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ORIGINAL ARTICLE

Are Social Media a problem or a tool? New strategies for sexual education[☆]

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KEYWORDS

Sexual education; Technology; Sexual development; Sexual health; Social media; Adolescents Summary The Social Media and online communities have become important communication channels for youth and the massive use of these technologies by new generations gave rise to an international debate regarding the potential effects on relationships and sexuality. The aim of this paper is to study advantages and limits of Social Media, as formal and informal source of information on sexuality, focusing on their impact on youth and professionals involved in sexual education programs. A review of scientific literature from January 2006 to May 2017 was performed. Despite adolescents are very interested about sexual health, the lack of clear and scientific-based online sex education information may lead to the spread of confusion and anxiety on sexuality. For this reason and because of Social Media growing diffusion, health organizations recommend the use of technology by Health Care Professionals, even if data shows their attitude to use it in private, but not in a professional context. Most of the online sexual education interventions are focused on adolescents' risk behavior prevention instead of sexual well-being promotion. Considering the usefulness of Social Media in sexual education, a technological tool planned by the Institute of Clinical Sexology, Rome to be used during sexual education sessions is presented. A critical approach development should be provided in the future in order to promote a safer use of Social Media in sexual education interventions, where emotions and feelings, and not only the increase of information, are deepened by young people together with professionals.

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Introduction

Social Media (SM) and online communities have become important communication channels for youth.

The massive use of these technologies by new generations gave rise to an international debate about the possible effects on relationships and sexuality. On one hand, the use of new technologies proves to increase communication and participation beyond the limits imposed by time-space and culture. On the other hand, there is a link between use of new technology and dysfunctional communicative dynamics in specific personal traits (Reiner et al., 2017), such as alienation from school, family and prosocial peer groups, avoidance face-to-face interaction, or choice the Internet as a functional alternative channel to fulfil interpersonal needs (Sheldon, 2008). Nowadays safeness or harmfulness of increasing SM use among adolescents' is still unclear.

The aim of this paper is to discuss advantages and limits of SM and Internet use as sources of formal and informal sexual health contents. This review is focused on the adolescent use of and the professional attitudes toward technology and the state of the art of new technologies as a sex education delivery tool.

Materials and methods

The review was based on the results of research on Medline, Pubmed, EBSCO, Cochrane Library, Scopus and Web of Science on relevant articles published from January 2006 through May 2017. Main words used, including asterisk, were "Social Media" AND "Sex*", "Internet" AND "Sex*", "Adolesc*" AND "Sex*", and "Technology" AND "Sex", "HCP" AND "Technology". Additional research included "Sexual Education", "Sexual Health".

Results were reviewed and the most relevant studies were selected in order to the aims of this work. References and article's citations were reviewed to find additional papers. Study data and Authors' positions were analyzed to determine the ''state of the art'' and to clarify the pragmatic challenges for educators.

Adolescents and technologies: risks and benefits for sexual health

SM platforms such as Short Message Service (SMS, chat and text) and Social Networking Sites (SNS) contribute to develop adolescent identity, self-expression, intimate relationships and social well-being (Moreno, 2011) and to obtain health information, in particular related to sexuality (Lim et al., 2014).

The wide use of technology is also characterized by some risks, such as cyberbullying or harassment, sexting, depression (O'Keeffe et al., 2011) and involuntary exposition to unwanted sexual contents (Smith et al., 2016). Adolescents' exposure to casual and unwanted online contents, as well as pornographic and violent material, has been linked to a desensitization from sexual violent stimuli and a more permissive attitude towards high-risk sexual behaviors (Yao et al., 2010). The SM users are frequently exposed to these stimuli from a safe and remote position and the high

frequency and the distance provided by virtuality could both increase the desensitization process.

Moreover, virtual experiences where subjects are objectified (e.g. pornography, video games) may contribute to gender stereotypes internalization process (Erchull et al., 2013) and negatively influence teen's level of sexual assertiveness or agency, which are protective factors against sexually risky behaviors, including unwanted sex (Curtin et al., 2011). From the above mentions, the relationship between adolescents and technology emerges as a controversial issue. However, technology, Internet and linked services are just tools and the related harm is use-dependent (O'Keeffe, 2016).

Both young and adult people education is crucial to get the best use of such tools. Therefore, education programs should be addressed on providing a connection between youth virtual experiences and their feelings and emotions from a critical point of view.

Technology as a tool for Health Care Professionals and sexual education

For its wide spreading diffusion, health organizations recommend the use of technology by Health Care Professionals (HCPs), even if data on HCPs attitude towards SM and technology highlighted their tendency to use it in private, but not in a professional context (Rolls et al., 2016; Fuoco and Leveridge, 2015). The most common reasons reported are: employers monitoring or blocking SM sites at work, difficulty using SM, and belief that SM are not useful to enhance work performance. Nevertheless, the specific use of technology among young people offer a great possibility for sexual health education programs, such as: ease of access and diffusion, low costs, and the possibility to participate without having to be physically reached (Madden et al., 2013).

Although there is a lack of literature in this area and a lack of evidence of long-term impact on sexual behavior, sexual health promotion can be delivered through SNS (Bull et al., 2012), Web-based CD-ROM (Guse et al., 2012), computer technology (Noar and Willoughby, 2012), digital storytelling (Guse et al., 2013) online mobile sexual education (Ramos et al., 2015) and Internet in general (Chavez et al., 2014). The use of these tools seemed to be effective in reducing sexual risk behaviors, increasing knowledge and susceptibility to STI HIV/AIDs, condom attitudes and communication, self-efficacy regarding safer sex, more favorable attitudes towards waiting to have sex in adolescence and abstinence (Bailey et al., 2015).

However, these interventions have controversial aspects to consider, first of all their accessibility. Although online tools showed huge potentiality, as reaching people who may not have the ability or the desire to participate to traditional face-to-face classes (Farnsworth and Bevis, 2006), providing a greater level of privacy (Newton and McCabe, 2008), they showed some limits. Unfortunately, computer and online access cost and the need of a private place where connecting in order to participate, may be a barrier to access such programs. Moreover, current web-based programs seem to be less alike promoting emotional awareness (Schalet et al., 2012). Another issue to be addressed is that HCPs need a specific training to use technology as an effective

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