of foreign literature gives very little scope to understanding the issue from an Indian perspective. Further, hardly any literature was found in recent years; thus, the real picture of recent trends may not be captured. More often than not, the methodology used does not include a participatory approach. The studies reviewed are silent about the strategies used to take the participants into confidence. Thus, interviewing and administering the questionnaires are questionable in terms of rendering complete and correct information. This also raises ethical concerns of intimidating the participants by asking such sensitive questions.

## OBJECTIVES

From the existing literature, there arose four research questions (mentioned below) for the Indian adolescents. The article further is a summary of the qualitative investigation conducted, with the adolescents attempting to achieve the following four objectives:

- To gauge the prevalence of SEMs among school-going adolescents in urban India.
- To study the differential exposure to SEMs with difference in age and gender of adolescents.
- To study the antecedents influencing the consumption or non-consumption of SEMs among adolescents.
- To understand how adolescents are introduced to SEMs and what are the various sources in trend are among the adolescents.

## RESEARCH METHODOLOGY

### Operational Definitions

- *Sexually Explicit Materials (SEMs)*: “Sexually Explicit Materials” means a picture, photograph, text drawing, sculpture, motion picture film, or similar visual representation that is obscene for children, and which depicts nudity, sexual excitement, sexual conduct, sexual intercourse, or sadomasochistic abuse, or a book, magazine, or pamphlet which contains such a visual representation.
- *Adolescents*: Individuals falling in the age group 10-19 years, as per the World Health Organization.
- *Antecedents*: Factors influencing consumption or non-consumption of SEMs.

### Nature of the Study

The research presented is a qualitative study. It was designed as a baseline study, as a requirement to carry out and support a big scale quantitative study. A qualitative design was essential, viewing the complexities of the topic. Themes like sex, sexuality, and especially consumption of SEMs are not easy to gather information on. Rather than a questionnaire, a qualitative methodology helped collect information directly and indirectly, capturing between-the-line information, feelings, apprehensions, and emotions of the participants, and also keeping the participants comfortable by participating in a group, along with their peers.



## Sampling Design

The sampling was done at two levels; firstly to identify schools and secondly to narrow down on the list of participants. A non-probability convenient sampling technique was employed to select schools to approach, and a random sampling technique was used to finalise the participants.

## Universe

The universe of the study are the adolescents in the Delhi NCR region, India.

## Range of Age

Existing literature in the area, reports exposure to SEMs as early as 10 years, with an average age of 15 years. Thus, the researcher narrowed the sample range to students of grades 9 to 12, with an approximate age of 14 to 17 years.

## Sampling Unit

Schools are the best place to find adolescents of the said age group. The researcher approached students of three schools in Ghaziabad, Delhi NCR, India, serving three different strata of income groups. With the permission of the schools, a total of eight groups (Table 1) were formed; each group was homogeneous in terms of school, age, grade in school, income, and sex of the participant. Each group consisted of eight to ten students.

**Table 1: FGD Groups – Grade-, Sex-, and Income-Wise**

<i>Groups</i>	<i>Grade</i>	<i>Male/Female</i>	<i>Income Class</i>
Group A	10 <sup>th</sup>	Males	Middle and higher
Group B	9 <sup>th</sup>	Females	Middle and higher
Group C	11 <sup>th</sup>	Females	Middle and higher
Group D	12 <sup>th</sup>	Males	Middle and higher
Group E	12 <sup>th</sup>	Males	EWS
Group F	12 <sup>th</sup>	Females	EWS
Group G	10 <sup>th</sup>	Males	EWS
Group H	9 <sup>th</sup>	Females	EWS

Sources of Data Collection.

- *Primary Sources*: The randomly selected adolescent participants.
- *Secondary Sources*: Books, journals, and empirical studies from online database.

### **Tools and Methods of Data Collection**

A Focus Group Discussion (FGD) seemed most suitable to achieve the objective of the study. Thus, it was designed and employed in a manner in which maximum information could be gathered.

## **FINDINGS AND DISCUSSION**

### **Prevalence of Consumption of SEMs among Adolescents**

To understand prevalence, the discussion was directed at comprehending whether consumption of SEMs exists among adolescents, whether it increases or decreases with increase in age, and whether it is similarly prevalent among both males and females. The participants were supposed to respond to the question “How many out of ten adolescents in each grade do they think were exposed to and continue to consume SEMs?” Participants in each group shared their perception of their peers from grades 9 to 12, and also how prevalent it is among both males and females separately. Table 2 describes that consumption of SEMs increases with age. “I guess no one is away from these things, in some benches of senior classes, these are daily discussions,” said a 12<sup>th</sup> grade student from group A. It also shows that consumption is prevalent among both boys and girls; however, across any grade a greater number of males consume SEMs than the females of the same grade. Few younger females i.e. 9<sup>th</sup> grade participants displayed disgust while discussing about SEMs. It is essential to note that participants from groups F and H belonging to the EWS category do not find much difference in consumption with change in age and sex. This explains that there is a possibility of children from these categories being exposed to SEMs very early in their life, may be before grade 9. One might associate many reasons with this finding: parental control, early exposure to sexual content in their environment, early perception of adulthood, and so on. A detailed study may help us know the association between consumption and income category of adolescents.

Table 2: Perception on Prevalence (out of 10) of Consumption of SEMs across Grades 9 to 12 and Each Sex

<b>GRADE</b>	<b>Sex</b>	<b>Group A</b>	<b>Group B</b>	<b>Group C</b>	<b>Group D</b>	<b>Group E</b>	<b>Group F</b>	<b>Group G</b>	<b>Group H</b>
12	Males	10	9	10	10	10	10	10	9
	Females	8	8	8	9	9	10	7	9
11	Males	9	9	5	10	9	10	10	9
	Females	7	8	9	9	9	10	7	9
10	Males	8	8	8	10	8	10	7	9
	Females	5	5	5	8	8	10	4	9
9	Males	6	6	7	8	8	10	10	8
	Females	4	3	4	5	7	8	5	7

## **Antecedents to Exposure or Non-Exposure to SEMs**

Further discussion was to study the predictors to exposure or consumption of SEMs among adolescents. Personal space with phone, owning phone or laptop, parenting style, academic pressure, and religiosity/spirituality were mentioned as some of the antecedents to exposure to SEM. “Every kid has phone of his own these days, or there are cafes which allow you use their system in as low as Rs10 an hour,” said a grade 10 student. Adolescents owning cell phones were a major antecedent. Some participants recognised parenting style as a contributing factor. Children raised under a permissive approach, with very minimal interference or control from parents were found to be more susceptible. “Some parents have got their children phone so early and never even check what they are doing with it. On the other side some are so strict that they don’t trust on their children at all,” shared a grade 11 girl participant. A majority shared that academic performance cannot be considered a predictor; rather, pressure of exams or assignments were stated as possible factors that reduce the consumption during that time. Students shared that “often when the exams are approaching or there are many assignments there is no time, also SEMs are avoided as it may distract them while preparing for exams”. Increased religiosity and spirituality were also listed as plausible factors for an adolescent not being involved in SEMs. A student of grade 12 exclaimed, “It’s a sin in our religion”. The concept of sin and relating to it was pointed out as a factor for non-consumption of SEMs. A detailed quantitative study may help build association, and be an aid in gauging the various factors leading to or protecting adolescents from exposure to SEMs.

## **Introduction of Adolescents to SEMs**

It is crucial to know the source of introduction to SEMs among adolescents. Identifying these sources can help in preventing the very first exposure. The participants came up with various responses when asked, ‘How do you think the adolescents are introduced to SEM for the first time?’ The

responses are categorised in Table 3. A majority of the participants stated that their peers are the source of introduction to SEMs and similar content. Following this are the various advertisements that pop up while working on the Internet and the leads they suggest. The Internet, social media, YouTube, and media are all clubbed into this category. Often, one search after another, following even music (with sexually coloured lyrics) and movies, further leads to SEMs. Some participants recalled incidences of getting SEM links on their phones and Facebook chat box. Often SEMs are downloaded accidentally while downloading movies/games, observed some participants. The pirated sites, giving free download options are often misleading. Participants reported that many a times they are fooled by fake titles for online series and channels. Participants from only one group communicated that out of curiosity and doubts adolescents try searching for sexual content online by themselves.

### **Various Sources of SEMs among Adolescents**

The participants gave no second thought to blaming the ‘unlimited Internet plans’ for the rampant increase in the consumption of SEMs among adolescents. Table 4 lists traditional sources, like pen drives/CDs and magazines, which are still in use. Some adolescents rely on their TV channels as well. A majority of the participants find that SEM websites and YouTube are the major sources for searching among adolescents. The participants, especially from the senior grades, shared that though many sites are banned, there are certain ways known to many of their peers to easily hack and consume SEMs, even from the restricted sites. Students of various groups mentioned proxy sites and changing VPNs to use banned sites.

Table 3: Sources of Introduction of SEMs among Adolescents

<i>Source of Introduction</i>	<i>Group A</i>	<i>Group B</i>	<i>Group C</i>	<i>Group D</i>	<i>Group E</i>	<i>Group F</i>	<i>Group G</i>	<i>Group H</i>
Peer	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Senior Friends	Yes	Yes	-	-	-	Yes	Yes	-
Internet pop advertisements and leads/Facebook	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Accidentally downloaded while downloading movies/games	Yes	-	-	Yes	Yes	-	-	-
Self-search	-	-	-	-	-	Yes	-	-

Table 4: Sources of SEM Content among Adolescents

<i>Source of SEM Content</i>	<i>Group A</i>	<i>Group B</i>	<i>Group C</i>	<i>Group D</i>	<i>Group E</i>	<i>Group F</i>	<i>Group G</i>	<i>Group H</i>
SEM websites	Yes	Yes	Yes	Yes	Yes	Yes	Yes	-
Pen drives/CDs	Yes	-	-	-	-	-	-	Yes
Magazines/books	Yes	-	Yes	-	-	-	-	Yes
YouTube/social media	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
TV shows	Yes	Yes	Yes	-	-	-	-	-

## CONCLUSION

Sex media is the most profitable industry and thus, most rampant, and almost impossible to completely shut down. It is highly prevalent, with almost no depiction of the risks and responsibilities involved. Created around fantasies and myths, these are often absorbed as truth by children and adolescents. These adolescents believe them as real and grow up with the same expectations and attitudes. Increasing juvenile crime rates, especially sexual offences, early initiation of sexual intercourse, teenage pregnancy, and STIs among young people, if not entirely, can be blamed on the portrayal of sex in the media. Emergence of sexual interest and activity is part of sexual development of adolescents. However, early initiation to sex and its portrayals may involve a risk for which the adolescents might not be prepared.

The consumption increases with age and more males are into SEMs than females. It is important to study the possible reasons for the difference in use by both genders. Difference in freedom of life and restrictions can be possible reasons for this difference in usage.

SEMs are rarely self-explored and mostly introduced by the peer. The role of peers is to be essentially studied and utilised for ensuring sexual health and development. The role of peers is significantly recognised in building positive changes among fellow adolescents. Programmes should be developed for adolescents to transform them into peer moderators for healthy habits.

A thorough study of online and offline media is to be conducted, with examining adolescents as the audience. The most common source is the Internet. The leading links on the Internet, and pirated sites for downloading free movies and games are also the sources. The policy makers and public health professionals should try utilising the digital media as a source of disseminating appropriate and correct information and reducing the circulation of myths and misconceptions. A stricter protocol till then is required to keep a check on children and adolescents accessing these sites.

## SUGGESTIVE SOCIAL WORK INTERVENTION AND RECOMMENDATIONS

Any intervention programme in the field should focus on both prevention and protection. The author here suggests four Cs as the main elements of intervention strategy which are crucial to a healthy physical, sexual,

and mental development of adolescents. These are CREATE, CHECK, COACH, and COUNSEL. Table 5 expands the four Cs and describes how these can be utilised as intervention strategies, followed by certain recommendations that can help lay a better base for the execution of the suggested elements of intervention.

**Table 5: Four Cs of Intervention to Prevent and Protect Adolescents from Consumption of SEMs**

<i>Strategy</i>	<i>Target</i>	<i>Objective</i>	<i>Intervention Activity</i>	<i>Responsibility</i>
CREATE an equipped environment	Parents, teachers, elders, peers	To break the stigma and equip the elders with skill and knowledge on sex and sexuality.	Creation of IEC materials (print or digital), organising workshops, making it part of training of teachers.	Social workers and para health professionals
Keep a CHECK on the existing channels of SEMs	Digital platforms, channels, and websites	To prevent the entry of children and adolescents into adults only sites.	Issuing stricter protocols for accessing such sites. Keeping a check on proxy creation.	Government
COACH with age-appropriate sex education	Children and adolescents	To provide at every stage the appropriate knowledge and respond to their curiosity in a scientific manner, thus reducing chances of seeking answers from incorrect sources and SEMs.	Include sex education and its content into formal education. Make it part of curriculum right from kindergarten; build age-appropriate content and give it to trained teachers who do not shy away, but rather who are ready and equipped to share the correct information.	Policy makers and education board



<i>Strategy</i>	<i>Target</i>	<i>Objective</i>	<i>Intervention Activity</i>	<i>Responsibility</i>
COUNSEL those consuming	Child/adolescent into consumption of SEMs	To help any child/adolescent stop further consumption of SEMs and try to help change the misconception built around it.	School counsellors identifying any child in need of help and bringing in behavioural and cognitive changes in the child.	Teachers, parents, and counsellors

*Comprehensive over Abstinence-Only Sex Education:* When attempts are made towards sex education, they are limited to a disease-prevention and abstinence-based approach, covering information about the genitals, girls' menstrual health, and the risks of sexual intercourse, including adolescent pregnancies. Teaching about bodies, which is traditionally taught towards the conclusion of primary or secondary school, is filled with apprehension, with students banned from asking questions and topics deliberately ignored or reduced to exam-worthy questions (Malik & Shukla, 2020). The author recommends a comprehensive sex education. A comparative study with adolescents on the sexual health risks revealed that abstinence-only sex education had no significant effect on the sexual health of adolescents. Whereas comprehensive sex education reduced the likelihood of adolescents engaging in sexual intercourse, preventing STIs (Kohler, Manhart & Lafferty, 2008). In the context of young people and sex, the most effective way of achieving HIV risk reduction is through the provision of sex education in schools that speaks of the "real world" in which young people live rather than of an "ideal world" in which some people would like to see them live (Piot, Bartos, Ghys, Walker & Schwartlander, 2001, p. 172). With the Internet loaded with an ocean of information on sex and sexuality, and SEMs being the prominent source of information, a comprehensive approach is essential to prevent as well as correct the misconceptions gathered from these sites. An abstinence-only approach hardly gives an opportunity to students to openly put forth their doubts. A comprehensive approach shall even help identify children and adolescents already a victim of consumption of SEMs and develop intervention plans to help them come out of these habits of consumption.

*Mass Conscientisation and Creating Political Back Up:* The announcement of initiating sex education in 2008 for students from the 9<sup>th</sup> grade onwards, by the Maharashtra Government, caused a huge stir in

the Assembly with MLAs claiming that the action was part of a Western plot to corrupt the local culture (“Maharashtra puts sex education on hold”, 2008). A majority of political and religious leaders are opposed to sex education in schools. The Indian Parliament’s Rajya Sabha formed a committee to look into the Adolescence Education Programme (AEP) of 2007, an initiative by the Ministry of Human Resource Development in collaboration with National AIDS Control Organisation (NACO). The committee adamantly opposed the implementation of sex education at the school level, believing that AEP could harm India’s future by polluting young and impressionable minds and unavoidably encouraging promiscuity. The research also raised major concerns about the study materials and kits developed for the AEP’s deployment in Indian schools. While criticising the rationale for implementing any AEP at the school level, the report stressed the importance of effectively communicating the message of no sex before marriage to teenagers, describing it as immoral, unethical, and unhealthy (Rajya Sabha Committee on Petitions, 2009). The government and civic society should convene a national discussion to reach an agreement on this problem across all segments of society. The study makes a compelling case for developing adequate policies for family life education, to meet the unmet need for scientific learning/training on sexual life issues among adolescents. It should be a national goal to provide competent and culturally sensitive sex education at the school level. This requires mass conscientisation. The public is to be INFORMED of the need, CONSULTED to develop the plan, INVOLVED in planning, and COLLABORATED with effective planning, thus being EMPOWERED to take care of their own well-being (IAP2 International Federation, 2014). With phones and the Internet in the hands of every child, the public has to be awakened on issues like SEMs and how badly it can impact a child’s development, thus voicing the need to create stricter protocols to prevent children from visiting restricted sites and SEMs.

*Integration with School Curriculum:* The latest National Education Policy of India 2020, a long awaited one, revised almost after three decades, is applauded for its flexibility and inclusivity; however, making sexual and reproductive health, sex education, and body image a part of the curriculum is mostly ignored. Sex education is absorbed under the theme “ethical and moral reasoning” that hardly lays guidelines to prepare students for future judgement with matters surrounding harassment, women safety, prevention from STIs, and so on. It will be incorrect to say that nothing has been ever done towards bringing in sex education

for children and adolescents. The Adolescence Education Programme (AEP) by NACO highlighted sex education in schools. The Programme aimed to achieve the following learning outcomes: (i) make learners aware of major concerns, such as adolescent development, HIV/AIDS, and drug (substance) abuse; (ii) instil in them a positive attitude towards these concerns; and (iii) assist them in acquiring life skills to avoid risky situations, such as HIV infection and drug abuse, and develop a healthy and responsible behaviour (NACO, 2007). Another most recent initiative is the Operational Guideline on School Health Programme under Ayushman Bharat, a joint initiative by the Ministry of Human Resource and Ministry of Health and Family Welfare of Government of India, an initiative to promote health of children; along with the physical health aspect, it also includes sexual and reproductive health, gender-based violence, prevention from STIs, and internet safety, bullying, and so on as the topics of focus (Government of India, 2018). However, there is no evidence of it being executed so far and also on how comprehensive it is. There are various programmes that exist on a rudimentary level; integrating these with the school syllabus is crucial. The CBSE board has tried integrating certain themes of sex education into the texts, as well as life skill education. However, the texts fail to share a holistic understanding about sex and sexuality, and life skill classes are often taken for granted as free periods (Varghese, 2017). Rather than creating extra programmes outside the syllabus of school curriculum and burdening the school system, techniques and strategies should be developed to inculcate concepts of sex education into the common school syllabus. For example, the chapters in science, social science, English, and Hindi textbooks may carry information on the theme, backing it with quarterly, or half-yearly workshops from experts in the field. In addition, a school that is almost completely dependent on online mode of communication should be prepared to assist their students on safety rules to abide by while being on the Internet and openly confront issues like restricted sites and SEMs.

*Equipping Parents and Teachers is the Best Avenue:* Integration with school curriculum needs greater preparation. Well informed parents and skilled teachers are crucial for the success of the programme. Studies reveal that a majority of the parents and teachers support sex education but find themselves not equipped enough to facilitate. In addition, many of them were found to be less aware and sensitive on the issue (Varghese, 2017 & Jerves et al., 2014). Varghese (2017) cites from the work of Soper and Trista'n (2004) that parents and teachers even feel that children receive

information on sex and sexuality from so many other avenues that they refuse to talk about the subject, thus giving parents an impression that their kids know everything. Parents have also reported feelings of shame while talking about these matters. It is important to understand that while considering parents and teachers as facilitators, both their attitudes and aptitudes are to be worked on. Including concepts of sex education and the pedagogical skills required into the curriculum of teacher training programmes is the need of the hour. Government should join hands with private NGOs in the field and schools to carry out regular awareness and sensitisation programmes, sharing IEC materials for parents. This even calls for a development of a programme focusing on broad concepts of parenting, thus assisting in building a healthy parent-child relationship and also helping parents become more approachable to their children, thus trusting them to be the best source of information pertaining to life, sexuality, relationships, development issues, and so on. Especially in the time of online education system, parents are to be guided on how to keep a check on children visiting restricted sites, without curtailing their freedom and being overly monitoring.

‘Overcoming stigma and educate to be prepared’ should be the motto. An equipped and approachable adult, comprehensive sex education, stricter check on the content of online and offline media and its access to children, and timely counselling are the keys to the problem. It is easy to list; however, bringing it into reality is not a walk in the park. It needs changes and transformation at every level, from policy making to personal lives. SEMs among adolescents has to be recognised as harmful and needs be attended to urgently. No talks on it, shunning away while children approach with their doubts on sex and sexuality, and just advising them to abstain with no appropriate information will solve no purpose.

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