

DO CHILDREN CARRY A STORK? OR THE IMAGE OF SEXUAL INTERCOURSE DURING SEX COMMUNICATION IN THE FAMILY

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Abstract: The aim of the paper is to find out what is the content of sexual communication between mothers and children and how mothers communicate sexual topics with their children. The paper is based on a research investigation in which a qualitative research approach was applied. The data collection tool was a semi-structured interview with 26 mothers who had children aged 12-18 years. Some grounded theory procedures were used in the data analysis. The results show that mothers formulate their messages about sexual intercourse depending on the age of the children and the so-called sexual events that the children have experienced. In terms of form, it turns out that mothers formulate their messages in three forms - sexual facts, sexual lessons, sexual examples. These are variable in terms of the intention that the mother wants to achieve. Mothers apply these forms separately or combine them.

Keywords: Sexual education, sexual intercourse, mother, children, family.

1 Introduction

In this paper, I address the issue of sexual socialization of children aged 12-18. The aim of the paper is to find out what is the content of sexual communication between mothers and children and how mothers communicate sexual topics with their children.

The family is, by its very nature, an environment of primary sexual socialisation, i.e. an environment where the child is sexually socialised from early childhood. The child forms attitudes towards sexuality from childhood onwards, through his or her family (Štěrbová, 2005). Definitions of family from the above-mentioned disciplines often refer to the variability of family forms (Cheal 2002, Možný, 2006) or to the functions of the family (Matějček, 2007; Cheal, 2002). According to Dunovský (1999, p. 91) "a small primary social group, based on the union of a man and a woman, on the blood relationship of parents and children or on a relationship substituting it, on a common household whose members fulfil socially determined and recognised roles resulting from cohabitation, and on the totality of functions which condition the existence of this community and give it its own meaning in relation to individuals and the whole society"

We can speak of today's family as a postmodern family (Možný, 2006). Among the basic attributes of the family are its functions, although they are changing. Možný (2006) mention the reproductive, socialization, care, protection, economic, and emotional functions. However, the presence of these functions depends on the type of family. There is a gradual loss of the listed functions of the family due to the shift from traditional to postmodern family. Nowadays, the family is of great importance especially in the emotional sphere¹ (Singly, 1999).

The theme of the paper refers to the socialization function. The family has a significant influence on the child's orientation in the outside world. In particular, its role in the course of an individual's primary sexual socialization is essential. According to Singly (1999), the most significant is the same-sex parent. The parent's parenting style is important for the socialization of the individual in the family².

The current form of the family in the Czech Republic is based on the process of transformation of the family and marriage that began in Western European culture in the 1960s. The changes were manifested in particular in trends in birth and marriage

rates. Rabušic (2001), referring to the sociologist van de Kaa, lists in particular the following shifts, which are typical of the postmodern era: A shift from marriage to unmarried cohabitation; a shift from contraception as a means of protection against unwanted pregnancy to contraception that allows for a self-fulfilling choice of whether and when to have a child at all; a shift from an era in which the child was the centre of parents' lives (king-child with parents) to an era in which the centre of life is the couple and their child (king-pair with a child); a shift from uniform families and households to pluralistic forms of families and households. Against the backdrop of the above-mentioned family transformations, a sexual socialisation process is taking place which itself, in the context of social constructivism, is influenced by the transformations of family life.

If we want to categorize and systematize the content of intentional sexual socialization³, we can find inspiration from other research (Macdowall, Wellings, Mercer, Nanchahal, Copas ... Johnson, 2006). Macdowall and his colleagues worked on the large national NATSAL survey conducted in the UK in 2000. Respondents were people aged 16-44 years, 11,161 in total. The researchers report three main categories of content – biological, risk behaviour reduction and psychosocial. Within the biological category are topics related to the mechanical and biological aspects of human reproduction, with content on the development of the female and male human body, how children are born, as well as sexual intercourse. For the second category, related to the reduction of risky behaviour, the content touches on the consequences that risky sexual behaviour can have. Topics related to sexually transmitted diseases and prevention strategies – contraception and family planning - are covered. Within the psychosocial category, there are themes related to homosexuality, masturbation, the pleasure of sexual intercourse, refusal of sexual intercourse in case of disinterest, emotions and relationships. This distribution was also the basis for their research, which found that for research participants aged 16-29 years who felt they did not have enough knowledge during their first sexual experiences, there was a particular need for more knowledge in the psychosocial area, as well as a need for more information about the health risks of sexual behaviour and protection against it. In the case of the psychosocial content category, I am referring to topics related to homosexuality, masturbation, sexual pleasure, emotions, etc. Research shows that topics in the psychosocial category are suppressed in families (cf. Macdowall Wellings, Mercer, Nanchahal, Copas ... Johnson, 2006; Miller, Kotchick, Dorsey, Forehand, & Ham, 1998). However, this is coupled with the fact that these topics require a good family climate and a great deal of openness because they are very sensitive topics. After all, the topics in the biological category and the category related to sexual behavior reduction are more technical and tend to be more general and do not need to be made as specific. Whereas the topic of masturbation, for example, can be a very sensitive and personal topic, but this is also related to social perception. It is not rare to talk to friends or colleagues about sexual intercourse, but who talks to them about masturbation that an individual may experience during sexual intercourse?

The positive aspects of sexual intercourse tend to be little mentioned in children. The reason is clear, namely to delay sexual intercourse. It is precisely because of the potential risks of sexual intercourse that the content of sexual communication in the family is often directed towards the risks associated with sexual intercourse, etc. Fogarty and Wyatt (2011) talk about topics such as contraception, sexual behavior, and sexually transmitted diseases, which are also mentioned by others (Fischer, 1987; King & Lorusso, 1997; Miller, Kotchick, Dorsey, Forehand, & Ham, 1998; Jerman & Constantine, 2010). They also mention the most discussed topics as: sexual

¹ In relation to this, de Singly (1999) refers to today's family as a relational family. We have a strong relationship with our family because we have a strong relationship with our parents.

² Helus (2004) considers the parenting style of parents as one of the crucial factors of socialization in the family. Baumrind (in Helus, 2004) mentions authoritarian parenting style, permissive and authority-based styles.

³ So we can also talk about sex education.

intercourse, reproduction, family planning, homosexuality, and sexual abuse.

Another categorization of content is offered by Hepburn (1983), who examined communication about sexual topics between parents and their daughters. He classified three categories of topics. The first one he called "big talk", which refers to instruction about conception and menstruation. These topics are included by parents in early adolescence. The second one he called "tea talks" and refers to family values, which are then reflected in the behavior of individuals. The third area he called "social issues". This area is discussed later in adolescence and involves topics related to abortion, unwanted pregnancy and promiscuity.

Research by Whitaker, Miller, May, and Levin (1999) is indicative of content that has a protectionist background – towards safe sex, delaying intercourse, and condom use. Indeed, in sexual communication aimed at children and young people, sex itself as an activity is often constructed as something dangerous.

If we look at foreign research, we find three areas that can influence the content of sexual communication in the family: the sexual experiences of children, the gender-related needs of children, and the gender of the parents themselves.

Raffaelli, Bogenschneider, and Flood (1998) found that whether parents think or know that their children have had sexual intercourse affects the content of sexual communication in the family. If mothers know, the content tends to be about talking about intercourse, what it is like, etc. For fathers, this information causes them to direct their educational activity towards the dangers of AIDS and other STDs, as well as towards family planning.

Inazu and Fox (1980) came to a similar conclusion about the influence of content due to children's sexual activity.⁴ The research was conducted in Detroit and Michigan through interviews with 449 mothers and their daughters who ranged in age from 14-16 years. The interviews with the mother and her daughter were conducted separately but at the same time. The interview data were handled quantitatively. The focus of their research was on sex education between mother and daughter before and after first sexual intercourse. They reported that prior to the daughters' sexual activity, the mother's educational influence was more related to the prevention of sexual experimentation by moralizing and providing general information about sex. The moment mothers know or assume that their daughters are sexually active, their role in the educational process shifts towards a guiding role. They give more practical advice to their daughters and orient them to the topic of planned parenthood (Inazu & Fox, 1980). As children begin their sexual lives, parents feel that their children are closer to parental responsibilities, hence they engage this topic.

Interesting findings in the context of gender can be found in the research of foreign experts (Macdowall, Wellings, Mercer, Nanchahal, Copas ... Johnson, 2006). For 19% of the female research sample, there was a need to talk about the topic of how to refuse a request or offer of sexual intercourse, while for 9% of the male research sample this was the case. While men (21%), much more than women (15%), wanted to know how sex can be more satisfying. This is linked to the fact that it is topics in the psychosocial category that are underserved. It is possible that both men and women have little information in the areas mentioned, that their sex education in the family is not sufficient in this regard. We can hardly say that women receive enough information about how sex can be satisfying or that they are taught more about this topic. Nor can we say that for men, sexual communication in the family is much more guided on how to say

no than on how sex can be satisfying. The difference is due to the needs of the recipients of sex education.

This research also found that both fathers and mothers are much more likely to discuss the topic of avoiding sexual intercourse and the risk of STI and HIV transmission with girls than they are with boys at the same age. While the use of protection is much more discussed, by both mothers and fathers, with boys than with girls. Other research (Dilorio, Kelley, & Hockenberry-Eaton, 1999) also confirms that STDs and condom use are more frequently discussed with sons. Sexual communication with daughters is directed more toward delaying sex, and with boys toward being careful about sexual intercourse. The required abstinence for girls is intended to lead to the prevention of pregnancy and disease. These results are consistent with other research (Raffaelli, Bogenschneider, & Flood, 1998⁵; Swain, Ackerman, & Ackerman, 2005⁶). The authors (Raffaelli, Bogenschneider, & Flood, 1998) explain this by stating that the impact from the absence of sexual communication may be more severe for daughters than for sons. This is a phenomenon that tends to be described in the context of the so-called natural sexuality discourse as a double standard in judging male and female sexual behaviour. Indeed, women's sexuality is more regulated and controlled as a result of this construction.

There is no doubt that the content of sexual communication in the family differs according to the gender of the parents. Research shows that mothers communicate much more with their children about the negative consequences of sexual intercourse than fathers (Byers, Sears, & Weaver, 2008; Eisenberg, Sieving, Bearinger, Swain, & Resnick, 2006). How can this fact be explained? It is possible that the mother can imagine more realistically than the father what would take place if, for example, an unwanted pregnancy or STD occurred. It is also true that this consequence would affect the woman-mother much more than the man-father. Another possible explanation is that fathers are much more reluctant than mothers to admit that their children have had sexual intercourse, especially for girls, as indicated by the findings of Jerman and Constantine (2010).

The contents vary with the age of the children. Jerman and Constantine (2010) argue that as children get older, the number of topics discussed with children increases. Other researchers such as Raffaelli, Bogenschneider and Flood (1998) concur and further discuss that in addition to the age of the children, similarity is influenced by the age of the parents, the composition of the household, the education level of the parents and the employment status of the mother.

2 Methodology

This paper focuses on a sub-part of a larger research investigation that was part of a dissertation project (Kamanová, 2018). Its aim is to find out what is the content of mother-daughter sexual communication on the topic of sexual intercourse and how mothers communicate with their children on this topic.

A qualitative research approach was chosen to answer the objective. A total of 31 semi-structured interviews were used for data analysis, from 26 respondents. According to the established rules of qualitative research, all interviews were recorded and then transcribed. The recorded interviews lasted between 40 and

⁴ The research was conducted in Detroit and Michigan through interviews with 449 mothers and their daughters who ranged in age from 14-16 years. The interviews with the mother and her daughter were conducted separately but at the same time. The interview data were handled quantitatively.

⁵ Raffaelli Bogenschneider and Flood (1998) conducted a survey in the Midwestern United States. Respondents included 666 mothers and 510 fathers and their 15-year-old child. Children and their parents were interviewed. Differences in the resulting numbers of respondents are due to the fact that some children lived with only one parent. In total, 1176 mothers and fathers participated in the survey, completing a 131-item questionnaire, and 1227 children aged 15 years completed a 160-item questionnaire.

⁶ Swain, Ackerman, and Ackerman (2005) conducted extensive research that focused, among other things, on the characteristics of parents who do and do not implement sex education. The research involved 866 parents from Wisconsin and Minnesota who had children ages 13-17. The sample consisted of 282 men and 584 women. Parents were interviewed by telephone. The constructed questionnaire contained 12 scaled questions.

120 minutes. Data were collected in four phases with respect to the process of continuous data analysis.

The primary criterion for sample selection was that the mother had at least one child aged 12-18 years. The reason for the choice of the age of the child is the fact that it is a period of physiological changes and a period of first sexual experiences, which is evidenced by the results of research by Weiss and Zvěřina (2009), whose team conducted continuous research on sexual behaviour in the Czech Republic in 1993, 1998, 2003 and 2008. The authors report that in the last 10 years the age of first kiss, first date and falling in love has stabilized around the age of 15. The age of first non-coital activity is around 16 for males and 17 for females, and the age of first sexual intercourse is around 18, with adolescents entering into their first long-term partnerships around 18.

The research participants were selected by snowball sampling method, by randomly approaching potential respondents and also from the circle of acquaintances. However, adherence to the pre-determined criteria for the sample was essential, as was the variability of the sample.

The approach adopted for data analysis was based in part on the use of two strands of grounded theory represented by Strauss and Corbin (1999) and Charmaz (2006), in particular the procedures of open and thematic coding, analytic induction and constant comparison.

It is evident from the nature of qualitative research that the results present the respondents' point of view. The research results cannot be generalised. Of course, the issue of data validity is also relevant due to the sensitivity of the topic (Jermaň & Constantine, 2010; Lefkowitz & Stoppa, 2006). To increase the validity of the research, I used temporal triangulation (collecting data at different times and over a longer period of time) and local triangulation (collecting data at different locations). To increase the validity of the research, I also used the technique of triangulation of the people collecting the data, as some of the data was collected by other researchers. Obviously, a certain limitation of any research work is the data analysis itself, especially in the case of the subjectivity of the researcher himself. Although it is everyone's endeavour to do their best to reduce that subjectivity. In relation to this, I have used the technique of peer reflection. I continuously consulted with them and presented them with partial results of my analysis. This technique allowed me to broaden the possible perspectives on the analysis and to check my own analytical procedures and results.

3 Main results of the research survey

The content that mothers convey to their children in the course of communication about sexual topics is very differentiated. However, they are mainly related to the following three topics: phenomena associated with physiological changes, we can talk about physiological events (menstruation, polo, etc.); autoeroticism; sexual intercourse.

In the context of the sexual socialization of children, the physiological events that accompany the adolescence of both daughters and sons are particularly relevant. "So I said to him, 'Well, that's just what happens to big guys, and so that's kind of the way to go when he's a big guy, so that's kind of the way to control it.'" (Dara) In this case, the poluce is constructed as an indicator of masculinity. In contrast, some mothers portray pollution as a condition of masculinity. The topic of pollutions featured prominently in the so-called deferred message⁷. The mothers delegate the message to another person, which is quite often the mother's partner or father, as we can see for example in Adela's case: "but as a son I postponed it to my daddy, let them talk about it, because I don't know what to say to him either". We learn from Adela's account that she did not find sexual

discussion with her son entirely easy and tried to shift responsibility to her father⁸. The mothers also postponed the disclosure until later, on the topic of erections, "Nothing, we've moved on. Just: 'Honzik, you know. That's it, it'll go down in a minute. Like that you, you pee in peace. And when you want to, we'll talk about it.' But it hasn't come to that yet." Hedwig offers her son another solution by delaying the sexual communication.

Menstruation resonated very strongly in the data, but especially towards daughters. In their testimonies, mothers described their first menstruation as an unforgettable experience. Most mothers were able to describe the moment they got their first period. A very strong spatial memory is evident in the reflections. Mothers vividly describe where they were when they first got their period, on what occasion it was and in what premises. Further, they are able to accurately describe with whom they discussed the onset of menstruation, whereas they are unable to age the onset of menstruation accurately. Menstruation itself was a very significant moment for them, which is then reflected in their own daughters' experience of menstruation.

The moment of the first menstruation of daughters is perceived by mothers as a purely positive event, which is often accompanied by congratulations and the rapid spread of this event to other family members or acquaintances. Menstruation is constructed as a symbol of health because it makes a woman able to fulfil her maternal role. Menstruation is strongly linked in the accounts to the possibility of having children. It is verbalized as a condition and gateway to pregnancy, with all the necessary accompanying symptoms such as pain or mood swings. However, these accompanying symptoms are described as a toll of motherhood. With menstruation, mothers report pain, for which there is a tendency to identify. Mothers make inferences about the level of their menstrual pain based on the level of pain their daughters will experience.

Menstruation is presented in the testimonies of the participants as a sign of adulthood: "Well, that's what we said, like she's just grown up, she's not a puppy anymore, and she might be when she starts to fuss and starts to bleed, because they saw it..." (Jana) The testimonies even included the ritualization of this act - eating dinner together, buying menstrual aids and bras. Monika even describes a mother-daughter celebration: "When she got her first period, we said she had grown into a woman. And that we were going to celebrate it yeah ... So I think it should be well, because she became a woman That's the initiation into a woman."

From the testimonies we learn that mothers say that daughters become more vulnerable at the moment of menstruation and therefore need more protection and care. It is also a moment that provides the impetus for more intensive educational action by mothers in this area. This is due to the possible complications associated with menstruation and the delayed social role of the mother, as described by Josefina, for example: "But it's a fact that like in me it used to say, but now it's no fun, since it has. Anything can happen now."

Menstruation and polo are both constructed by some participants as a given, as Marie describes, which we cannot control: "That it is a natural thing, from a certain age onwards, is a given. That as we eat, as we breathe, we women have to bleed." Or Milena: "Marta, it's just part of life as(.). You'll have breasts, you'll get your period(.) I say that's just the way it is."

Another content area is autoeroticism. This is a topic that is a silent topic for many of the participants. It is not just a matter of silence towards one's own children. While the mothers were able to talk about themselves as sexually active persons, none of the mothers associated their person with autoeroticism. If mothers do talk about it, autoeroticism is constructed by mothers as an intimate and private matter: "My daughter, I mean I would say she has been into it from an early age. So there we rather dealt

⁷ Delayed communication also appeared in other topics, but was more pronounced in the topic of pollutions or erections.

⁸ For sons, mothers are more likely to use delayed communication. They try to refer to fathers as socialising agents. However, in many cases, sons rather require mothers.

with it not to go anywhere, ... that it's nothing like wrong, but it's not for strange eyes like ..." (Adela) For this reason, most participants do not talk about this topic with their children. This behaviour of the mothers is related to their own boundaries of intimacy and to the perception of the unimportance of this topic. At the same time, this image reflects a social norm – autoeroticism is not talked about⁹.

In mothers who talk to their children about this topic, we encounter targeted regulation in their statements, which takes place in two variants. There is the regulation of the activity itself and the regulation of the environment where the activity is carried out. In the statements whose content is the regulation of the activity, we find negative statements about autoeroticism. Autoeroticism is the topic that was the most controversial in the interviews conducted. For this topic, religious beliefs were strongly associated with attitudes towards autoeroticism. Those mothers who declared Christianity as their professed religion referred to autoeroticism as an inappropriate activity. These mothers' beliefs were strongly connected to their accepted norms. Monica conveys the message to her daughter that it is a substitute: *'Come on, so again...we've come across this topic with my daughter. So the explanation was given by me, like that's what it is, like to me it looks like a substitute yeah. That...of course I don't see anything like criminal about it. No way, but that...it's just a substitute. That's not the way to go in my opinion, yeah.'* The testimony should lead to an end to this activity. For Adela, again, environmental regulation can be seen, *"So that maybe when we're watching TV, that she should keep it, that...yeah, that we just kind of suggested...well, that she should hide with it."* Monica described herself as a believer. She professes to be a Roman Catholic. According to other statements, I believe that her opinion on masturbation is formed in light of the official opinion of the church to which the participant adheres. Mothers who discuss this topic with their children often point out that it is an activity that should be done in private. Mothers try to refer autoeroticism in children to other spaces. Mothers who used environmental regulation did not use activity regulation.

For mothers who communicated with their children about sexual intercourse, I encountered in their accounts a disavowal of sexual intercourse by the mothers themselves. In the data, I identified three possible levels of communication about intercourse that answer the following questions: what it looks like (explanation of the form), what is gained (explanation of the benefits), and what is needed (conditions of intercourse).

Some mothers explained sexual intercourse on the basis of the emotional side of intercourse: *'when two people like each other'*. This is more of a pseudo-explanation, the mothers do not go into detail - *"it happens when two people love each other"*; *"it is a kind of caress between a man and a woman"*. Sexual intercourse is explained as an act of love and a certain closeness between the partners. Children learn nothing about the physical union between a man and a woman. However, there are also statements in the data which are more specific. The form of sexual intercourse is described as *'union'*. The mothers convey information to the children about the penetration of the man into the woman and about the genitals: *'Yeah, that just – yeah, and so I told them that the man had a penis, that the woman had like, I don't know how I told them now (laughs), but that there must be some kind of fondling. So I told them cuddling. And that the man has the sperm and the woman has the egg and there's going to be a union and that's going to make the baby, right.'*

A switching mechanism was evident in multi-child families. For some children, mothers explained sexual intercourse using the first option and for another child they worked with the second option. The boundary between the two modes is the acquisition

of sexual events in the form of the initiation of menstruation, pollutions, first kiss or first sexual contacts with the opposite sex.

The benefit of sexual intercourse was a frequent theme in the data. The mothers' statements then refer to gain or threat. I encountered gain, for example, in Josephine's or Angela's statement, *"And when the moment comes, she will be theoretically ready and it will be a wonderful experience for her."* The gain of sexual intercourse can be pleasure. Mothers, however, tend to describe intercourse as a threat.

Sexual intercourse is also constructed as a conditional act. Mothers express to their children certain conditions that they should observe during sexual intercourse. Mothers make the age of legal maturity a condition for starting a sexual life: *"And I think I've discussed this with him before, that it's punishable under 15 and all that."* (Dagmar) and psychological maturity, as with Alena: *"I try to set an example by always saying that it's about something else when she's more mature, that those kids can't get anything out of it, that it's just not for kids, like she feels like she's not mature for it herself, so I'm trying to be like."* Boys are more likely to be warned by their mothers about the limits of legal maturity, and daughters are more likely to be warned about psychological maturity. Mothers in this case apply a double standard.

Most mothers associate sexual intercourse with love. Some mothers even attribute mythical qualities to intercourse – it should come at the right time, it should be with the right person, it is something unique: *"... that it's going to carry with it for quite a long time when it's the first time, that it's just going to be something special, it should be something special."* (Emilie) In Maria's imagination, sex is the culmination of the relationship, as it is for Monica: *"...that it should really, that it should be like the culmination of the relationship yeah."*

Sexual intercourse is also relationally conditioned in the mothers' accounts. Sex must be performed with someone with whom one is in a relationship. The mothers construct it as an activity not to be realised with someone one does not know: *"... and that I was just telling her that I would like it to be a boyfriend, so that she would be with him for a longer period of time, so that it wouldn't be really, just at the disco, that it's quite important."* (Emilie) For mothers, it's not about one-off contact, it's about contact with someone the child is in a relationship with¹⁰. Unlike the modern scenario, it is not about the individual having sex with someone they love, but with someone they are in a relationship with.

For mothers who had children of both sexes, it was evident that they communicated relational conditioning more intensely to their daughters than to their sons. I suspect that the reason for this is that mothers are constantly threatened by the threat of unplanned daughter pregnancies. The relationship with the partner with whom the daughter has sexual intercourse is then at least a partial insurance that the man will not threaten her or, if necessary, will take part in dealing with an unexpected situation.

Most mothers also strongly verbalized the conditioning of personal preferences in their statements. Daughters and sons are the ones who decide with whom to have sexual intercourse. In this context, mothers clearly defined what is wanted sexual intercourse, what is abuse or rape. Boys were even warned by their mothers that they could be accused of abuse etc. The solution to this situation is seen by the mothers as having their sons have sex with someone they know. This fact is evidence of the transformation of the discourse on women's passivity and men's activity that has occurred in the traditional sexual cultural script.

Sexual intercourse is conditional on protection: *'And now that he's fifteen, I often say goodbye to him in a way that , ... like remember your best friend's name is a condom.'* (Dagmar)

⁹ Sexual taboos are historically and culturally conditioned. Despite the de-tabooing of sexual topics in society that has occurred in the postmodern era, autoeroticism is still a highly taboo topic. The tabooing of sexual topics in society is addressed in studies such as King and Lorusso (1997); Jaccard, Dittus, and Gordon (2000); Walker (2001) and Byers (2011). Sexual taboos are related to cultural sexual scripts.

¹⁰ Giddens (2012) uses the term pure relationship.

Martha places a lot of emphasis on protection because of STDs: *"I have not talked about contraception with someone like this yet, so if he doesn't know the person longer and like it's going to be accidental then no way(.)"* Martha's quote also already demonstrates a shift towards a more postmodern way of thinking about sexual behaviour, where it's not about having sex with someone I like. He admits to one-off intercourse, which is evidence of a move away from the concept of romantic love that is typical of the modern sexual scenario.

Cecilie has a very strong emphasis on protecting her son from her partner's pregnancy, which is why, for example, she buys condoms for her son: *"My partner says to me, 'Are you buying them condoms now?' And I say, 'Where are they going to go now and I'm going to be nervous here later tonight that they're going to go, that someone is going to risk it?' I say, 'He's coming from training, where's he going, I'm not going to worry about it now, I'm not going to send him somewhere for petrol tonight.' For me it's a reassurance, and that I have that peace of mind. Even if it's not total birth control, but if nothing else it's this. I know a lot of people probably won't agree with me buying it for him."* Cecilia forms a kind of coalition with her son, taking responsibility for her son's activity upon herself. Cecilia extends her son's childhood. Dagmar's take on the situation is similar to Cecilie's. The invention of contraception has greatly transformed the way the mother and father acquire their roles¹¹. With this method of protection, there is a greater degree of control over the acquisition of these social roles. Contraception offers reins for children and peace of mind for mothers: *"I don't really know. Maybe in the back of my mind I hope that being able to control my sex life through contraception will never be an issue on the agenda."* (Angela) Contraception allows girls to have protection in their own hands, as mothers encourage them to do, as mentioned by Simona or Magda for example: *"Sylvy, but if you do, you just have to come to me when you need to and we have to agree on contraception because you can never trust a boy and you have to protect yourself."* In some mothers' accounts, men are constructed as the irresponsible ones. Daughters are encouraged to be active.

Mothers often use information correction during the transmission of sexual intercourse messages¹². The goal is to correct information or clarification that children have or that is directed to them. For example, Vera channeled her son's idea of intercourse: *'When Honza said that the two of them were lying in bed and kissing. So I do-I present it to them in the spirit that if I like him.'* In Vera's case, the correction was purely substantive.

But what is the purpose of transmitting this content? Mothers are trying to influence the acquisition or continuation of specific social roles for their children. Rather, they focus on delaying the social role of the mother and, in this context, on prolonging the duration of the social role of the partner. Mothers do not direct information towards children learning the skills of sexual intercourse. The mothers' instruction is constructed in such a way that it is intended to lead to delaying the initiation of sexual intercourse or to protection during sexual intercourse.

At the most general level, we can say, based on the participants' statements, that the goals of sexual transmission are oriented towards the present, in the sense of accompanying, guiding and leading the children through life, and towards the future, i.e. towards upcoming life events. Participants mentioned that it is essentially about *'preparing for life'*. Vera even talks about *'dressing for life'*. Many of these general statements about general goals oriented towards the present and especially towards the future can be found in the participants' statements. Many of the mothers' general statements are related to the phrase *"success in life"* or *"succeed in life"*. However, it is important to understand what this success is linked to. Analysis of the data shows that the aforementioned phrases are linked to success in a

particular social role. Success means the conscious and desired acquisition of social roles and the readiness for them, as well as the absence of a moment of surprise or negative feelings when acquiring certain social roles.

Mothers use different forms of communication when teaching about sexual intercourse. Three forms can be identified in the data: sexual facts, sexual instruction, and sexual example. Mothers use these forms separately or in combination. By combining the forms, mothers try to emphasize the importance of the message and increase the effect of the message. What was the same for all the participants was the negative delineation towards so-called sexual tales, as we see for example in Jana: *"Like it wasn't that stork, how they walked around with it just. Jesus, it's pretty stupid to tell kids like that."* Mothers often heard these tales in their childhood, or some parents still use them according to them.

Sexual facts are brief statements about a given sexual issue. It is a factual and concise statement of specific content. An example can be found in the statement of Mary, who mentions how she described her daughter's menstruation: *"So we explained that we need to know that the number of eggs is a given in a woman and when it goes away, for example... Well, just that it's like the eggs don't develop during life, that they've been there since like since birth... once a month the egg is released and travels and if it is not fertilized on that pathway, it leaves with the blood, that's why every month the woman bleeds ..."* The excerpt shows that the message is factual and descriptive, without any value or emotional subtext. The normative character of the message does not appear.

This form is often used when the interest comes from the children or when the topics are more or less constant. The purpose is not to define how the child should behave, but rather to inform and present possible solutions. This form is aimed at giving the children an idea of what to expect. Sexual facts are used to supplement children's knowledge. The use of the example of animals was widely used in this form¹³. The mothers used their lives and behaviour to approximate the world of humans: *'Well, now we've got Besinka¹⁴, and she's started to fight now, and we also discussed why she fights like that. Or what it's like, and how the dogs are different from the people.'* (Jana)

Another form that can be encountered in the mothers' accounts is sexual instruction. This form is normative in nature. Sexual instruction carries a clear message. It is often expressed in a conditional way, e.g. *'you should use a condom when ...'* or *'be careful not to catch anything'*. The purpose is to instil certain principles and rules. Through sex education, mothers present their opinions, assessments, attitudes, etc. It is no longer a matter-of-fact and brief presentation of information.

Boundaries and norms are set with the help of sex education. Bára, for example, mentions the example of her daughter who found an older partner at an age when she was still under the legal limit: *"... She actually met her boyfriend when she was 14, so we talked about it at home, that there was no way we were going to have sex before 15. This example can also be used to demonstrate how children's sexual events transform the content of sexual scripts. Similarly to Bára, Marie describes, "That's criminal, I told her that if she's going to have sex and she's not 15 or she's going to be 15 and she's going to have sex with someone who's not 15..."*

When giving sex education, mothers often refer to professional public or legal measures in order to multiply the importance of the message and to add weight to the message. In this form, mothers make heavy use of the so-called 'shield of authority'. The authorities most often referred to by mothers are the well-known sexologists Radim Uzel and Jaroslav Zvěřina. However,

¹¹ Possible (1999) identifies contraception as one of the determinants of the third sexual revolution.

¹² I encountered correction of information on other topics as well, but on the topic of sexual intercourse it was very pronounced.

¹³ The most common example was the use of pets. Those that the children know, are in contact with and have a close relationship with.

¹⁴ This is a female that Jan's family breeds.

these claims are undoubtedly a reflection of the influence of the media world. They support their opinions by saying that this or that expert has the same opinion, that they have read it in a professional book, etc. The shield of authority is intended to reinforce the credibility and legitimacy of the mother's claims or actions externally. The mothers outwardly verbalize that it is not their decision, but that they are following the expert's opinion. In doing so, they want to support their own argumentation and thus add gravitas, importance and expertise to the sex education.

Mothers use gender comparisons in sex education¹⁵. In her testimony, Vera refers to a situation in which one of her children often suffered from laryngitis: *"... that as it belongs to life to have a cold, a cough and laryngitis, at that moment in our country, so when you grow up, the girl has one problem and the boy has the other problem... So we rather described it, I compared boys to girls and you will have a tendleten task ..."* (Vera)

There is an element of intimidation in sex instruction. It is intended to create a sense of importance and urgency. Dagmar describes a situation where she was giving her son sex ed in order to delay sex: *"...that he might just get pregnant with her or whatever, I say these are things that are threatening of course, but I say be aware of one thing, that you might even get that girl who decides that she's going to say that you raped her and you can do whatever you want and you can't help it in life, you always do, so he got scared of it."* Women are portrayed as dangerous in Dagmar's testimony. They are not portrayed as defenceless and passive as was typical in the traditional scenario.

The third form that mothers use is the sexual example. It is a description of some fact that has happened to someone in the neighbourhood. Mothers also use examples obtained from the media¹⁶, from professionals, or from books. The purpose of this form is basically to show the children in practice the saying that misfortune does not walk on mountains but on people. Typical in the mothers' accounts was the theme described by Magda: *"Or from different experiences of parents who have kids the same age, to be careful at those discos and stuff. Yeah, that actually somebody puts some of those drugs in their drinks, or pills, or just drugs. And then the girl doesn't really know what's going on with her, so that's what happens at these discos and these different events as well..."*

Cecilia, in turn, used close examples in conveying a sexual orientation message: *'Yeah, so quite, quite on that sexual orientation quite, quite we talk about it in relation to somebody being gay, somebody being - they're like two lesbians living here right now, so like yeah, so we talk about it...'* Mothers often use examples from their own neighbourhoods, as these are said to be as tangible as possible for the children. The use of negative examples seems to work. For example, Jana uses a negative example of her sister, who is a single mother: *"Well, I don't know. We have it now, for example, with our Danča, well, we talk about how the Danča just how she has it, like the girls just heard it too."* The sexual example also builds on the mother's storytelling skills and, to some extent, the creative tailoring of the story. The point is not to convey a true example, but rather to describe it in a way that suits the mother's intentions.

In this form, mothers use descriptions of their own sexual events. The mother communicates to the children that what she is telling them is not unique, but commonly happens in society. The mother tries to authenticate certain events. Bára, for example, *"And that I told the children one example that I had unprotected sex and then I had a dream that I got HIV or had HIV and that therefore it's a very good and effective protection against that person not to repeat that situation ... because I experienced such a horror ... in that dream, such a horror that when I woke up I said, never again in my life. That I just... like I told myself that maybe it was a rough experience, but that I really didn't... that I must never. That it's always worth the condom so that they don't*

have to worry for the rest of their lives." By sharing her sexual event with the children, Bára wanted to demonstrate to the children the importance of protection during sexual intercourse.

4 Discussion and conclusion

The content of sexual communication is mainly related to the physiological changes of children, autoeroticism and sexual intercourse. In the case of physiological changes, it is more about the topics of pollutions, erections and menstruation. On the topic of sexual intercourse, mothers often use 'deferred communication', which consists of delaying the topic or shifting it to the child's father or the mother's partner. In mothers' accounts, pollutions are constructed as an indicator of masculinity or as a condition of masculinity. For menstruation in particular, the following discourses are used: menstruation as a symbol of health, as a gateway to the child, as a natural part of life, as a sign of maturity, as a trigger of vulnerability.

Another content is autoeroticism. This is a topic that is widely tabooed among mothers. Other research has come to similar findings (Šilerová, 2003; Miller, Kotchick, Dorsey, Forehand, & Ham, 1998). Mothers address topics with their children that seem significant to them, which in some way threaten the children's lives. Risky topics are addressed. There is no danger to the family or to the mother herself from autoeroticism in the form of unwanted pregnancies of daughters and sons, etc., so this topic is not addressed as often as, for example, sexual intercourse. Another reason is also the limits of maternal intimacy, where masturbation is also a taboo topic in society. For mothers for whom this content is not absent, they regulate the place of masturbation or regulate the activity itself.

The topic of intercourse is presented in three levels that answer the following questions: what does it look like (explanation of the form), what do I get out of it (explanation of the benefits), what is needed for it (conditions of intercourse). For the explanation of the benefits, two discourses emerge - sex as pleasure and sex as a dangerous activity. Mothers mention that sex brings pleasure, but not often. This discourse is more often used with children who already have sexual intercourse. Mothers tend to describe sexual intercourse more as a dangerous activity. Mothers mention the following threats associated with sexual intercourse: pregnancy and sexually transmitted diseases, so they place great emphasis on protection during the act or delaying intercourse. Unplanned pregnancy is cited as one of the biggest threats, and is considered more of a woman's problem. Constructing sexual intercourse as a dangerous activity then brings us to the concept of risk (Beck, 2004; Giddens, 2013). The perception of sexual intercourse as a dangerous activity is the reason why mothers focus extensively on the protection associated with sexual intercourse. We can talk about protection before (meaning before intercourse) and protection during (meaning during intercourse - health protection and reproductive control). In this context, research by Whitaker, Miller, May and Levin (1999) mentions the content of sexual communication, which has a protective background - the orientation towards safe sex, delaying intercourse and condom use.

The research conducted (e.g., Swain, Ackerman, & Ackerman, 2005) is more indicative of the fact that sexual communication is directed towards delaying sexual intercourse for daughters and protection is not much addressed for sons. However, I cannot agree with this based on my research. Protection is directed towards both sexes, but the manner of protection differs. Sons are more likely to be protected during sexual intercourse. For daughters, it is double protection - before and during sexual intercourse. This is because daughters are perceived by mothers as being more at risk in the event of sexual intercourse. Mothers particularly see daughters as a threat of unwanted pregnancy, i.e. acquiring an unwanted social role as a mother. The acquired role is mainly a source of worry for the parents and complications for the daughter. Mothers apply a double standard. Different contents are directed towards daughters and sons.

¹⁵ Comparing the sexes using the example of a brother or sister seems to work.

¹⁶ A specific role is played by the endless soap operas that often fill TV stations.

From research conducted abroad, we learn (Raffaelli, Bogenschneider, & Flood, 1998; Swain, Ackerman, & Ackerman, 2005) that the message that sex is dangerous is conveyed to daughters rather than sons. According to my research, this message is received by both daughters and sons, but the reasons for the danger differ. According to mothers, daughters are at risk of unwanted pregnancies and venereal disease, while sons are at risk of venereal disease and the possibility of being accused of rape.

Daughters are encouraged to be active. The mothers are not interested in having sexual intercourse with someone they like, but in protecting themselves and having intercourse with someone they know. Mothers allow one-off intercourse between children, which is evidence of a departure from the concept of romantic love that is typical of modern times. I have encountered accounts that refer to the concept of co-morbid love rather than romantic love (Giddens, 2012). Mothers condition the initiation of sexual life on physical and psychological maturity. Boys are referred by mothers to the limit of legal maturity and daughters to psychological maturity. Mothers apply a double standard in this case. Sexual intercourse is also associated in mothers' accounts with personal preference and with relationship. Mothers do not condition sexual intercourse on love but on relationship. The main thing is not to be in love, but to have a good relationship - a partner with whom I understand, with whom I have similar interests, etc. The relational conditioning is communicated to daughters much more intensely than to sons. All of these attributes reflect the concept of pure relationship discussed by Giddens (2012).

The content and frequency of sexual communication is also influenced by specific events related to sexuality and sexual maturation that take place in children. I refer to these events as 'sexual events'. The specific sexual events are the physiological and relational changes that children experience during adolescence: breast growth, the appearance of pubic hair and beards; nocturnal sex in boys and menstruation in girls. The first relationship, first sexual intercourse and the associated first sexual experiences are also significant sexual events. A very significant turning point is a stable partnership. Raffaelli, Bogenschneider and Flood (1998) found that whether parents think or know that their children have had sexual intercourse influences the content of sex education in the family. If mothers know, the content of sex education tends to be directed towards talking about intercourse, what it is like, etc.

But what is the purpose of transmitting this content? With physiological changes, the aim is rather to inform and prepare children for the upcoming events. With autoeroticism, the aim is more towards regulating the activity or the environment where it is performed. For intercourse, they are intended to lead to delaying the initiation of sexual life - protection before, or protection during, intercourse.

On the basis of the findings, I believe that mothers deliberately influence the sexual socialisation of their children, mainly for profit, both for the mothers and for the children. The mothers want to minimize the risks that may arise from the absence of deliberate maternal action - sexual diseases of the children, unplanned pregnancies, etc. At the same time, by their deliberate actions, they want to increase the children's chances of experiences - a happy partner life, experience in sexual intercourse, etc. These findings lead us to consider parallels with the risk society discussed by Beck (Šubrt, 2007) and the experience society characterized by Schulze (Šubrt, 2008).

It is evident that the contents that are transmitted to children are constructed on the basis of cultural scripts, both modern and postmodern (Katrňák, 1999; Fafejta, 2016). Particularly in statements related to sexual intercourse, these traces of cultural scripts are evident. The data confirm the retreat of the discourse on the passive role of women and the active role of men. Women are encouraged to be active in protecting themselves and in being active during sexual intercourse itself.

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Primary Paper Section: A

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