

LJUBLJANA SCHOOL OF BUSINESS

SUSTAINABLE DEVELOPMENT UNDER THE CONDITIONS OF EUROPEAN INTEGRATION

Collective monograph

Part II



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This collective monograph offers the description of sustainable development in the condition of European integration. The authors of individual chapters have chosen such point of view for the topic which they considered as the most important and specific for their field of study using the methods of logical and semantic analysis of concepts, the method of reflection, textual reconstruction and comparative analysis. The theoretical and applied problems of sustainable development in the condition of European integration are investigated in the context of economics, education, cultural, politics and law.

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Chapter 1. EDUCATION, PEDAGOGY AND PHILOLOGY

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THE PROBLEMS OF SEXUAL EDUCATION OF PUPILS IN FOREIGN PEDAGOGY AT THE END OF THE XX – BEGINNING OF THE XXI CENTURIES

Abstract. In the article, a comparative analysis of sexual education in the leading world countries is made. Four main periods of sexual education genesis have been distinguished, their features and characteristic emphases in the formation of students' competences during each of these periods have been analyzed. The importance of sexual revolution in changing the approaches to solving the problems of sexual education in educational institutions is emphasized. Different approaches to the content, forms and technologies of sexual education, from abstinence from sexual relations before marriage to radical sexual education with the domination of sexual socialization, have been singled out. The key problem in the content of sexual education development, namely the identification of the relationship between the study of the issues of sexuality and the idea of teaching the abstinence from premarital sexual contacts, have been determined. The necessity of using certain elements of foreign experience in educational institutions of Ukraine has been substantiated.

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Introduction.

By the end of the twentieth century, significant changes took place on the geographical and political world map. A united Germany was created, the Soviet Union, Czechoslovakia and Yugoslavia collapsed, resulting in more than 20 new independent states appearing on the European map, expanding the European Union and NATO. Society started its next phase of post-industrial development - informational. Computers, mobile phones, the Internet, social networks, etc. appeared. The feminist movement, the decrease in the birth rate, the liberalization of sexual morals, the reduction of the controlling role of the family, the reduction of the role of religious prohibitions, the reduction of fear of unwanted pregnancy and sexually transmitted diseases contributed to the intensification of female sexual activity, the emancipation of female sexuality. As a result of the sexual revolution of the 1960-1970s, the standards of sexual morality gradually changed in society, the social control of pre-marital behavior of young people gradually changed, giving young people the opportunity to independently determine the appropriateness of entering into sexual relations etc. Educated young people did not perceive the existing values that their parents followed, which influenced the perception of the traditional model of interpersonal relationships.

The old morality, which reduced sexual relations to marriage, was viewed by many liberally-minded Americans and Europeans not only as obsolete but also untrue. The propaganda of the values of the "sexual revolution" has led to the separation of youth from the traditional wisdom and culture of humanity, from the experience of adults, enabling them to learn from their own bitter experience, pain and mistakes. This was accompanied by a worldwide AIDS problem.

1. Ways of implementing sexual education in countries around the world.

Today, in Europe and in the whole world, there is a clear shift in the system of human values:

- there is a legalization of same-sex love, propagation of **same-sex families**, that is, a homosexual family in the world is normal, and the traditional family where mother and dad are is a relic of the past;
- with the separation of sexuality and reproduction, justification and normalization of non-reproductive sexuality (masturbation, oral sex, other sexual techniques that do not lead to fertilization) took place;
- the gender impersonation of a child, or the so-called "eradication of gender stereotypes". In many, above all European countries, along with traditional male and female, a third, an *indefinite gender*, appears;
- the possibility of adoption of children by same-sex married couples: more often abroad there are children's fairy tales about the boy and his dad, who has a close friend who then becomes his second father or a princess who throws away all the admirers and eventually she lives with her girlfriend;
- many young people become participants in the child-free movement (child-free free from children);
- leaflets of the German Ministry for Family Affairs call on parents to do a sexual massage for children aged from 1 to 3 years;
- another creation of this federal center is a book with songs for children from 4 years old, which has texts that stimulate masturbation;
- immediately after legalizing the adoption of children by same-sex couples, in Europe today the legalization of the incest is being discussed and presented it as a European "gender norm". The norm is an intimate between father and daughter, mother and son, brother and sister, as well as all the relatives, including blood relatives. Legal incest in Sweden, Denmark and Switzerland is actively promoted;
- in the British Journal of Medical Ethics, in the article "Postnatal abortion. Why the child has to live? "On February 23, 2012 by the authors of Alberto Jubilini and Francesca Minerva, the arguments are based on the right of parents to kill their young children (up to two years old): for two years, the person has not yet been formed, and this is not a murder, but a "postpartum abortion."

On this backdrop, individualization and privatization of sexuality, the transition from external social control to individual self-regulation take place. Democratic society refuses strict regulation and unification of sexual life, preferring pluralism and tolerance. Sex ceases to be just an instrument for the continuation of the family; now it has other tasks - from satisfaction to higher self-esteem.

All of the foregoing has led to serious social cataclysms related to interpersonal, marital, and family relationships. For example, at the end of the twentieth century – at the beginning of the 21st century, the birth rate among girls aged 15-19 remained high in Great Britain (30 per 1000). The United Kingdom has the highest adolescent pregnancy rate in Europe. The mother of every tenth child born in England is a teenager. The study also found that 70% of women who gave birth when they were adolescents experienced domestic violence.

Among the young Britons who reported sexual intercourse in adolescence, 80% did not use any form of contraception, and half of those under 16 years of age and one third of those aged from 16 to 19 years did not use any contraceptive during their first sexual intercourse. 10% of British teenage mothers are married. Recent studies by the London analyst *Data Monitor* have shown that in Britain among adolescents, only 12% of girls and 8% of boys are afraid of being infected with AIDS, compared with 35% and 28% in 1993. The same applies to the vast majority of students in European countries.

According to the ISSP (International Social Studies Program) in Germany, more than 7 000 minor girls gave birth to a child in 2005, which is 45% more than in previous years. During the same period, the number of minor mothers who have not reached the age of 14 has doubled from 77 to 161. In addition, the number of abortions in adolescents has increased: from 2004 to 2005 to one-fifth, from 5 763 to 6 909. In addition, the number of abortions increased by 20% for girls younger than 14 years of age - from 574 to 696.

The analysis of sexual education in other European and the world countries shows a low level of awareness of the school youth in matters of sex and interpersonal relationships. Therefore, today it is required to take serious state measures in the vast majority of the world countries, aimed at radical improvement of the theoretical and practical solutions to the problem of sexual education, namely: the adoption within the United Nations of the common standards for sexual education; holding of international conferences, symposiums on methodology and methods of sexology preparation of pupils taking into account national peculiarities of the world countries; organization of the proper training of sexologists in universities of the world, ready for the sexual education of pupils of all ages; introduction of a system for monitoring quality and efficiency of school-based sexual education for all countries, oriented to world standards; the introduction in all the countries the unified guidelines for the sexual education of pupils of all ages, which should be consistent with a single concept of development.

Taking into account the decline in the age of sexual initiation of youth, the emergence of AIDS, the dynamic development of youth sexuality, in 1986 the World Health Organization (WHO) developed the "Standards of Information on Sexual Life", which focused on the following settings:

- 1. Information contributes to a social climate characterized by tolerance, openness and respect for sexuality, different lifestyles.
- 2. It promotes awareness of gender identity and gender roles and respect for gender diversity.
- 3. Sexual awareness enables people to make reasoned decisions and, accordingly, to form their sexual behavior.
- 4. Sex education contributes to the awareness and knowledge of the human body, its functions, especially sexuality.
- 5. It teaches the pupils the basics of personal hygiene, promotes the formation of psychosexual maturity, explains them about the meaning and consequences of sexual initiation.
- 6. Information about sexuality tells pupils about sexual and gender identity, teaches them how to express their feelings and needs, and feel sexuality with pleasure.
- 7. Sex education helps to prevent STDs, HIV / AIDS, sexual coercion, provides adequate and substantiated information on the physical, cognitive, social, emotional and cultural aspects of sexuality.
 - 8. Awareness counteracts sexual complexes, fears and phobia.
- 9. It stimulates the reflection on sexuality and different norms and values from the point of view of human rights, so that it develops one's own critical attitude to sexual problems, provides an opportunity to communicate about sexuality, emotions and relationships, and supports the development of the necessary language competence.
- 10. Develops the need for knowledge about biological, psychological, and social changes at different stages of human development.

The "Standards for Sexual Education in Europe" adopted by the European Union in 2010 in Cologne, Germany, launched the creation of a normative framework for sexual education in the EU countries and should promote the development of a coherent system of sexual education and the provision of children and youth with objective, scientifically reliable information about all aspects of sexuality. In general, the document aims to promote sexual health and to develop or adapt sex education programs in different countries at different levels of development and training, since gender concepts, sexuality, sexual health and human rights are treated differently in different countries and cultures.

Today there is growing international interest in the introduction of sexual education of school youth in the world countries. A recent study of its production in 38 countries of the world on all continents has shown that most governments are positively solving this problem, although different cultures have different emphasis, different content and duration of sexual education programs.

In some countries, programs are implemented through public schools (most EU countries, Japan, Taiwan), others through communities (Australia, UK, South Korea, Israel), and through social media (for example, text messages on HIV / AIDS in Nigeria) etc. It should be noted that sexual education in the vast majority of analyzed educational systems (Australia, Canada, USA, Great Britain, Germany, France, etc.) is conducted in secondary schools through developed state or regional programs. Among the most famous and effective programs of sexual education are the following: "Sexual education and adaptation to life in interpersonal relationships", "Living together" - in Sweden; "Preparation for family life" - in Japan; "Education for family life" - in Poland; "Building relationships" - in the United States of America; "Fundamentals of Pedagogy of Sexual Development and School" - in Switzerland; "Education for marriage and parenthood" - in Slovakia; "Fundamentals of Relationships and Sexual Education" - in Malta; "Skills of Life" - in Iceland and so on.

The introduction of sexual education in schools occurred during the last decades of the XX and first decade of the XXI century - first in France, the United Kingdom and some other countries, and later in Southern Europe, in particular in Portugal and Spain. Even in Ireland, a country where there was a strong opposition from religious organizations to a certain extent, sexual education was a compulsory subject in elementary and secondary schools at the beginning of the 21st century. Only in a few Member States of the European Union, especially in the countries of Southern Europe, experts have found that sex education is still absent in school programs. In Central and Eastern Europe, sexual education began to emerge from the moment of the expansion of the socialist camp.

If to look at the European region, sexual education is mandatory in Austria, Belgium, Greece, Denmark, Estonia, Iceland, Ireland, Latvia, Luxembourg, the Netherlands, Germany, Norway, Portugal, Romania, Slovakia, Finland, France, Czech Republic, Sweden. Optional sexual education is offered in Bulgaria, the United Kingdom, Spain, Italy, Cyprus, Lithuania, and Poland. In North America (USA, Canada), as well as in Australia, everything depends on the laws of the state or province. In Asia, South America and Africa, the introduction of sexual education is in its infancy.

Studying the state of sexual education in foreign countries, we concluded that the age from which it begins, also varies considerably. Thus, in Portugal, it starts to be taught from 5 years, in Belgium, France, Sweden - 6, in the Czech Republic, the United Kingdom, Finland -7, and in Spain, Lithuania and Cyprus - from 14 years. Some of the parents have a negative attitude to the sexual education of preschool children. Although it's not bad that a child is already at an early age to know where the children come from, and parents will not have to break their head and look for the right words to explain to the child such a difficult subject, It's even better for competent people - educators to do this professionally. Expert opinion; sex education should correspond to the age and stage of development of the child, considering the same topics at different ages, and in the process of maturation they are studied more thoroughly (Camilleri, 2013; Molina, Torrivilla 2011; Rogow, Haberland 2009).

It is also worth noting that the definition of sex education in different countries uses different names (which have also the differences in the content of the courses themselves) - from training students to family life or training their basic life skills to study the basis of relationships, including between the sexes. Sexual education is based in Austria, Bulgaria, the Czech Republic, Denmark, Finland, France, Germany, Greece, Iceland, Italy, Lithuania, Norway, Portugal, Spain, sex education with a focus on relationships - in Belgium, Cyprus, Ireland, Luxembourg, Sweden and Great Britain, with emphasis on preparing for family life - in Romania, Poland, Slovakia, other accents besides sexual issues (for example, healthy lifestyle) are taught in Estonia, Latvia and the Netherlands. In Austria, Belgium, the UK, Greece, Denmark, Estonia, Iceland, Latvia, Luxembourg, Germany, Norway, Portugal, Slovakia, Finland, France, the Czech Republic, Sweden, in educational institutions they teach in accordance with national standards for sexual education, but in Bulgaria, Cyprus, Romania, Ireland, Italy, Lithuania, the Netherlands, Poland, Spain, they simply do not such.

In the vast majority of foreign countries, the sexual education course has been included into biology as part of it. The main goals put forward by the creators of the course were reducing the risk of early pregnancy and infection with sexually transmitted diseases (through familiarization with contraception), that is, getting to know human sexuality, often even outside the context of family and marriage. It is no coincidence that the term "sexual education" includes such topics as sexual anatomy, reproductive rights, sexuality, sexual relations, reproductive health, emotional relationships, reproductive rights and responsibilities, retention, contraception and other aspects of human sexuality. The psychological, social and ethical components of sexuality often go unnoticed by school courses.

Traditionally, sexual education in European countries focuses on *potential sexual risks*, such as unplanned pregnancies and STDs. This negative focus often frightens children and youth. For example, in the course of "sexual education" most European countries practically do not include information on the construction of a healthy marriage and a strong family (heterosexual). On the other hand, children are widely provided with information on the family life of homosexual couples. In a number of countries, sexual education includes information on homosexual relationships along with or even in a priority relation to heterosexual ones (such as in the Netherlands and Germany).

Experts from the European Union, based on the fact that the subject of sexual education is unequal in European countries they consider appropriate its multidisciplinary character. However sometimes sexual education is studied as a separate subject, but usually its elements are integrated into other subjects (biology, civic education, social orientation, health care, philosophy, religion, linguistic subjects or physical training).

It is positive that, unlike the existing practice of Denmark, the Netherlands, Sweden and other countries where the content of sexual education is not denoted as marital and family relations, the adopted Standards are oriented towards Christian norms and values with a clearly expressed orientation on marriage and family (Medero, 2009; Vandenbroucke, 2009; Weaver, et al., 2012).

Interstate comparisons have allowed us to highlight the general factors contributing to the successful implementation of sexual education. Including:

- Sexual education does not lead to increased sexual activity, risky sexual behavior or sexually transmitted diseases, and HIV infection. On the contrary, the study of European experience has shown that sexual education of schoolchildren can be very effective in reducing the prevalence of risk behaviors, and moreover, it can lead to postponement of sexual activity and a decrease in the number of sexual partners among young people.
- A sexual education program can be considered successful if it has one or more of the following outcomes: delaying the moment of sexual activity; reduce the number of unprotected sex; development of contraceptive use skills.
- Sexual socialization can only be successful if gender issues are viewed and discussed openly as a positive, integrative part of health.
- Youth, including the school youth should know about sexuality not only in terms of risks, but also in terms of its potential, in order to develop a positive and responsible attitude in this field, to make a reasonable choice in their understanding of their personal lives, relationships with others, and to form one's own assumption about marriage and family.
- Reconciliation of various political and religious views, involving a wide range of social movements in the process of implementing sexual education.
- An important role in the education of sexuality is played by the media. Their attitude to this problem can be varied depending on the particular country. In some countries, mainly in Scandinavia, the media is a source of support and information on sex. In Denmark, national radio and television companies provide free live time for sex education programs. In other countries, such as the UK, sex issues are presented with a great deal of sensation that has a negative impact on the sexual education of young people.
- Efficiency requires a comprehensive approach so that sexual education programs are not seen in isolation from other issues but have been an important component of wider initiatives aimed at improving the health and well-being of young people.
- Sex education programs should be adapted to the specific needs and realities of the country concerned.
- There are programs that are particularly popular and effective in the world, which simultaneously hold back sexual activity and promote the use of condoms or contraceptives.
 - Gender-oriented programs are much more effective than programs that ignore them.
- It is important to follow a differentiated approach, since in many countries a large group of people is made up of immigrants with their own, different from the host country, cultural and religious traditions.
- Sexual education should not be a temporary campaign; continuous work is needed in this direction; progress made during the period of its implementation does not guarantee further progress if programs are closed.

- The evolution of moral and ethical values in many European countries (Germany, the Netherlands, Sweden, Belgium and others) is clearly depended on a phenomenon such as massive break of the population with traditional religious values. Every year many thousands of people leave the Catholic and Protestant churches. Even the exclusively liberal policy and position of the Protestant Church, which implies, for example, women's priesthood, divorce of clerics, homosexual marriages, cannot stop the process of mass exodus from the church (this phenomenon in the scientific literature is called "the European ethno-religious renaissance").

2. Various approaches to the content and organization of sexual education

Analysis of sexual education in the leading countries of the world gives grounds to distinguish between different approaches to its content, forms and technologies:

- 1. Abstinent sexual education, based on abstinence from sexual relations to marriage, as the only solution for solving sexual problems. Such a conservative approach is typical for Italy, Ireland, the Catholic lands of Germany, the leading countries of Asia China and Japan, and was popular at the end of the twentieth century in many states of the United States, where they were united under the single title Title X ("Postponing sex","How to reduce risk», «Skills and abilities for life», «Be proud! Be responsible!», «Know the truth about AIDS"). Such programs do not contain information on contraception, pregnancy prevention, sexually transmitted diseases and other practical aspects of the problem. Their implementation undoubtedly yielded results, but getting acquainted with them showed that there was a lot of false, distorted information, incorrect recommendations, "horror stories": abortions lead to suicides or infertility; half homosexuals carry HIV infection; condoms do not prevent HIV in 30% of cases; touch to the genital can lead to pregnancy; HIV can be transmitted through sweat and tears, and so on. That is, it can be stated that such programs largely misinformed the youth, giving mostly unscientific knowledge about sexual life.
- 2. Another form of organization of sexual education abroad is the combination of abstinent and procontraceptive approaches. The argument is made that teaching contraceptives does not hurt those who refrain from sexual intercourse, but will help sexually active people. Such programs are often referred to as "integrated sexual education" programs. Proponents of such an approach believe that sexual education should become a means of intimidating young people with sexually transmitted diseases. D. Kirbi at the end of the twentieth century proved that programs not only encouraged adolescents not to rush to the beginning of their sexual life, but also taught them rules of safe sex, much more effective than those who promoted only sexual abstinence (Kirbi, 1984). In the UK, 14-18 year-old schoolchildren are taught the ability to postpone sexual intercourse until maturity not before marriage but to maturity. They are simply taught the "idea of expediency." Recommendations for abortion and the avoidance of consequences associated with it are important.

- 3. For the third form of sex education of schoolchildren is usually used an approach based on the forming of a character who tries to raise personal and social responsibility and gives young people the opportunity to see the impact their relationship with sexuality has on other people's lives. Particularly popular were programs where the main emphasis is on the ability to control sexual desire, to strengthen the belief in controlling sexual desire, perhaps conviction that the preservation of sexuality for marriage is moral value. Particularly popular were the programs where the main emphasis was on the forming of the ability to control sexual desire, to strengthen the belief in possibility of controlling sexual desire, conviction that the preservation of sexuality for marriage is moral value. Well-known German sex pedagogue W. Foerster in his work "Sex Ethics and Sexual Pedagogy" convinced that it was not enough to protect pupils from sexuality, since early childhood it was necessary to teach children to restrain their instincts and bring up the willpower (to fast, get up early, abandon their favorite games, to despise the pain) " (Foerster, 1952).
- 4. The fourth form of sex education in the world countries (Germany, Great Britain, Poland, a number of US states) - the so-called comprehensive sexual education, which broadens the framework of the previous approach and is based on a positive attitude towards sexual behavior, balanced information on potential dangers and harmful consequences of this behavior. In this approach, emphasis is placed on the formation of the sexual values of a young person. It is about the fact that the young person must live in harmony with his/her sexuality, learn how to make decisions and learn communication skills, which allow developing a more responsible approach to sexual behavior and relationships. This approach is characterized by discussion of the medical and hygienic aspects of sexual education, such as the causes of sexually transmitted diseases, female and male reproductive organs, pregnancy prevention, and the harmfulness of abortions. Due to such biological problems, the material on contraception is introduced and the main strategy of the program is the formation of the skills of compulsory use of contraceptives and the liberal attitude of students to the sexual behavior of other people. Some schools in the Netherlands, Belgium, Denmark, not only provide information on contraception, but also provide contraceptives to adolescents on a confidential basis. In schools in Finland, for example, 15-year-old adolescents are issued a special "introductory sexual package", which includes an informative brochure, a cartoon about the history of love and a condom.
- 5. The most radical approach to sexual education is based on the idea of the dominant significance of sexual socialization. It is typical for Nordic countries, especially for Scandinavia, for France at the end of the twentieth century. Proponents of this trend in the content of sexual education include: information on different ways of sexual contacts, information about conception, contraceptives, abortion, sexually transmitted diseases. The most important difference between the Finnish teachers and their American and many European colleagues is the lack of special care about sexual content. The Netherlands are a bright representative of those countries where sexual education of young people is virtually reduced to its sexual socialization.

The typical feature of the Dutch model is that young people are not said how and what to do, but rather encourage the individual to think in advance what he / she wants, and develop the necessary communication skills and the preservation of personal boundaries.

According to many experts, the radicalized version of sexual education programs is not the best option for children: it promotes the adoption and study of various sexual orientations and gender identity (homosexuality); increases the risk of abnormal sexual behavior (including anal and oral sex) and convinces them to be safe; emphasizes sexual pleasure; promotes abortion as both safe and without consequences; encourages children to have sexual experiments with persons of their own or opposite sex; argues that access to "comprehensive sexual education" is a human right; teaches children and young people that they are sexual from birth; promotes and offers condoms for children; promotes disrespect for parents, religious and cultural values; promotes sexual counseling, provision of information or services to minors without the consent of parents; incites children to stand up for their "sexual rights" in laws and politics.

Thus, the key issue in developing the content of sexual education remains, first and foremost, determining the relationship between the study of sexuality issues and the idea of learning to abstain from premarital sexual intercourse. In addition, it should be noted that the programs of sexual education at the beginning of the XXI century are fundamentally different from previous programs, where sexual relations were considered as possible only in the context of legal marriage.

3. Content of programs of sexual education in countries of the world.

A special place in the sexual education in foreign countries takes the formation of a correct attitude towards sexuality among schoolchildren. In modern French pedagogy, sexuality is viewed not as something that exists by itself, but as an aspect of the social, cultural and emotional life of the developing person. That is why most French educators try not to consider sexual education exclusively at the angle of prevention of possible risks, limited to the teaching of reproductive biology and sexually transmitted diseases (STDs). In their view, sexual education, focusing only on problems and risks, is not synchronized with the curiosity, interests, needs and experiences of children and adolescents, and therefore will not have the desired effect on their lives and behavior. French educators are working to ensure that the process of sexual education not only informs, but also shapes, develops schoolchildren, induces adequate responses. In addition, sexual education should begin with the formation of a fundamentally positive attitude towards sexuality and sexual health, rather than relying on deterrence, scaring risks. This approach is completely incompatible with the medication of sexuality. From the French programs, the notion of "sexual education" and "sexual enlightenment" disappeared, and a new one appeared - "education of sexuality" (L'éducation a la sexualité). Education of sexuality is a way for students to learn and understand how different the aspects of sexuality in general and their own sexuality are.

In Swedish pedagogy (H.Marklund, M.Erikson, T.Wetterberg), on the contrary, sexuality is recognized as having an independent value, not only in connection with marriage and childbirth. Adolescent sexuality is also considered normal. Sexual debut is a personal decision of everyone. Another thing is to avoid the associated undesirable consequences and risks, including reproductive and epidemiological ones. Education is based on the principles of safe and responsible sex. According to Polish pedagogues (I.Sosnovsky, V.Pyylkovsky, Z.Izdebsky, T.Kroul, and others) sexual education should be proactive and preventive rather than sexually stimulating, and be guided by the norm and positive aspects of sexual existence but not a deviation as a means of intimidation, and also contain an analysis of various aspects of their own sexuality (functional, sensory-emotional, semantic, behavioral), and optimization (correction) of their sexual behavior and lifestyle (in the form of drawing up their own programs of healthcare and their subsequent practical implementation). At the same time, in order to develop a positive and responsible attitude towards sexuality, youth, according to O. Bialyk, "should have an idea of possible risks and satisfaction in this sphere, since under such conditions their behavior will become more responsible both for themselves and in relation to others in the society, which they live in" (Byalyk, 2017).

An important task of sexual education is the formation of a proper attitude towards chastity. Quite common among Christians in Europe is the religious concept of chastity, the guiding principle of which is the communicative role of intimate relationships between people, that any sexual activity is sinful, except for sexual intercourse in a consecrated by church marriage that has the purpose of continuing the genus (A. Altmeyer, V. Bartolomoyz from Germany, N. Bienzhelich, A. Dukich representatives of Croatia, J. Dobzhansky, M. Tkachuk from Poland) (Dobrzański, Tkaczyk, 1974).

The theme "Contraception" has widespread in the vast majority of educational institutions of foreign countries on all the continents. The only difference between the curricula of individual countries is that this subject is considered at different stages of school education and in different volumes. For example, in Germany, the directives of all the federal states provide familiarization with the issue of abortion, while the theme "Protection of the unborn life" is considered only in the schools of Baden-Württemberg, Bavaria, Bremen, Lower Saxony, North Rhine-Westphalia and Rhineland-Palatinate. Overseas, in the first place, European experts believe that adolescent contraception must meet the following requirements: high efficiency; safety for health; ease of use; availability for purchase. It should be taken into account the sexual characteristics of teenage girls, which include: irregular sex life; irregular menstruation (up to 25%); insufficient sex education; fear of detecting contraceptives by parents or loved ones; the choice of protective means for the "advice" of friends; high STDs risk; several sexual partners.

Since condom is the most popular means of preventing unwanted pregnancies among sexually active young people, the weighty efforts of American educators are aimed at overcoming the feeling of embarrassment during the first acquaintance with contraception (condom inflow as balloons, inscription on them information on safe sexual behavior, etc.).

By teaching the pupils to communicate freely and properly handle a condom, the teacher invites a representative of the Center for the Prevention of Infectious Diseases, who talks about the various contraceptive options, indicating their advantages and disadvantages (Olson, 1998). Sexually transmitted diseases are an important topic for sexual education abroad. This issue was particularly acute in connection with the emergence of AIDS. From the wide range of training courses, the American school program "Get Real About AIDS" is distinctly distinguished (Panychok, 2010).

An important aspect of foreign programs for the sexual education of young people is the problem of adolescent pregnancy. Pupils get acquainted with the social, economic and physiological consequences of adolescent pregnancy. The study of statistics reveals to the students the fullness and drama of the problem of adolescent pregnancy in one or another country. Future discussions go beyond statistical data and focus on clarifying the causes and possible implications of adolescent pregnancy. For example, in American educational institutions, schoolchildren wear a "vest of empathy" that allows them to feel the condition of a pregnant woman; create micro situations for baby care; other responsibilities for the care and upbringing of children of all ages are clarified. The question of the responsibility of both women and men for the birth and upbringing of the child is discussed in detail (Brindis at al., 2000). An equally important task for sexual education in foreign countries is to preserve the sexual and reproductive health of young people. In general, pupils need to develop a responsible attitude towards their own health and the health of their loved ones; to develop the skills of making reasonable decisions and the ability to say no; to raise social responsibility in relations with representatives of the opposite sex; to form a desire to have a solid, friendly family that meets the requirements of modern society. This became the subject of the study of Finnish pedagogues K. Bildushkinen and K. Selkeneve (2012).

Much attention in sexual education abroad is given to the problem of sexual orientation, in particular homosexuality. In western countries, either most people consider homosexuality a normal phenomenon, or they pretend to perceive such a phenomenon. In Sweden, for example, they fight not with homosexuality, but with homophobia, in particular in school environment. In Denmark children boldly choose a sexual orientation, and who did not do it, can be determined later. In the country introduced the third gender - "uncertain", it is an opportunity to choose a sex at will until the age of 18 years. Of course, the latter position is unacceptable for the Ukrainian mentality, and therefore for propaganda in educational institutions. A similar picture is seen in other European countries. In one, this topic is completely eliminated; in others, this problem is considered optional in religious lessons, in some - only partly mentioned the same-sex love as possible forms of cohabitation, although most EU countries are convinced of the need to reflect the problems of the diversity of sexual orientations (Olson, 1998), at the same time, stressing that other forms of cohabitation should not be treated as an equal lifestyle along with traditional marriage and family (Fava et al., 2014).

Important, in our opinion, is the problem of sexual abuse of children, which is the subject of school curricula in the countries of the European Union (Poland, Germany, France, etc.), in connection with which the educational institutions undertake to take measures within the framework of sexual education in relation to the prevention of violence as a shameful phenomenon, not through intimidation of them, but by developing the independence and self-confidence of children and adolescents (Fava et al., 2014).

The school in many European countries plays an active role in detecting violence against children. During a medical examination, health care workers can identify cases of child victims of violence. They can conduct a preliminary analysis of the situation. The schedules provide at least one annual seminar on violence against children, in particular sexual violence in the family. The protection of students who use the Internet is intensifying. Schools have created a filter device to select or control information that is accessible to students. They make students aware of the risks of using the Internet.

Equally important in sexual education of young people is considered a hygienic concept, aimed at familiarizing children and adolescents with the main provisions of the anatomy and physiology of the human reproductive system and training their (especially girls) skills in personal hygiene. However, the "sexual issue" is an important and sociohygienic problem, which is connected with health, working capacity, mood of people, and improvement of their family life. Instruction on personal hygiene and initial sanitation is carried out in all European schools, starting with elementary classes. According to J. Esser-Mittag, "the school itself lays the foundations of sexual culture, while avoiding tactlessness and importunity, taking into account, first of all, age characteristics and the nature of physiological changes in the students organisms" (Esser-Mittag, 1999, p. 19).

Particular attention is paid to the fact that the beginning of sexual changes and growth patterns varies depending on individuals and that it is natural and normal. Students on an individual basis are helped to avoid anxiety if their development is ahead of or behind their peers. In addition, the importance of personal hygiene in relation to these bodily changes, increased need for personal hygiene, expediency of using deodorants, frequent changes in underwear is discussed. The proper use of products of female hygiene in connection with cleanliness, use and disposal of pads and tampons is discussed with teenage girls during separate classes.

Interestingly, in our opinion, there is the use of "lingerie rules" in Dutch schools: children are explained that all those parts of the body that cover underwear are intimate and no one else should see and touch them. It is worth noting that at this age children do not get knowledge about sex, but information about their body and its features. Students should know that problems and doubts caused by body changes are a natural part of maturation. The authors of such programs rely on data from numerous studies that confirm that children who do not have basic knowledge are more likely to suffer from pedophiles than their more educated peers.

Comprehensive sexual education in many countries around the world, especially in Europe, today is hampered by the multiethnicity of the population and its polyconfession: in Germany, France, the United Kingdom, the Nordic countries, from 10 to 20% of the population, are not indigenous people of the country, professing Islam or other religions. It should be added that in the majority of foreign countries there were strong protest attitudes of the parental community and religious organizations against sexual education, especially in elementary schools. The French experience of organization in the colleges and lyceums of the three sessions of sexual education is noteworthy, focusing not only on biological knowledge but also on the psychological, emotional, social, cultural and ethical dimensions of sexuality, associating and completing the various lessons taught in class, integrate all the knowledge in each head. Sessions are held in the form of debates that extend information on prevention (AIDS, STDs, contraception) to more existential issues: conversations about oneself, one's body, relationships with others, the feeling of love, the relationship between boys and girls, sexism, homophobia. Among schoolchildren at the sessions "leaflets" about sexual violence, puberty, sexual orientation, sexism and homophobia, contraception, sexually transmitted diseases, etc. are distributed.

Studying the sexual education of schoolchildren in the UK, P. Meredicp highlights the principles that are mandatory: all information received by children on sex should be given exclusively in the context of marriage and family; teachers should not teach, discuss, and introduce students to printed materials that are illegal and unnatural in sexual practices; things that are obscene in the eyes of the public can not be used as pupils' visual aids; sstreet terminology should not be used in lessons, the language of the teacher should correspond to the language of science; discussions, training and contraceptive use guidelines should take place in the context of family and marriage; any pornographic and obscene books and other printed publications, films, slides and videotapes should be excluded from education (Meredith, 1989).

Today, in the UK, as in other European countries, there is a need for more attention to security around the exchange of digital images between students - with the necessary discussions about the impact of "sexting" on young people. In sexting, the key issue is the consent of the subject to receive erotic, especially pornographic images. Children should be aware of the various age limits associated with different sexual activities. For example, in Britain, the age of sexual consent is 16 years, whereas the age at which the legally allowed to send nudity is 18 years. By the way, a significant part of the youthful sexting takes place within the relationships or as a flirtation tool. That is why students should know what the agreement means and how it looks in the youth relationship. Understanding this will help distinguish between "research" and "operational" behavior in relationships between young people. This differentiation is crucial. There is a wide range of social and legal issues related to sexting. Its prevalence among young people contributed to blurring of the limits of consent, coercion and "healthy" sexual behavior.

As we become familiar with Swedish sexual education experience, we have focused on specialized adolescent clinics that are closely linked to the school, where students receive free, widely available and confidential services for family planning and abortion. Sexual education in the Netherlands is also different because it shows sexuality in a positive light, informing pupils about the nice aspects of sex and relationships. The ultimate goal of Dutch sex education is the desire to instill a sense of responsibility for adolescence about the birth of unwanted children, the consequences of sexual relationships, and to give boys and girls the opportunity to make the right decisions by setting their own sexual boundaries. Much attention in the Netherlands is paid to sexual assurance and diversity, the formation of respect and tolerance for non-traditional sexual orientations (legitimate, of course) and assistance in the development of skills for protection from sexual coercion or violence.

Conclusions.

In the work on sexual education in foreign, especially European, schools certain rules should be followed: content, forms and methods of sexual education should correspond to the age-specific features of the students (including stages of sexual development), as well as the level of their knowledge on a particular topic. Students have the right to receive comprehensive answers to questions that arise in them; sexual socialization can only be successful if gender issues are viewed and discussed openly as a positive, integrative part of health; sexual education should give students true knowledge of human sexuality, teach young people the ability to express their thoughts and create their own judgments; to discuss individual topics it would be useful to invite independent specialists who do not perform any functions at the school; sexual education in school and family should go in one direction; it is important to create an atmosphere in which the students would feel very free and relaxed when learning the most delicate topics. (Fricher, 1976).

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