

Issues of Sexuality in Youth

&

Culture and Gender Interactions

Introduction:

The definition of a youth is a young person who has not yet reached adulthood and refers to the time period before you become an adult. Youth is the time of life when one is young, and often means the time between childhood and adulthood (maturity). The United Nations defines youth as persons between the ages of 15 and 24. The National Youth Policy of Government of India, however, defines youth as age group that ranges between 15 and 29 years of age. This phase is characterized by acceleration of physical growth and associated changes in psychology and behavior, which transforms the child into an adult. In addition, the youth experiences changes in social expectations and perceptions. The individual's capacity for abstract and critical thinking too develops along with it. They attain a new level of emotional maturity needed to deal with the changing scenario. Sexual maturation accompanies the physical growth and development, often leading to intimate relationships. Thus at this age sexuality of individual develops. Sexuality is about one's sexual feelings, thoughts, attractions and behaviours towards other people. One can find other people physically, sexually or emotionally attractive, and all those things are a part of one's sexuality. Sexuality is diverse and personal, and it is an important part of one's identity. Thus this period with changes in physical, emotional, social and sexual aspects of life, becomes a crucial part of development for any individual.

As per India's Census 2011, Youth (15-24 years) in India constitutes one-fifth (19.1%) of India's total population. India is expected to have 34.33% share of youth in total population by 2020. They are a rich human resource and hold an important place in the process of development. Therefore, maintaining and providing adequate health care to the youth age group will go a long way in raising the health status of the community. Youth show a high degree of vulnerability to human immunodeficiency virus (HIV)/acquired

immunodeficiency syndrome (AIDS) and other sexually transmitted infections (STIs). Health of girls of this age, in particular, has an intergenerational effect. Proper awareness regarding sexuality and sexual practices needs to be imparted to the youth so that they can maintain a healthy physical and psychological life.

Knowledge about sexuality and sexual practices are very much governed by the cultural practices of a society. Culture is the way of life of a group of people. Culture is the characteristics and knowledge of a particular group of people, encompassing language, religion, cuisine, social habits, music and arts. Different cultures vary in regard to norms, including how they understand and perceive sexuality, how they influence the artistic expression of sexual beauty, how they understand the relationship between gender and sexuality, and how they interpret and/or judge particular sexual behaviors (such as premarital sex, the age of sexual consent, homosexuality, masturbation, etc.). Societies that value monogamy, for example, are likely to oppose extramarital sex. Individuals are socialized to these morals and values—starting at a very young age—by their family, education system, peers, media, and religion.

Gender and Youth:

There are many factors that influence the ‘Sexual identity’ of a person. It can be defined as the way the biological sexual characteristics of a person are exhibited. The factors that influence it are chromosomal patterns, external and internal genitalia, composition of hormones, and secondary sexual characteristics. ‘Gender identity’ connotes the psychological behavioural aspects in relation to masculinity and femininity. Physical characteristics derived from a person’s biological sex such as physique, body shape, and physical dimensions interrelate with an intricate system of stimuli, including rewards and punishment and parental gender labels, to establish gender identity. ‘Gender role’ in a society means how we're expected to act, speak, dress, groom, and conduct ourselves based upon our assigned sex. Gender role is not established at birth but is built up cumulatively through experiences encountered and transacted through casual and unplanned learning, explicit instruction and inculcation. Gender role is responsible for the differential attitude and behavior of the young males and females. Girls are expected to develop some shyness in social situations, whereas boys are expected to act boldly. Gender inequality begins around the adolescence.

Knowledge of sexuality and detailed information regarding the same is a very blurred area in the context of Indian culture. As sex education has still not become a part of the curriculum of Indian schools, no formal education or information is available to children and adolescents. Youth of India gather their knowledge from their surroundings like information provided to them by peer groups, or as it comes in print media or over the internet. The information so gathered is often uncensored and unfiltered, sometimes even presented in an improper manner or come out to be wrong for the young minds, which in turn, drag them into serious problems like untoward sexual experiences. It even may bring undue concern regarding normal sexual behaviors and thus cause significant distress to them.

Adolescent, as it is known as the age for exploration, also holds true regarding sexual matters. As sexuality is a hidden area for most Indian youth, as it is generally taken as something which cannot be discussed openly in Indian culture, various myths and misconceptions regarding them lingers in the young minds. A stereotypical social setup offers little scope for open discussion on sexual matters between Indian parents and their adolescent wards, resulting in no provision for effective resolution of the myth surrounding sexuality for adolescents. On the other hand when the sexual identity and the gender identity do not match or the individual's sexual preference is not heterosexual in nature then that young mind becomes more emotionally vulnerable. There is lack of awareness and acceptance in Indian society regarding third gender and homosexual preferences which increase the burden on these young minds. These individuals whose sexuality is different from the norm find it difficult to adjust due to the non-cooperation from society; they become isolated, which makes them susceptible to physical and psychological problems. They often have identity crisis, are often abandoned by family, for which they suffer from emotional loss, their scope for education and job also gets limited. All these pave way for high prevalence of a distorted notion about sexuality among Indian youth population.

Culture and Youth:

Throughout time and place, the vast majority of human beings have participated in sexual relationships. Each society, however, interprets sexuality and sexual activity in different ways. Human sexuality can be understood as part of the social life of humans, governed by implied rules of behavior and the status quo. The sociocultural context of society—which includes all social and cultural

factors, from politics and religion to the mass media—not only creates social norms, but also places major importance on conformity to these norms. Norms dictate what is considered to be acceptable behavior; what is considered normal or acceptable in terms of sexual behavior is based on the norms, mores, and values of the particular society. Thus, how children are raised, how they need to behave, and how openly they can discuss the matters of sexuality depend on these cultural norms. Conservative societies forbid the discussion on the adolescent problems, and exhibit more gender inequality. Sexual taboos have their root in cultural beliefs and have important implications in the sexual health and morbidity. Many societies still hold misconceptions about menstruation, and masturbation. Elders never educate on the basic concepts of bodily changes that occur during adolescence, keeping them in dark. There has always been an issue of comfort regarding sharing of knowledge on sexuality with offspring in India. Moreover there is attitude of non-acceptance towards the members of third gender and homosexuality. The social regulations and pattern of cultural response is quite different in our country in comparison to developed countries.

Sexuality throughout History:

Sexuality has always been a vital part of the human existence. History shows an increase in the collective supervision of sexual behavior when agricultural societies emerged, most likely due to population increases and the growth of concentrated urban communities. This supervision placed more regulations on sexuality and sexual behaviors. With the advent of patriarchal societies, gender roles around sexuality became much more stringent, and sexual norms began focusing on sexual possessiveness and the control of female sexuality. How males and females were allowed and expected to express their sexuality became very different, with men having a great deal more sexual power and freedom. Different cultures, however, have established distinctive approaches to gender.

Influence of Culture and Religion on sexuality:

Most world religions have developed moral codes that have sought to guide people's sexual activities and practices. The influence of religion on sexuality is especially apparent in many countries today in the long-debated issue of gay marriage. Some religions view sex as a sacred act between a man and a woman that should only be performed within marriage; other religions view certain kinds of sex as shameful or sinful, or stress that sex should only be engaged in for the purpose of procreation. Many religions emphasize control over one's sex drive and sexual desire, or dictate the times or conditions in which sexuality can be expressed. Whether or not sex before marriage, the use of birth control,

polyamorous relationships, or abortion are deemed acceptable, is often a matter of religious belief. Religious beliefs are mostly against diverse sexual orientations and oppose them vehemently.

Sexuality and the Media:

Mass media in the form of television, magazines, movies, and music continues to shape what is believed appropriate or normal sexuality, targeting everything from body image to products meant to enhance sex appeal. Media spread a number of social scripts about sexual relationships and the sexual roles of men and women, many of which have been shown to have both empowering and problematic effects on people's (especially women's) developing sexual identities and sexual attitudes.

Although sexual content in the media can affect any age group, adolescents may be particularly vulnerable. The young minds may be exposed to sexual content in the media during a developmental period when gender roles, sexual attitudes, and sexual behaviors are being shaped. This group may be particularly at risk because the cognitive skills that allow them to critically analyze messages from the media and to make decisions based on possible future outcomes are not fully developed.

Over exposure or acquiring improper information regarding sexuality through media leads to unwanted behaviours, misconceptions, myths and can also create unrealistic goals. For example, the media has had an influence on shaping our sexuality as they create exaggerated standards which influence how we think of ourselves.

Indian Context- Culture, Youth and Sexuality:

India is one of the oldest cultures to study sexuality and seems to be quite open in appraising sexuality as an art and science, evident from the early works in the form of oldest literatures, paintings, sculptures and many more. The book 'Kamasutra' (Aphorisms of love) written in between 1st and 6th century; paintings on Ajanta caves, sculptures of Khajuraho are few examples of the deep interest and admiration Indians have towards sexuality.

But with foreign invasion later, much of the ancient literature went missing and gradually new norms were set. There is no provision for sex education either at home or in school and no specified health service addressing youth sexual problems exists. On top of it, in their day-to-day lives, common Indian people

are very traditional and conservative in their outlook. Discussing sexual matters is forbidden.

Before puberty, a natural approach to sexuality and nudity prevails, especially in rural areas. As child grows up into adolescent, parents start expecting that he/she behaves like an adult. Adolescent boys and girls can no more have close interactions as they did few years ago. No information is given about the natural changes that an adolescent witness in his/her body and mind. Due to social stigma, adolescent girls are not educated about menarche and its causes, beforehand. Often girls feel anxious and distressed about this sudden development. In some societies, girls are not allowed to cook, to enter sacred places and even to take bath during menstruation. Due to lack of proper toilets and privacy in rural areas, girls often miss schools and colleges during menstruation. Girls are prepared to handle household responsibilities and sometimes their education stops at this stage.

The silence of the Indian culture on issues related to sexuality compound problems like the treatment seeking behaviour for psychological disorders (e.g. Dhat syndrome), the HIV epidemic, infections in the genital tract, sexual violence (e.g. female genital mutilation), contraceptive use and abortion services. Masturbation is a practice which is considered a taboo and unaccepted.

The Indian society has not yet accepted transgender and individual with diverse sexual orientations. They are ill-treated and discriminated at each level, starting from their house. They are often forced to change their sexual orientation or not allowed to disclose their choice of sexual practices.

Western Culture, Globalization, Media and its Impact on Indian Society:

The scenario of adolescent sexuality in west is different. Since the beginning of the industrial revolution in the United States, many changes in sexual standards have occurred. New artificial methods of birth control were introduced, leading to major shifts in sexual behavior. Social movements in the latter half of the 20th century, such as the sexual revolution, the rise of feminism, and the advancement of lesbian, gay, bisexual, transgender, and queer (LGBTQ) rights have helped to bring about massive changes in social perceptions of sexuality.

Youth Risk Behavior Survey (YRBS), conducted in US in 2005, reported that adolescents become sexually active at young age, which increases the occurrence of unwanted pregnancy and increased the risk of sexually transmitted diseases; however, the risk gradually declines with age.

The sweep of globalization and blind pursuit of the 'open' culture of the west may have cast a significant impact on a society like India. It has also been observed that in Indian metropolitan cities there is increase in early exposure to sexual information and thus engagement in sexual activities. One of the very common sources of information is pornography which hardly gives any knowledge regarding marital sexual relationships or gender equality. In a study, it was found that friends were the sources of information for 75% of the young population whereas for 50 % it was pornography films or books. Rapid globalization, media and information technology has affected the traditional societies also. Adolescents are also affected to a great extent due to their keen interest in electronic media like television and the internet. Youth is exposed to implicit and explicit sexual material via these media, but they are not provided with the basic sex education. These factors lead to early sexual experiences with further negative consequences.

However globalization has helped in raising voice for the LGBTQ community which has led to the famous verdict of Supreme Court of India, decriminalizing homosexuality Delhi High Court verdict decriminalization of homosexuality (IPC section 377) in 2018.

The Problems:

There is a genuine scarcity of formal sex education for adolescents in schools in most developing and emerging societies. Even if present, it is grossly inadequate. Due to this scarcity, there is a higher chance of unprotected sexual activities, unwanted pregnancies and also the occurrence of sexually transmitted diseases. Various health challenges regarding reproductive and sexual aspect concerns most adolescents. Most of these challenges are due to marriage in early age, abortion practices which are unsafe, high risk behaviors, and lack of awareness about contraception and reproductive issues regarding health, infections of genital tract and infections which are transmitted sexually (STIs) including HIV/ AIDS and non-consensual sex. This creates an 'unmet need' for reproductive and sexual health care. This unmet need varies among youth groups which are married or not. Thus behavior of seeking help is also not present.

Besides that, public sector reproductive health services are more oriented to give services to adult married women. Adolescents who are not married always show a hesitation toward seeking help from health sector because of the fear

that these services are not confidential, and also due to inability to pay, requirement of parents' approval and negative or insensitive attitude of health care providers. Girls from adolescent age group and are married also rarely seek support due to sheer embarrassment and the taboo associated with reproductive and sexual health problems. There is prevalence of programmatic constraints in the form of non-availability of health personnel at the health facility and poor awareness. There is always a risk of pregnancy, HIV infection, STIs and other such health and social hazards after the initiation of sexual activity. In order to prevent this, in 'open' societies and developed nations, condoms are distributed in school to decrease the health hazard. This brings into focus the question of the present situation in our country. It is imperative that both being too 'open' or too 'close' have its own disadvantages. Closeness due to culture and thus lack of information regarding sexual education leads young people to gather information from sources which provide it in a distorted form. This results in that the young people remain unaware of such information which is actually needed in growing days.

Moreover though laws are changing regarding transgender people and LGBTQ community, still they are not accepted in the society, they have poor access to health facilities and often are forced to join flesh trade as they lack job opportunities.

Future Directions:

Gender inequality needs to be addressed more seriously. The task starts with the naming, challenging and changing the negative gender norms and building norms that value girls at par with boys. At the individual level, youth need to be educated about puberty. Various challenges presented by menstruation need to be tackled. At the family level, girls need to be supported during their menses. At the community level, we need to improve the access to sanitary products, running water, functional toilets and privacy. Social leaders should contribute in changing the perception of the menarche and menstruation to one of promise and pride, rather than of shame. Youths need comprehensive, accurate and developmentally appropriate sexuality education. Improving adolescents' knowledge and understanding of sexual and reproductive health, including HIV/AIDS, and thus improving their skills in life to take care of their own health is a crucial step in the direction of meeting their health needs and fulfilling their rights. Adolescent-centered health services can prevent sexual and reproductive health problems and detect and treat them. Effective ways

should be developed to deliver contraceptive information and services to adolescents. Sexuality education programs should be brought into practice in India keeping in mind the social, cultural ethos. Measures to decrease discrimination against and increase the acceptance of the individuals belonging to the third gender and individuals with diverse sexual orientation should start from the home and reach the community level at large. Government should address the social and cultural barriers in this regard.