

'Pleasure Is Not in the Science Programme!'

When Anthropology Engages with Sex Education for Teenagers

Nicoletta Landi

Abstract

In this article, I analyse how public policies concerning teenage sexual health become educative practices in the Italian public healthcare system. In particular, I investigate sex education addressed to (pre)adolescents starting from an action-research I have been carrying out within a free-access counselling centre for teenagers named Spazio Giovani in Bologna. I focus on how international and national dictates, together with local implementations, define and manage teenagers' sexual health. Sex education involves various stakeholders such as policy makers, health professionals, teachers, families, and teenagers. They each perform different socio-political visions concerning sex, sexuality, health, and adolescence. Sex education can be either normative or used to empower teenagers' access to information about sexual and relational wellbeing. Anthropology can highlight the complexity and critical aspects of teenage sexual promotion and, at the same time, suggest inclusive and plural ways to implement comprehensive sexuality education. In this frame, engagement – both as a theoretical approach and an operative vocation – can constitute a tool to put into practice anthropology as public and applied knowledge.

Introduction

This article discusses how policies concerning teenage sexual health are translated into educative practices in Italy, and how they determine adolescents' access to information about sexuality and wellbeing. I focus on sex education in order to stress how both policies and local health services express multiple visions about adolescents' sexuality. In doing so, I want to highlight how anthropology can play two mutually informative roles: firstly, as a deconstructive tool for disclosing the complexities embedded within sex education, and secondly, as a constructive tool for developing comprehensive programmes with other stakeholders¹. Both the processes of deconstruction and construction demonstrate the extensive capacity of 'engaged' anthropology. An engaged anthropological approach can act as a form of social critique that highlights and contrasts inequalities. It can be particularly characterised by responsibility and reciprocity concerning the researcher's relationship with the community they are dealing with (Low and Merry 2010). It can also be militant, as Scheper-Hughes (1995: 410) suggests, stressing the necessity of ethically grounded anthropology and it can be public, as Robert Borofsky (2000) emphasises, with research impacting societies.

I use these references in order to focus on sex education's complexity and, at the same time, to emphasise anthropology's potential role within the public debate about teenage sexual-health promotion. I chose to analyse sex education for teenagers in the contemporary Italian context through action-research involving various stakeholders¹. Methodologically, I refer to René Barbier's idea of action-research. Inspired by Kurt Lewin's work (1972), Barbier (1977) considers action-research to be social work that has socio-political and existential implications for all those involved. A fluid positioning of the researcher seems to be fundamental to both articulating the meanings of the field and investigating – more practically – alternative ways of doing polymorphous engaged anthropology (Markowitz 2001: 43). This means not only using a range of ethnographic techniques as Markowitz suggests, but providing a critical and personal understanding of the topics being studied. Because of its participatory and inter-subjective characterisation, action-research can represent a useful methodological tool for anthropology that aims to be socio-politically engaged.

¹ I include myself among those. Minors' participation in the W l'amore's trial was authorised by their parents. For what concerns my research, I got explicit permission to write and publish about stakeholders' experiences within this trial directly from them. During the whole action-research process, in fact, I have always clarified I was both a practitioner and a researcher aiming to analyse and write (and eventually publish) about what I was observing and being part of.

Through my investigation of sex education provided by the Italian public healthcare system, my goal is to stress how teenage sexual-health promotion is influenced by plural and contradictory visions about adolescence and sexuality frequently being heteronormative and stereotypical in their approaches to teenagers' experiences. At the same time, I aim to reflect on how anthropology can contribute – in dialogue with other disciplines – to the provision of a more comprehensive vision of teenage sexual health. During a three-year action-research study, I have been leading at a Bologna counselling centre named Spazio Giovani (Youth Space) together with its professionals and other stakeholders (local policy makers and health workers, schoolteachers and headteachers, teenagers and their families), I have sought to deconstruct sex education's critical aspects and construct more inclusive ways to promote teenage sexual health. Within Italy, Bologna is a particularly lively city due to its popular university, and the presence of many organisations promoting social and gender equality is palpable.

In contemporary Italy, however, national laws do not regulate sex education for teenagers. Yet even if sex education is not nationally implemented, there are many projects and services run by public institutions and associations promoting gender equality, gender-based violence prevention, and sexual/relational wellness. Sex education is mostly covered by public health centres specifically addressed to the youth. Spazio Giovani, part of the national healthcare system, is one of these public services. Its foundation responds to a wider socio-political and educative vision concerning teenage sexual health as it is supported by public funds implemented by international and local policies.

Spazio Giovani is a free-access counselling centre where teenagers and adults (mainly teachers, health educators, and parents) can meet psychologists, gynaecologists, obstetricians, and health educators that specialise in the care of teenage sexual health and wellbeing. Its professionals also lead two hour long edutainment² group activities held at the youth centre for high school classes from the surroundings in order to provide them some basic information about safe sex and to introduce the youth centre to the students. Adolescents (aged between thirteen and nineteen) are allowed to visit the centre and to make appointments without their parents' consent. According to Italian law³, minors

2 This definition is attributed to Bob Heyman, a National Geographic documentarist, who coined it in 1975. The term denotes educational entertainment.

3 Legge per l'istituzione dei consultori familiari, 27 August 1975 n. 405. Available at http://www.salute.gov.it/imgs/C_17_normativa_1545_allegato.pdf (accessed 21 June 2016).

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can have free and anonymous access to contraception and reproductive-health services. Spazio Giovani is part of the Consultori familiari network (family planning clinics) that was established in 1975 with a specific focus on women and families. The years between 1968 and 1978 saw a series of historical landmarks in the development of sexual, reproductive, and civil rights in Italy.⁴ Today, the regional government controls the organisational and financial management of both Consultori familiari and Spazio Giovani. Since 1987, in the region of Emilia-Romagna (where Bologna is located), the Consultori familiari network includes a number of Spazio Giovani centres addressing sexual and psychological needs of adolescents. The Spazio Giovani staff also works with many public schools through sexual-health promotion programmes set up by Spazio Giovani professionals and often involving teachers and families.

My investigation started with participant observation at Spazio Giovani, followed by action-research that specifically focussed on an experimental sex education programme called *W l'amore*. The programme was inspired by the Dutch project *Lang Leve de Liefde* (Long Live Love), which is aimed at teenagers aged between twelve and fourteen, schoolteachers, and families. An active research role on my part has been possible due to my expertise in sex education: apart from being an anthropologist, I am a freelance sex educator. I lead sex education programmes – within public schools, local associations, and organisations addressing the youth – targeting both teenagers and adults about safe sex, sexual plurality, gender dynamics in relationships, and sexual rights.

As a result of the action-research, I became part of the social dynamics within Spazio Giovani and also established wider sustained relationships with the stakeholders involved in the *W l'amore* trial: local policy makers, Spazio Giovani staff, schoolteachers, teenagers, and their families. Using Olivier de Sardan's conceptualization of 'co-actors' to value and analyse the various social representations of teenage sexual-health promotion as part of the complexities embedded within sex education (Olivier de Sardan 2009: 31). At the same time, since ethnographic research is not solely aimed at increasing anthropological knowledge, these methods have also had an effect on those whom I met at my fieldsite.

4 The Italian law regulating abortion dates back to 1978: *Norme per la tutela sociale della maternità e sull'interruzione volontaria della gravidanza*, 22 May 1978 n. 194. Available at http://www.salute.gov.it/imgs/c_17_normativa_845_allegato.pdf (accessed 21 June 2016), and the law that introduces divorce is from 1970: *Disciplina dei casi di scioglimento del matrimonio*, 01 December 1970 n. 898. Available at http://www.esteri.it/mae/normative/normativa_consolare/serviziconsolari/stato_civile/1970_legge_1.12.n%20898-disciplina_dei_casi_di_scioglimento_di_matrim-divorzio.pdf (accessed 21 June 2016).

Spazio Giovani and W l'Amore

During edutainment² activities, while sitting together with Spazio Giovani professionals waiting for their questions, teenagers often asked when it was the right moment to have sex, how sex worked, or how it was possible to avoid unwanted pregnancies and STIs⁵. 'When a boy and a girl think it's the right moment to have sex, they should think about safe sex', and 'sexual intercourse is when a penis penetrates a vagina'⁶, are some of the most recurrent answers and statements I have heard while observing Spazio Giovani professionals' work with the classes visiting the youth centre. Through the activities of this public-health service's professionals, specific visions concerning sexuality and adolescence are embodied and performed: the preliminary goal of my research was to investigate them in order to highlight sex education's critical aspects. I especially focused upon manifestations of heteronormativity and stereotypical representations of adolescence.

After an initial phase of observation of Spazio Giovani edutainment activities, the study became increasingly participatory, as my engagement in the field became more extensive. Once noticing my competency in both anthropology and sex education, Spazio Giovani's general manager began to ask for my opinion on their work mainly because of my knowledge of LGBT (Lesbian, Gay, Bisexual, Trans) and gender-related topics. As a result, my role at the youth centre became more active and engaged: I began to gain relative freedom to express opinions and suggestions about what I was observing, especially regarding Spazio Giovani workers' frequent heteronormativity, cultural relativism, and a general lack of reflection on how gender models influence sexuality. 'Why do we always present condoms as a male issue? Why don't girls carry a condom in their purse? Why does every girl or woman have a tampon in her purse, but never a condom?' I asked a Spazio Giovani psychologist. She answered, 'Because they would be considered sluts. But it's true, we should invite them to know how to use condoms or to carry them.' Another psychologist replied, 'Girls' problem is that they don't feel part of the contraception or pregnancy prevention negotiation process. I felt the same social shaming while I was carrying condoms in my purse without having a stable relationship.'⁷

5 Sexually transmitted infections are infections that are commonly spread by sex, especially vaginal intercourse, anal sex and oral sex. Their causes are bacteria, viruses, and parasites.

6 Bologna, November 2012.

7 Bologna, June 2013.

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As I saw it, besides gender models influencing teenage sexuality, sexual orientation and socio-cultural background needed to be considered further, or differently, by Spazio Giovani workers. According to my observations, ethnicity in particular seemed to be perceived and described as rigid and stereotypical. For example, Spazio Giovani psychologists often sounded very concerned about the ways of dealing with what they saw as Muslim boys' homophobia and their approach to (young) women. 'Arab boys are homophobic and they don't usually respect women's rights. It's part of their culture,'⁸ claimed one of the youth centre's professionals. Their assumption was that boys with a Maghribi origin have a widespread homophobic attitude to homosexuality and that generally, they do not respect women for cultural and religious reasons. In the same way, according to Spazio Giovani staff's words, girls from South American countries are culturally predisposed to teenage pregnancy: 'For South-American girls, it is normal to have babies when they're young. Just like their mothers did. It's a cultural thing.'⁹ Considering socio-cultural and religious factors – especially those related to Catholicism and Islam – the perception of teens' sexuality and attitudes to sex as predictable and rigid reduces adolescents' identity complexity (Remotti 2007). Spazio Giovani staff's approach to teenage subjectivities – according to my observations – appeared to be often reductive when ethnicity and religion were factored in, and thus minimised their complexity and multiplicity.

Besides teenagers' multiple subjectivities (Salih 2005), another problematic topic seemed to be homosexuality. Heterosexuality was always taken for granted while dealing with the students. A psychologist once told me, 'It's true, we always think about the kids we see as straight. We talk about homosexuality only if they ask questions about it. We should probably learn to talk about sexual orientation in a more comprehensive way and include sexual diversity in our discussions with the classes.'¹⁰ Talking about sex merely in terms of heterosexual intercourse, in fact, does not consider sexual and gender-related plurality. In this scenario, I articulated my presence within the service as an anthropological researcher, but also as a consultant: someone who could highlight the critical aspects of Spazio Giovani staff's work and who was able to suggest alternative ways to define and manage teenage sexuality and sexual health.

8 Bologna, April 2013.

9 Bologna, November 2013.

10 Bologna, June 2013.

Between 2013 and 2015, I worked with psychologists and health professionals to co-design a project that could involve teenagers, their families, and teachers from junior high schools in Italy. We modelled *W l'amore* on the Dutch educational programme *Lang Leve de Liefde* (Long live love), developed by SOA Aids Nederland and Rutgers, and used in Dutch schools for twenty-five years.¹¹ After having analysed the Dutch approach and material, we began to apply the *Lang Leve de Liefde* model to the Italian context in a two-year action-research project.

Lang Leve de Liefde was selected for its evidence-based efficacy (Hofsetter et al. 1996; Schutte et al. 2014), for being specifically aimed at school settings, and for addressing thirteen-year-olds. Spazio Giovani professionals and Emilia-Romagna policy makers wanted to develop a project that could be as widespread and structured as possible. They also wanted to respond to the increasing number of teenagers starting to have sex from fourteen years of age and the consequent health-related risks, especially sexually transmitted infections (STIs) and unwanted pregnancies (Marmocchi 2012). Even if generated mostly by an emergency-based approach (responding to teenagers' risky sexual behaviour causing STIs and unwanted pregnancies) we, as a group made up of different levels of expertise, had the chance to develop, trial, and promote a comprehensive sex education programme for pre-adolescents.

The trialling of *W l'amore* was funded by Regione Emilia-Romagna within the XV Programma Prevenzione e lotta AIDS (XV Programme for AIDS prevention), promoted by the Regional Law n. 135/90 of June 2013. The trial involved three junior high schools from three cities located in Emilia-Romagna (Bologna, Forlì, and Reggio-Emilia), and a number of Spazio Giovani professionals, mainly psychologists, obstetricians, and gynaecologists, from the same areas. The stakeholders with whom I worked during the action-research about *W l'amore* were:

- Local institutions such as Regione Emilia-Romagna and some of its workers (mainly policy makers and general managers from the Public Health area);
- Bologna's Spazio Giovani and some of its workers;
- Teachers and headteachers from local public junior high schools;
- Teenagers aged around thirteen;
- Teenagers' families.

¹¹ For further information, see <http://www.langlevedeliefde.nl> (accessed 21 June 2016).

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Through both quantitative and qualitative methods (focus groups, interviews, questionnaires), an interdisciplinary team of which I was a part involved some of the stakeholders (headteachers, teachers, families, and students) in order to develop and monitor the entire research process and the development of the project. During the whole action-research, my role was to engage the most critical themes embedded within sex education: I tried to stress (youth) sexuality's complexity by focusing on heterosexism and the impacts of social models concerning adolescence and gender roles on teenage sexuality.

During a meeting, I tried to encourage reflection on these topics using the term 'queer'¹² in order to stimulate a more fluid approach to sexual plurality that did not seem to be appreciated. I sought to be provocative by using what is perceived as an academic term, and said: 'We should think that maybe we are talking to non-gender-conforming or homosexual, queer boys or girls. Sex education should not be just about STI prevention, or the prevention of undesired pregnancies, but about general wellbeing.' The psychologist present in the meeting sounded annoyed by my pedantry and replied: 'Queer what? I don't even know who these queer people are!'¹³ She perceived the term as part of a topic – sexual plurality besides gender binarism – too complicated to be handled by a sex-education project addressing the youth. Indeed, I often had the feeling that Spazio Giovani workers considered me to be too theoretical or academic. We continually experienced confrontation through this tension: we were willing to learn from each other but, at the same time, we had different educational backgrounds, references, and perspectives on the topics we were working on. Confronting opinions and professional positions, as demonstrated by the above exchange, is never easy.

W l'amore was particularly complicated because of schoolteachers' direct and fundamental role in conducting sex education during their lessons. Families were also involved in a number of meetings on parenthood, teenage sexuality, and sexual-health promotion. Through working with social and health workers, talking with parents, meeting students,

12 The term 'queer' (in both English and Italian) is used to denote sexual and gender groups or individuals that are not heterosexual or do not follow commonly accepted gender roles concerning masculinity and femininity. Originally having a negative connotation (meaning literally 'strange'), it became, between the late 1980s and early 1990s, a term – for both scholars and activists – through which to affirm a politicised identity. Queer identities are often adopted by those who reject traditional gender identities and related binaries, and seek a less conformist and normative way to identify and perform their existences.

13 Bologna, May 2014.

and through discussions with the teachers involved in W l'amore, I found that sexuality remained a complex issue and a huge social taboo in the Italian school system (Batini and Santoni 2009; Carnassale 2014). The trial of W l'amore was less than successful in effectively introducing the Dutch model to the Italian society. Sex-education professionals and the general public (teachers, educators, parents) felt they were part of two different contexts: 'the Italian one', and 'the European one'.

Italian stakeholders involved in sex education considered the Dutch context to be more liberal and more secularised than their own, and they radicalised their identities in order to define themselves as part of a more rigid social setting. In fact, when it came to teenage sexual-health promotion, they conceptualised Italy as a sex-phobic country. 'The context, the context, tell him! Our problem is the context,'¹⁴ a Spazio Giovani psychologist asked me to tell a GGD¹⁵ Dutch professional who was explaining us how sex education works in the Netherlands. Even if she was not explicitly referring to Catholicism, this was an important topic during the whole action-research. According to all the stakeholders, religion emerged as a problematic aspect with which to engage. They referred both to Catholicism – and in particular to the Catholic Church's dictates concerning condom use and homosexuality – and to Islam. The stakeholders described both religions as deeply influential to (teenage) sexuality, public policies, and practices related to sexual-health promotion.

At the beginning of the action-research, Spazio Giovani workers were concerned about 'what are we going to do with Muslim families?'¹⁶. They were worried about them being rigid and unwilling to address sexuality and sex education. But, as the W l'amore trial showed, a headmaster involved in the experimentation said: 'Muslims haven't bothered us as much as we expected them to!'¹⁷ Most of the project's critics, in fact, came from Catholic groups. W l'amore has hardly been attacked by associations like Sentinelle in Piedi (Standing Watchers), Giuristi per la Vita (Lawyers for Life), Movimento per la Vita (Pro Life Movement), or other small informal parental groups that have been animating a huge debate about sex and

14 Amsterdam, May 2013.

15 Gemeentelijke gezondheidsdienst: municipal Public Health Service.

16 Bologna, April 2013.

17 Bologna, May 2014.

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gender education during the past two years (2015-2016) in Italy. Catholicism was the main influence, as some Catholics consider sex education to be diminishing 'traditional'¹⁸ family values and sexualising childhood prematurely. As the following image of a W l'amore poster hanging next to a crucifix on a classroom's wall shows, religion – especially Catholicism – represents a deeply influential factor in public education in contemporary Italy.



Figure 1. Bologna, 2013.

Religion, and in particular Catholicism, often represents a problem according to those who are meant to improve sex education for teenagers. Italian professionals involved in sex education embody the complexity and conflicts characterising this topic, and perform a contradictory and hybrid identity. As part of an Italian/European wider context, they perceive themselves as – and, in my opinion, actually are – an important resource through which to improve sex education in contemporary Italy. At the same time, however, they feel they are part of a rigid setting (Italy) in which talking about sexuality openly remains difficult.

18 The expression 'traditional' is a synonym for 'heterosexual'. According to my analysis, in fact, the critics against sex/gender education as promoting homosexuality are part of a wider social conflict about civil rights.

Policies and Practices

We have been good trialling this project in cooperation with the Dutch. W l'amore is such an innovative programme for the Italian context. But unfortunately, we all know what the situation in Italy is like. Maybe Italians are not yet ready for this kind of thing. Sometimes I feel we are still stuck in the 1970s.¹⁹

This is what one of the Spazio Giovani workers involved in the W l'amore trial told me during an informal conversation. She was referring to both the criticism the project received from some parental and religious groups²⁰ and to the general attitude to sexual-health promotion in contemporary Italy. She considered Italy to be sex-phobic, conformist, conservative, and lacking a legal framework on sex education. Although Spazio Giovani workers seemed proud of their work with W l'amore, they still often sounded frustrated with the Italian context of sexual-health promotion. They sounded pessimistic about their prospects implementing the project, and about sex education more generally, alluding both to the lack of public funding and negative social reactions to comprehensive sexuality education.

Italy's position in relation to teenage sexual-health promotion is complicated and locally fragmented: there is not a national law specifically addressing sex education apart from the *Consultori familiari* law²¹ which promotes the dissemination of information concerning sexual and reproductive health. Contemporary social debates seem to focus more on gender equality and, at the writing of this article, a more comprehensive sexuality education remains elusive. An embarrassing silence is the most widespread strategy in Italian legal and institutional contexts. Responsibilities to deliver sex education are delegated to local institutions, as is the autonomy to manage the public resources thereof. Emilia-Romagna invests more funds in such areas than other regions. It is a very dynamic setting

19 Bologna, September 2013.

20 Sentinelle in Piedi (Standing Watchers), Giuristi per la Vita (Lawyers for Life), Movimento per la Vita (Pro Life Movement).

21 Law n. 405, July 1975.

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for educative and health-related services; there is a local gender equality law²², and a considerable amount of public funds are invested in HIV/AIDS prevention interventions – including W l'amore.

Spazio Giovani activities are framed within a wider context of international and local policies regarding sex education for teenagers that provide them (or not) with an opportunity to access resources concerning their (sexual) health and rights. As Shore and Wright suggest, policies should be analysed as anthropological phenomena (1997:6): they are not static, as they are influenced by socio-political visions and they concretely affect daily behaviour, relationships, identities, and experiences (Mosse 2005; Dubois 2009). Analysing public strategies is helpful for understanding rhetorical discourses on education, health, sexual rights, and adolescence (Apthorpe, Gasper 1996; Grillo, Stirrat 1997), and how such issues are embodied (Csordas 1990) and performed (Tarabusi 2010) by the stakeholders involved.

When it comes to the research I carried out within Spazio Giovani, I noticed how those who are involved in sex education refer to a specific international document – the World Health Organisation's "Standards for Sexuality Education" document (WHO and Federal Centre for Health Education 2010) – to define their role within the Italian sexual-health promotion milieu. Psychologists and health educators from Spazio Giovani, in fact, often quote this document in mentioning the lack of legal support for teenage sexual-health promotion in the Italian context. This document is meant to serve countries as a guideline for the introduction of comprehensive sexuality education. It provides practical guidance for the development and implementation of sex education – especially in school settings – while considering sexuality a part of everybody's identity and life from childhood to adulthood. It provides a useful framework for inspiring sex education interventions because it represents an internationally recognised invitation to respect and promote a standard of quality sex education for everyone, including teens. During my research, adults involved in sex education often referred to this document and appreciated it as a part of an international strategy promoting teenage sexual health. In Italy, however, the lack of a coherent national regulatory system and the diversification of local legal measures generate inequalities in the ways teenagers can (or cannot) access public resources concerning their health.

Nevertheless, policies often carry an ambiguous message about teenage sexual health: they shift between preventing a social or health-related issue (gender-based violence,

22 Legge Regionale (Regional Law) n. 6, June 2014.

homophobic bullying, STIs and HIV/AIDS) and promoting sexual health/wellness. In the Italian context, they seem to be emergency-based and normative. As an engaged anthropologist, my contribution during this research has been to make visible some of the complexities of sexual wellbeing and sex education. Besides STIs, undesired pregnancies, bullying, and gender-based violence prevention, some important topics seem to be excluded from sex education. Sexual pleasure, for example, does not seem to factor into sex education as it should (Allen 2006, 2011, 2013; Allen et al. 2014). Elsewhere, it has been argued that pleasure should be part of sexual-health promotion and that safe sex should be eroticised (Plummer 1995).

This image, taken from *W l'amore* material, represents female external genitals, including the clitoris.



Figure 2. Vulva's representation within *W l'amore* material, p.19.

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'Pleasure is not in the science programme!' said a female teacher involved in the W l'amore trial²³ while talking about this image with her class. No such problems were caused by the comparable anatomic representation of males' external genitals shown in the following image:



Figure 3. Circumcised and uncircumcised penis representation within W l'amore material, p.15.

Female pleasure seems to be one of the most complicated concepts to introduce: Allen (2013) suggests women's sexuality is one of the most difficult topics to be addressed in sex education. Health related topics are often accepted while more personal and intimate details – such as orgasm – appear to be more challenging for the stakeholders' positions, opinions, and involvement. I claim a medicalised and emergency approach to sexuality can be contrasted to a more comprehensive attitude, one that includes the aspect of pleasure. Teenage sexual-health promotion, in fact, should not only be meant to prevent risky behaviours, but should include the crucial topics of pleasure and consent, and thus promote a comprehensive perspective concerning both sexuality and health.

23 Bologna, October 2013.

Re-Thinking Teenage Sexuality

During a meeting meant to introduce W l'amore to the families of teenage participants, a father expressed his concern that his son was too young for sex education. He said, looking to debate with the other parents sitting next to him, 'My son is still too young to wonder about sex. He is thirteen and he is still playing with action figures!'²⁴ While some parents seemed to consider their children too young to be interested in sex and sexuality, others sounded worried about their teenagers coming of age within social contexts where they can easily access sexually explicit material, such as online porn. During an informal talk, a mother told me: 'They [teenagers] see sex everywhere! They might be too young, but they watch porn, they start going out with friends, they begin to wonder about sex and love. So I feel happy they are taking these sex education classes.'²⁵

The main challenge concerning sex education is to unpack adults' ideas of teenage sexuality and to access teenagers' emic perspectives on sex. Sex education should facilitate a negotiation between different representations, opinions, and values, thus critiquing common stereotypes of teenage sexuality. Sexualised teenage bodies –especially those of girls – are objects that adults are trying to control, imposing socially accepted sexual practices upon them. A girl involved in W l'amore trial expressed her worries about appreciating the project and, at the same time, feeling ashamed for being considered interested in sex by teachers and, more generally, by adults. 'Teachers are used to me being a good girl and a good student. What about now? If they understand I am interested in sex, while doing W l'amore, what are they going to think of me?'²⁶

Another controversial topic, especially for families, was homosexuality. While presenting the concepts addressed by W l'amore, a father discovered the project introduces homosexuality as a possible sexual orientation and then asked: 'Will talking about homosexuality make my

24 Bologna, September 2013.

25 Bologna, October 2013.

26 Bologna, November 2013.

daughter become gay?'²⁷ The fear of their sons or daughters coming out as non-heterosexual, coupled with the idea of sex education stimulating teenagers to have sex, are two of the most recurrent concerns among adults. Adults' opinions about teens' sexuality are often contradictory, and calling into question the ambiguities of representations, policies, and practices is useful to develop a more comprehensive understanding of sex education. As stakeholders involved in W l'amore development, Spazio Giovani professionals, teachers, families, and I, let personal values, models, and stereotypes about sexuality and adolescence surface in order to de-essentialise and de-naturalise them.

The overall goals of the inter-subjective process fostered by my research were to improve sex education for teenagers by giving value to sexual plurality, reflecting on the impacts of gender roles on (teenage) sexuality, and by seeking to develop a non-normative and empowering educational health service. Education is a social responsibility that needs to be innovative and fluid and thus able to relate to all shades of human – and sexual – identities. Sex education involves ongoing complex issues but, at the same time, provides an exceptional discursive space for the emergence of a wider and deeper personal and social teaching, as well as learning process for all people involved: policy makers, social workers, teachers, students, and researchers.

Conclusions

As Tim Ingold argues, 'anthropology is philosophy with the people in' (Ingold 1994: 7). Accordingly, doing anthropology is largely based on plural, contradictory, and unexpected (human) factors. It is about mixing theories and practices, methodological choices and relational dynamics made of presences and interactions. As I have argued in this article, all stakeholders in a specific field have an active role in making it real and lively, including the anthropologist.

As this action-research at Bologna's Spazio Giovani has demonstrated, doing anthropology within public services means deconstructing international and national policies (or the lack thereof) on sexual-health promotion and rendering visible how they impact educative practices which in turn affect teenage sexuality management. I also argue that a methodologically and

27 Bologna, September 2013.

politically engaged anthropological practice can contribute to co-constructing innovative and more inclusive ways of encouraging sexual health, not only for teenagers, but for society as a whole. It can be part of wider social action towards more proactive and inter-subjective sexual/intimate citizenship (Plummer 2005a, 2005b); everybody should be involved in this negotiation process in order to respect all sex-related representations and experiences. Public engagement is also necessary for anthropology and anthropologists' futures, and for garnering social recognition inside and outside of the academy. Multidisciplinarity, fluid methodological positioning, and expanded understandings are some of the main topics that need to be discussed among anthropologist-researchers who are willing to contribute to a more socio-politically equal society.

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