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PSYCHOLOGY INTERNATIONAL

Youth Movement Targets Violence Prevention

By Ervin Staub and Tamsen Schultz

An exciting new youth human rights organization, with the working name of the Institute for New Leadership (INL), has emerged from a June, 1997 conference titled "Beyond Lamentation: Options for Preventing Genocidal Violence." The aim of the conference was to promote bystander action — first, action by individuals, including young people, and, over time, action by nations and the international community. (Bystanders are frequently passive witnesses whose passivity encourages perpetrators, allowing the escalation of discrimination and violence that can lead to mass killings and genocide.)

The INL was conceived at the conference in the context of one of several small working groups discussing means of preventing genocidal and mass killings, both in general and in specific situations like Rwanda, Kosovo, Tibet, and Colombia. This particular working group, mainly comprised of young people in their early to mid 20s, focused on designing an international youth organization to promote active bystanding, altruism, and the prevention of genocide. Some of the young people were returning from a year of

work and study in Israel as Raoul Wallenberg Scholars (named after the Swede who saved the lives of tens of thousands of Hungarian Jews during the Holocaust). Others were graduates of Camp Rising Sun, an international summer camp in Rhinebeck, New York that focuses on issues of social responsibility. Still others had backgrounds in, or were concerned with, human rights work and activism.

Following the conference, some of the working group's "older" participants helped the young people get the INL off the ground. Frank Ochberg, formerly Director of the US National Institute of Mental Health, facilitated a substantial grant for the development of the new organization's vision, aims, and structure, along with a comprehensive proposal for further funding. Judith Thompson, a social activist and co-founder of Children of War, serves as the temporary Project Manager.

Over the past year, the INL has formed a steering committee of 13 members, representing seven national backgrounds. Co-author Tamsen

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Meeting Highlights



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Mexico Recognizes Sex Education Curriculum

By Susan Pick and Laura Proctor

This fall, by decree of the Mexican government, sexuality education will, for the first time, be included in the national public curriculum. Previously, decisions about teaching sexuality education in Mexican schools were at the discretion of local school authorities and principals of individual schools.

This major policy change is the culmination of years of research, program implementation, and negotiation with parents, officials, and conservative sectors opposed to sexuality education. In Mexico, as in many Latin American countries, a small but extremely active conservative minority has placed significant pressure on government agencies to oppose public discussion on sexual and reproductive health. Consequently, it took a long time for the departments of education and health to adopt integral sex education curricula.

The Mexican Institute for Family and Population Research (IMIFAP) has worked for over ten years to institutionalize sex and family life education in Mexico. Since 1986, approximately two million Mexican adolescents have participated in IMIFAP's integrated sexual health and family life education program — Planeando tu Vida (translated Planning your Life) — in state and regional programs implemented by the Ministry of Education and the National System for Integral Family Development. (A report on the early phases of Planeando tu Vida was featured in the Spring, 1991 issue of *Psychology International*, Volume 2, Number 2.) Planeando tu Vida is a critical component, but the process of implementation and negotiation entailed a seven-tiered approach to quietly but steadily build support for sexuality education.

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First, IMIFAP focused on conducting and disseminating culturally-specific descriptive research supporting the premise that sex education is effective in curbing unwanted pregnancy and disease and improving the quality of family life. Because few sexuality education programs have been based on the results of diagnostic studies about factors associated with sexual and reproductive behavior, the Institute conducted two diagnostic studies, one with male and the other with female adolescents.

The young women using contraception showed the following variables: low submission to family and sociocultural norms; high levels of communication with girlfriends about sexuality; knowledge about contraceptive methods; high orientation toward the future; and use of instrumental measures versus emotional blackmail to achieve objectives. There were three variables significantly related to the young men: experience in the use of contraceptives to prevent pregnancy; desire not to take responsibility in the event of a pregnancy; and the understanding that birth control pills do not provoke illness.

Second, it was important to evaluate *Planeando tu Vida* and its impact on the adolescent participants. Adolescents who took the program before the initiation of sexual activity were more likely to use contraceptives when they did begin having sexual relations. However, the course did not affect the age of first sexual experience, since there were no registered differences in this aspect between the experimental and control groups. As a result of a series of evaluations with both adolescents and their teachers, the current version of *Planeando tu Vida* includes the following topics: biological aspects of human reproduction; alternatives for practicing sexuality; sexually transmitted diseases; pregnancy and its consequences; basic concepts of psychoactive substances; risk factors and psychoactive substances; gender roles; expressing affection and non-verbal communication; assertiveness and verbal communication; values; self-esteem; controlling and deciding your life; and future expectations.

Third, during three consecutive years, IMIFAP and the Gallup polling organization conducted public opinion surveys with nationally representative samples. The latest survey, done in 1994, revealed opinions similar to previous years. More than 90 percent of parents said that adolescents should be taught how to prevent unwanted pregnancy, and that teachers should have more knowledge and information about topics including AIDS and contraceptive methods, including condoms.

These findings indicate a mandate from the Mexican public.

Fourth, IMIFAP found that working directly with parents and school principals was one of the most effective ways to assuage their uncertainty about sexuality education. Mexican parents — most of whom have been exposed to conservative claims that sexuality education increases sexual activity — often feel that they do not have the facts they need to adequately educate their children. For their part, principals are concerned that parents will criticize them for allowing something too controversial into the classroom. But after informational exchange, both parties usually become strong advocates for sexuality education.

Fifth, one-on-one meetings with conservative opponents of sexuality education have proved to be the most effective strategy for penetrating the conservative Catholic lay organizations that are the primary source of opposition to sexual and family education in

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Mexico. Because social acceptance and public appearances are so important to the members, and because those who question social and religious norms are subject to rejection and even retaliation, private discussions have been much more effective than formal group information sessions.

Sixth, IMIFAP recognized the need to compromise. While certain topics like abortion remain untouchable among conservative sectors, and others such as homosexuality and masturbation generate resistance, conservative individuals have been open to discussion regarding gender roles, self-esteem, contraception, communication, assertiveness, and the family. Thus, work with conservative opponents of sexual health education has been an ongoing process of negotiation.

Finally, evaluation surveys indicated that it was important to work with audiences other than adolescents and their parents and teachers. IMIFAP developed training programs, videos, books, and workbooks for children from preschool through ninth grade and for parents with children of all ages. At present, programs and materials are being developed to help physicians improve their communication about sexual and reproductive health. In all cases a research-action orientation has been used.

The IMIFAP programs and materials are now being used and evaluated in nine countries in Latin America and in Greece. Very similar results to the ones obtained in Mexico are being found both in terms of impact and of acceptance. While programs must ultimately be culture-specific and based on the context of the country, region, and population with which they are conducted, the research-action model developed in Mexico is a useful methodological tool for the future design, application, and evaluation of sexuality education and reproductive health programs.

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