

2019

# Assessing Adult Perceptions of Sexual Behavior in the Early Childhood Setting

Jamie Spencer

Follow this and additional works at: [https://scholarworks.umf.maine.edu/ech\\_projects](https://scholarworks.umf.maine.edu/ech_projects)

 Part of the [Early Childhood Education Commons](#)

---

Assessing Adult Perceptions of Sexual Behavior  
in the Early Childhood Setting

Jamie L. Spencer

University of Maine at Farmington

### Abstract

In recent years, there has been an increase in challenging behavior in early childhood settings because of “sexual behavior”, making an understanding of healthy development in children crucial to the work of the early childhood educator. This study explores information gathered from early childhood educators throughout the state of Maine to assess adult perceptions, opinions, and attitudes about the concept of sexual behavior in early childhood settings, as well as needs for support. Utilizing an online survey tool, the study gathered feedback from 633 respondents throughout the state of Maine. The study revealed that while 72% of educators are comfortable talking to children and parents about these issues, 61% are seeking training and resources on the topic. Minimal research on the issue exists, making the need for current information crucial to the task of determining how best to support early childhood educators in their roles.

*Keywords:* early childhood setting, early childhood educator, sexualized behavior

## Assessing Teacher Perceptions of Sexual Behavior in the Early Childhood Setting

The discussion of sexual behavior in children is regarded as a highly sensitive topic. The term sexual behavior as it relates to this study, refers to behavior on the part of children including, but not limited to, talking about body parts, wanting to see body parts of peers, or showing one's own body parts to others, touching peers, asking questions about bodies, and self-soothing masturbation (United States Department of Education [USDOE] 2018). Minimal research has been conducted on the issue and one can assume the sensitive and taboo nature of subject matter is an underlying issue. Thus, when challenging behavior that interrupts or risks interruption to optimal learning and development in an early childhood setting and it is identified as "sexual in nature", early childhood educators are often unsure how to manage it and where to seek support and vetted resources.

Early childhood educators, including those who may work in a variety of educational environments (family child care settings, legal-unlicensed child care settings, or center-based programs) for children from birth to age eight, often lack resources to support children around these issues. This results in mixed messages being relayed to children from adults with varying understanding, education, belief systems, or values on the topic. There is an overall inconsistency in understanding and approach to supporting healthy sexual behavior in early childhood classrooms.

The State of Maine Department of Licensing and Regulation has seen an increase in self-reports and family-reports as they relate to early childhood settings. Because the Department has no formal way of tracking this data at this point, it is an anecdotal note of increase. These challenges are leading to teacher stress and burnout, as well as causing confusion and frustration

on the part of families and caregivers. It is important to assess the perceptions and attitudes of educators currently working within the early childhood educational setting in hopes of determining ways to support their professional development on the topic, and thus improve the quality of their work with children.

It is crucial to gain a better understanding of what early childhood educators currently know about healthy sexual development. Freud (1920) believed that the first five years of a child's life were critical to the development of their personality as an adult. It makes sense then, that the evolution of a child's thinking about "sex" is grounded in what they learn in their most formative years.

In a clinical study conducted by the American Academy of Pediatrics in 2018, it was acknowledged that sexual behavior in children could range from the developmentally appropriate to abusive and violent. One can conclude that if an adult charged with educating children does not have a solid foundation of understanding about that range, there is the opportunity for unclear and confusing messages to children in their most formative years. Additionally, because the topic is so sensitive, educators and parents often do not engage in meaningful conversation around the topic. More commonly, issues are managed as the "challenging behavior" emerges. If early child educators are not providing children and families with accurate information about healthy child development, it could impede their work in support of the child's healthy development.

Previous research has focused on the difference between normal and abnormal sexual behavior but not on how differing teacher perspectives are affecting what children are learning or not learning about appropriate sexual behavior. Current research shows that sexual behavior increases in children between the ages of birth to five (Kellogg & Committee on Child Abuse

and Neglect, 2009). It seems that exploring perspectives of early childhood educators working with children within that age group would help determine how better to support educators in their support of children.

### Literature Review

According to the Kellogg (2010), behavior that is sexual in nature is common in between 42 to 73 percent of children under age 13. Because we know that the development of sexuality and increase in sexual behavior can be seen between birth and age five, it is appropriate to look at how the attitudes and perceptions of the early childhood educators that are working with this age group, affects their classroom practice. The goal of this review of the literature is to support the need for an understanding of the healthy development of young children as it relates to early child education. Existing theoretical and clinical information on children's sexual development will be discussed. Existing research on teachers' perspectives on sexualized behavior will be presented. Finally, emerging concerns and questions about sexualized behavior and needed supports for early childhood educators will be considered.

### **Theoretical and Clinical Information on Children's Sexual Development**

Freud (1920) theorized that humans are born sexual beings. He discusses the importance of understanding that a child's [sexual] action is most often about comforting themselves rather than pleasing someone else. In his work, he suggests children know what feels good to them, or from memory, retain a previous experience from which they drew pleasure. Infantile nursing, for example, may prompt a child to be more likely to thumb-suck because they remember the way they felt when they were nursing. Their thumb-sucking is an attempt to replicate that feeling and is often associated with a progression of discovery of other things that feel good, like rubbing and contact with other parts of the body like breasts and genitals (Freud, 1920, p. 33).

“Children learn about sexuality [and their developing bodies] the same way they learn about everything else – through words, actions, interactions and relationships” (Chrisman & Couchenour, 2002, p. 3). As educators, we allow and encourage children to learn about literacy, numeracy, gross and fine motor development and the like through play, conversation, books, and activities. Yet, there is often a different mind-set about what is appropriate and not appropriate for children to engage in or do with regard to sexual behavior in the classroom.

### **Teachers’ Perspectives on Sexualized Behavior**

In 2013, Counterman and Kirkwood conducted a study with the goal of gaining insight to guide staff in navigating the sensitive work of managing sexual behavior in the classroom. Counterman and Kirkwood explored the concept of understanding the healthy sexuality development of children within a preschool program in which one of the authors served as director. Using a survey approach to assess attitudes and perceptions of the teachers within the program, they were able to identify key findings that helped them address the needs of the teachers to be more confident in their management of sexual behaviors in the classroom:

1. Respondents all experienced some level of discomfort with the subject of childhood sexuality in our schools.
2. Educators felt inadequately prepared and informed on the subject of healthy sexuality development and teaching strategies with children and parents.
3. Early childhood educators find it difficult to communicate to parents about healthy sexuality development and behaviors.
4. The years of professional experience and age of the children in the teachers’ classrooms influenced their comfort level.

5. The comfort level of study participants increased with training and education, which imparted a better understanding of healthy sexuality development in young children. They conclude, “When teachers gain a better understanding of healthy sexual development in children through proper training and education it should increase their comfort level and improve communication with children, parents, and colleagues” (Counterman, & Kirkwood, 2013, p. 6).

### **Emerging Concerns, Questions, and Needed Supports for Early Childhood Educators**

Though early childhood educators may recognize sexual behaviors, they often feel ill equipped to address them. Additionally, because there may be a lack of foundational education on the part of early childhood educators, they may tend to think that a sexual behavior is a direct link to sexual abuse (Kenny, Dinehart, & Wurtele, 2013). While some may recognize that a child masturbating is self-soothing, to others, based on their life experiences and education, or lack thereof, it might be a concern. What or how the educator then communicates to the child and the child’s family and colleagues can be confusing and hard for all involved to navigate.

Common challenges among early childhood educators include a lack of comfort with behavior that is sexual in nature and an understanding of what is normal, healthy sexual development, which makes managing the topic in a classroom setting challenging. Wilson (1991) helps us understand that young children are naturally curious about their developing bodies as they relate to the world around them. Because of the varying perspectives and attitudes of early childhood educators, responses to children as these issues arise are often inconsistent due to a lack of knowledge and understanding of what is developmentally appropriate. Research supports this thinking. “Teachers don’t wait to talk with children about nutrition or traffic safety, they need to treat sexuality the same way” (Sciaraffa & Randolph, 2011, p. 13). Sciaraffa and Randolph (2011) propose that educators and family members often



feel stress at the sign of any kind of sexual behavior. This alone supports the need to continue thinking, talking, and researching the topic so that we may provide ongoing supports to all who manage this sensitive topic.

An oft-cited source on the topic, Wilson's (1991) book, *When Sex is the Subject*, though dated, reinforces the importance of educators being prepared to put aside their own values and experiences around sexuality and build a solid foundation for understanding what is and isn't developmentally appropriate. It is Wilson's opinion that through skill building and ongoing training we can best support teachers to understand and administer appropriate responses when these issues arise. Wilson also acknowledges that in early childhood settings, educators may have diverse educational backgrounds, from high school diplomas to graduate degrees. Some educators may be operating with advanced training in child development that others may not have had access to. This highlights the importance of creating ongoing opportunities for all educators to stay abreast of developments in this area, along with foundational information that they can build upon.

Often, psychosexual development in children is avoided or ignored, as many believe that for a child to be a "sexual being" would be inappropriate, according to Honig (2000). In her often-cited resource, *Psychosocial Development in Infants and Young Children, Implications for Caregivers*, she discusses that caregivers, in and out of the child's home, are crucial to the promotion of healthy psychosexual development.

### **Summary and Research Questions**

If early childhood educators and care providers have questions about children's sexual development and sexualized behavior state agencies, such as Departments of Health and Human Services or Education are the first place they look. However, without more study of providers'

perspectives and needs it is difficult to know how to appropriately support educators. Maine for example, has seen an increase in licensing issues as a result of “sexualized behavior” in early childhood settings according to conversation with Whitten (2019). Whitten further added that there has been steady increase in reports regarding sexualized behavior between children in childcare settings over the past several years (J. Whitten, personal communication, February 25, 2019).

Given these concerns, the goal of this descriptive study is to explore what active early childhood educators throughout the state of Maine understand, perceive, know, and communicate about the topic by conducting an online survey with all licensed childcare providers in the state. The goals of this study is to determine ways to better support early childhood educators with resources, technical assistance, onsite consultation, and training opportunities around children’s sexual behavior.

## Methods

### **Study Design**

This was a primarily quantitative research study utilizing an online survey tool to gather exploratory information from early childhood professionals. The study explored and assessed attitudes, perceptions, needs, and feedback from early childhood professionals throughout one state, with some questions allowing for open-ended, qualitative feedback. A quantitative survey design approach was the best format for this exploratory study, allowing the researcher to expediently gather as much information as possible from a large population. In order to best assess adult perceptions of sexual behavior in the early childhood setting, a survey allows some anonymity to gather honest responses and feedback from participants about a somewhat difficult topic.

In partnership with Maine Roads to Quality Professional Development Network, the study surveyed early education professionals throughout the state in hopes to determine what supports they need to better inform their practice around the topic of healthy “sexual development”.

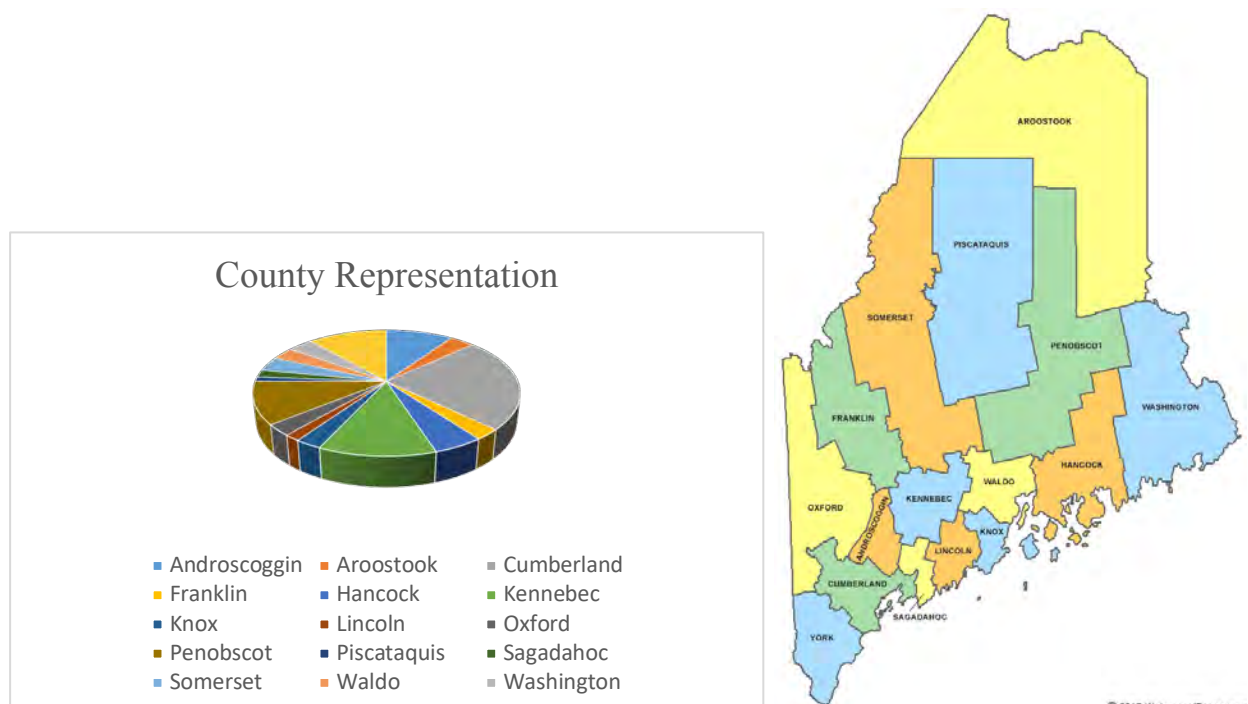
In order to discern adult attitudes, perceptions, and thinking around the topic of sexual behavior in the early childhood setting, the survey questions were organized into three primary sections aside from demographic information:(1) Comfort Level Regarding Sexualized Behavior (10 questions), (2) Knowledge about Sexualized Behavior (15 questions), and (3) Ability to Communicate about Sexualized Behavior (4 questions).

### **Participants and Sampling Procedures**

The state maintains a registry database of early childhood professionals throughout this large, primarily rural New England state. Utilizing a stratified sampling plan, all registry members received an email, which contained a description of the study, consent, and link to the survey. All registry members were contacted initially by email via a list-serv, and no identifying email addresses or information specific to respondents was captured. The study employed this method of sampling in hopes of accessing the largest number of early childhood professionals throughout the State. Additionally, some respondents may have forwarded the email with survey link to peers that did not receive the original notification, leading to some degree of snowball sampling. No form of compensation was provided to any participant in this study.

The survey was deployed to 11,120 individuals throughout the state of Maine that are registered as early childhood professionals with Maine Roads to Quality Professional Development Network’s registry database. The survey was open for three weeks. The sample contained 633 respondents including 617 females and 13 males. Their average age was between 35-44 years

old. More than half (63.8%) of respondents had a Bachelor's degree or above. There was representation from the primary types of early childhood programs throughout the state, as well: center-based, family childcare, public pre-k collaborations, head start, early head start, out of school time, and license exempt programs. Responses were gathered from individuals throughout all 16 counties within the state.



### Online Survey

This study was conducted over a three-week period, with potential respondents sent two e-mail reminders during this time period. The survey was conducted in an online format utilizing the Survey Monkey tool. The survey consisted of 35 questions. Analyses focused on participant responses to 35 questions presented in an online survey format. Six hundred thirty

three individuals participated with a completion rate of 80%. The response rate of 5.7% is low and can be attributed to the sensitive nature of the topic.

Seven of the questions collected demographic information from respondents including: role in the early childhood setting, level of education, age range, gender, program type, age group, county of residence. The remaining questions consisted of 25 specific questions focused on three key areas:

- (1) Comfort Level Regarding Sexualized Behavior
- (2) Knowledge about Sexualized Behavior
- (3) Ability to Communicate About Sexualized Behavior

Additionally, each of the three content areas offered an open-ended question for deeper exploration.

### **Ethical Considerations and Informed Consent**

The study was approved by the University's Institutional Review Board (IRB). This researcher has completed the CITI Program training course in Social & Behavioral Research. All data collected was kept strictly confidential, as identifying information about participants was not linked with their survey responses. In carrying out the survey in the online environment the survey software used did not collect any identifying information regarding participants such as their e-mail addresses. All responses and data were kept in password protected computer file and will be kept for a maximum of three years. After three years, all data will be destroyed. As this study includes information about sensitive topics, information was shared with participants in the introduction and consent should the need emotional support as a result of completing this survey. See appendix A for the introduction, Appendix B for consent, and Appendix C for survey.

## Results

**Data Reduction**

Data obtained from the three sets of survey questions were further divided to reflect different types of skills, attitudes, and perceptions educators reported. The four subscales included: Educators' Attitudes About Children's Body Exploration and Knowledge (see Table 1); Caregiving and Educational Practices About Children's Bodies, Gender, and Discussing Children's Sexual Behavior with Children and Parents (see Table 2); Knowledge-Base, Supports, and Importance of ECE Professionals (see Table 3); and Understanding of Official Protocols About Children's Sexual Behavior and Decision-Making (see Table 4).

**Educators' Attitudes about Children's Body Exploration and Knowledge (n=530-569)**

Table 1

Question	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
Q9 I am comfortable around children who are curious and playful with their bodies.	17.5%	59.8%	15.0%	7.1%	.5%
Q11 I view sexual activities (like masturbating) by children as being uncomfortable and problematic.	2.3%	13.0%	27.9%	48.0%	8.9%
Q12 I am comfortable using correct anatomical labels (penis, vagina, anus) when talking to children about their bodies.	46.2%	42.9%	5.6%	4.8%	.5%
Q28 I believe masturbation is normal in young children.	20.9%	55.8%	17.2%	4.9%	1.1%

As seen in Table 1, educator's attitudes about children's body exploration and knowledge included four questions and sought to assess comfort levels dealing with particular behaviors or

classroom practices. Of most interest in this subscale is the response to Q11, in which 27.9% of individuals responded that they are uncertain about whether or not they find sexual activities, like masturbating, as problematic.

### **Discussing Children’s Sexual Behavior with Children and Parents (n=530-569)**

Table 2

Question	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
Q8 I am comfortable talking with students' parents / caregivers about sexual development in children.	20.4%	51.9%	20.2%	6.5%	1.1%
Q10 I feel comfortable talking with children about healthy sexual behaviors and supporting healthy development.	15.9%	51.0%	23.9%	8.2%	1.1%
Q14 I am comfortable using age-appropriate print materials (like books and posters) to talk with children about their bodies.	28.0%	53.1%	15.6%	2.8%	.5%
Q32 I believe sex education is ONLY the role of the parent or caregiver.	1.5%	8.2%	18.4%	54.0%	17.8%
Q33 I support issues surrounding sex education in the schools.	25.8%	54.3%	17.2%	2.1%	0.6%
Q34 I believe parents often speak to early childhood educators about their child's sexual behaviors.	2.1%	11.1%	17.4%	54.0%	15.5%

Table 2, discussing children’s sexual behavior with children and parents, sought to assess individual comfort levels in talking with children and families about issues around sexual behavior. While many respondents responded affirmatively that they feel this communication is important and necessary, a large number were uncertain about many of the questions in this sun group. In responses to open ended questions, many respondents noted that they found Q 33, “I support issues surrounding sex education in the schools” to be confusing, unclear, or not applicable to their role.

**Knowledge-Base, Supports, and Importance to ECE Professionals (n=530-569)**

Table 3

Question	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
Q18 I believe a great deal of specific research has been done on children's sexual development.	8.6%	38.4%	41.0%	11.4%	0.6%
Q20 I believe a great deal of specific research has been done on children's sexual behaviors.	9.5%	32.5%	45.8%	10.8%	1.5%
Q22 It is important for early childhood educators to be knowledgeable of healthy sexual development in young children.	55.4%	43.3%	1.1%	0.0%	0.2%
Q24 I believe early childhood educators need to include information about healthy sexual development in their curriculum	14.0%	37.3%	33.5%	13.5%	1.7%
Q25 I view my State Child Care Licensing authority as a resource when issues arise.	20.0%	45.3%	21.3%	13.0%	0.4%

Knowledge base, supports, and importance to ECE professionals, as seen in table 3, addressed primarily knowledge base and current supports. Of particular interest here is the fact that more than 1/3<sup>rd</sup> of respondents are not sure that it is their role to be educating children about healthy sexual development. More than 40% are uncertain about whether this is an area that has generated research and may not be aware that there are resources (though limited) available to them.



### Understanding of Official Protocols about Children's Sexual Behavior and Decision-Making (n=530-569)

Table 4

Question	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
Q15 I am comfortable making a child abuse / neglect report.	52.4%	40.7%	5.8%	1.1%	0.0%
Q16 I have avoided making a child abuse / neglect report for fear or negative impact to me or my program.	0.2%	0.9%	2.8%	29.9%	66.3%
Q19 I know how to make a report of suspected child abuse / neglect.	61.5%	34.0%	3.2%	1.1%	0.2%
Q26 I know the difference between child abuse and developmentally appropriate sexual behaviors.	21.1	61.2%	15.3%	1.9%	0.6%
Q27 I have made a report of suspected child abuse or neglect.	34.1%	28.4%	2.1%	20.9%	15.6%
Q30 I clearly understand my role as a mandated reporter.	78.3%	20.6%	0.8%	0.2%	0.2%

The final group, understanding of official protocols about children's sexual behavior and decision-making, as noted in table 4, assessed official protocols and decision-making. A majority of respondents acknowledged that they are comfortable making a report of abuse or neglect, and that they have done so. For this sub group, Q 26 is the most interesting. 15.3% of respondents acknowledge that they do not know the difference between child abuse and developmentally appropriate sexual behaviors.

Additional analysis reflected that though 64% of respondents hold a Bachelor's degree or above, 87% report challenges in managing challenging sexual behavior. Additionally, 72% of respondents feel comfortable talking about this issue with children and families, but 61% are requesting additional training and resources to support their work.

## Discussion

In 1991, Wilson indicated that in order for an educator to prepare themselves for managing behavior of a sexual nature and teaching children about healthy sexuality, they must first deal with their own feelings around the topic. It is crucial that educators be comfortable talking about sexuality and sexual values with children, without imparting their own beliefs and values to the children. This research reinforces that educators want and need more information. Anecdotal data from the Department of Health and Human Services, Department of Licensing and regulation (2019) shows that when sexual behavior arises in classrooms and educators are unsure how to manage it, they often revert to personal beliefs and values, thus imposing those beliefs and values on their classroom population because they do not have the accurate training and education to understand how to manage it differently.

The results gathered after data analysis were significantly different from what was expected. Anecdotal information that prompted the need for research suggested that educators were uncomfortable talking about behaviors that were sexual in nature; sexual behaviors were increasing as a result of the differing approach to managing behaviors; educators were unsure on their role as mandated reporters; and educators saw sexual behavior as something problematic.

The Counterman (2013) study also included information on the change in perception of the behavior after having received additional training and educational opportunities, which this researcher did not assess.

The findings of this study have shown that, contrary to what was expected based on anecdotal evidence gathered from providers and the state of Maine Department of Health and Human Services, Office of Child Care Licensing, educators are comfortable talking about the

issue, but want a clear understanding of what is developmentally appropriate. A majority clearly understand their roles as mandated reporters and their fear of negative repercussion has not influenced their judgement in making reports when needed. Educators know that sexual behavior is normal to some extent, but are requesting more information and training to build their skill and confidence in managing the behavior and talking with parents as issues arise. Many educators are uncertain about what, if any, research exists on the topic and where to access accurate resources for themselves and families.

### **Implications and Recommendations**

At this time, there is limited research on the topic. Further research and examination of what other programs are doing that is working well would be beneficial to the field. Because the State of Maine Department of Health and Human Services, Office of Licensing and Regulation does not track this data in a measurable way, it would be advisable for the DHHS team to review and assess the ability of their system to capture information such as this in a way that is supportive of programs and educators. If this information were captured, there would likely be additional ways identified to support programs. Similarly, the Maine Roads to Quality Professional Development Network, which provides technical assistance to early childhood professionals throughout the state, should consider additional system upgrades that may also contribute to more accurate tracking of issues around challenging sexual behavior in early childhood settings, which may allow for additional support to programs.

The most prominent data gathered from this research shows that regardless of educational level, a majority of respondents are seeking additional training, educational opportunities, and / or resources for both themselves and families of young children.

The study prompted additional questions:

1. What are Higher Education programs teaching about this topic?
2. For individuals who are working in early educational settings but do not have a degree, where does their information about managing sexual behavior in an early childhood setting come from?
3. How does the approach to managing this topic vary between center-based and family childcare programs?
4. What do other curricula or educational philosophies, like Waldorf, Reggio, Montessori, etc. include about healthy development?
5. What happens when personal beliefs, values, cultural norms conflict with what is developmentally appropriate in an early childhood setting?

### **Limitations and Future Directions**

This survey was distributed to all state of Maine, Maine Roads to Quality Professional Development Network registry members. Each member was required to provide an email address at registration. The survey was available to complete on a computer, laptop, smartphone, or tablet and could be completed in any setting. Hence, providers without access to technology may have been excluded from participation.

For the purpose of this study, this researcher chose to exclude gathering information on specific curriculum being used in the various programs that were surveyed. With additional time and funding, it would be relevant to study the different curricula being implemented and what it includes for expectations around the topic of healthy “sexual” development.

This study was limited in several ways. Initially, because the topic is so sensitive, many individuals chose not to engage. The survey was sent to 11,120 individuals, and only 633 responded. Though the study was sent to individuals throughout the state of Maine, there were minimal respondents in several areas, likely a result of low numbers of childcare providers in those areas. Further research could provide additional information about this.

Curriculum analysis was not done as a part of this research, and should be considered for future study. Curriculum tools vary throughout programs. Responses to open ended questions showed a need of clarification of role in conjunction with some questions.

Additional research on the topic should be conducted. It is advisable to consider what other states / programs have in place to address this need, like Preventing Child Abuse Vermont ([www.pcavt.org](http://www.pcavt.org)). This is foundational information about child development that could significantly affect classroom practice and should be made available in a platform that is accessible by as many programs and individuals as possible.

It would be beneficial to consider a varied group of early childhood professionals when determining next steps. That group may include: early childhood educators; program administrators; licensing specialists; Maine Roads to Quality Professional Development Network staff; curriculum specialists; representatives from programs with similar initiatives in other states; public school representatives; and parents and families.

## **Conclusion**

This study was developed in an effort to assess adult perceptions of sexual behavior in early childhood settings. The assessment proved that this is a topic on the minds of many early childhood professionals and that their perceptions and approach vary significantly. Early childhood educators throughout the state are seeking more information and education so that

they can better serve the population of children in their care; and support parents and families as these sensitive issues arise. The topic would benefit from further research and an immediate attention to development of a training and / or resource bank to support educators.

## Appendix A

### **Introductory Email**

Dear Early Childhood Professional,

My name is Jamie L. Spencer and I am a graduate student at the University of Maine at Farmington. I am passionate about finding ways to better support early childhood educators and administrators around challenging issues that arise in our classrooms. As part of my graduate research study, I am conducting a statewide survey that hopes to gather information about what educators know and feel regarding the topic of "sexualized behavior" in the early childhood setting. From this survey, I hope to gather information that will help me determine ways to better support programs when these sensitive issues arise.

Please note that this survey is confidential and no identifying information will be collected should you choose to participate; all responses are anonymous. I estimate that the survey will take approximately 10 minutes to complete.

I invite you to participate in this research and share your thoughts, opinions, and needs with me. I sincerely look forward to your responses.

Link to survey: <https://www.surveymonkey.com/r/SPH9M7K>

If you have questions, please feel free to contact Jamie L. Spencer at (207) 479-7622 or via email at: [jamie.l.spencer@maine.edu](mailto:jamie.l.spencer@maine.edu).

Sincerely,

Jamie L. Spencer

## Appendix B

### **Consent**

You are being invited to participate in a research study focusing on how teacher perceptions of sexual behavior in an early childhood setting impact classroom practice. This study is being conducted by Jamie L. Spencer (a Graduate Student) from the University of Maine at Farmington (UMF). You were selected to participate in this study because you are affiliated with early childhood education and a member of the Maine Roads to Quality Professional Development Network Registry.

The goal of this study is to determine what supports early childhood educators may need to improve classroom practice and become more confident in managing this sensitive topic. If you agree to take part in this study you will be asked to complete an online survey/questionnaire. This survey/questionnaire will ask about the characteristics of the early childhood program with which you are affiliated as well as your attitudes about the topic of sexualized behavior in an early childhood setting. This survey will take approximately 15 minutes to complete.

While you may not directly benefit from this research, you may find the questions interesting and thought-provoking to answer. Your participation in the study may also enrich our understanding of how teacher perceptions of sexual behavior in an early childhood setting impact classroom practice.

I believe there are no known risks associated with this research study; however, as with any online related activity, the risk of a breach of confidentiality is always possible. To the best of our ability your answers in this study will remain confidential. We will minimize any risks by not collecting identifying information such as your e-mail address when your response is submitted and storing the data collected in a password-protected computer file. If any survey



responses are used in presentations or journal articles, the data will be reported in aggregate and pseudonyms will be used. Data will be destroyed after 3 years.

Your participation in this study is completely voluntary and you can withdraw at any time. You are free to skip any question that you choose.

If you have questions about this project or if you have a research-related problem, you may contact the researcher, Jamie L. Spencer at (207)479-7622 or via email at [jamie.l.spencer@maine.edu](mailto:jamie.l.spencer@maine.edu). You may also contact Dr. Karol Maybury, Chair of UMF's Institutional Research Board (IRB) at [karol.maybury@maine.edu](mailto:karol.maybury@maine.edu).

Additionally, as this is a sensitive issue, it is possible that participants may experience emotion or feelings around the topic. The following resources are available to you should you need them.

State of Maine's Child Abuse and Neglect Hotline: 1800-452-1999

State of Maine's Sexual Assault Support Hotline: 1800-871-7741

By clicking "Next" below you are indicating that you are at least 18 years old, have read and understood this consent form, and agree to participate in this research study. Please print a copy of this page for your records.

NEXT!

## Appendix C

**Survey**

Q1 This survey is designed for individuals working in an early childhood setting. Which best describes you? (Please check all that apply.)

- Program Administrator
- Educator

Q2 What is your highest level of education?

- Less than a HS diploma
- A HS diploma or equivalent
- Some College
- Child Development Associate Credential
- Associate's Degree
- Bachelor's Degree
- Master's Degree
- Doctoral or Professional Degree

Q3 Choose the category that best represents your age:

- 0-18
- 19-30
- 31-40
- 41-50
- 50-60
- 60+

Q4 What gender do you identify with?

- Male
- Female
- Other, Please Specify

**Tell us about the program you are affiliated with:**

Q5 What type of program do you work within?

- Center-based
- Family Child Care
- Pre-K / Public School Collaboration
- Out of School Time

Q6 Which age group do you work with? (Please check all that apply.)

- NA (Administrator)
- Infants (0-1 yrs)
- Toddlers (1-3 yrs)
- Pre-school (3-5)
- School-age (5+ yrs)
- NA (Administrator)

Q7 What County do you work within?

- Androscoggin
- Aroostook
- Cumberland
- Franklin
- Hancock
- Kennebec
- Knox
- Lincoln
- Oxford
- Penobscot
- Piscataquis
- Sagadahoc
- Somerset
- Waldo
- Washington
- York

<b>Comfort Level:</b>		<b>Strongly Agree</b>	<b>Agree</b>	<b>Uncertain</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
8	I am comfortable talking with students' parents / caregivers about sexual development in children.					
9	I am comfortable around children who are curious and playful with their body.					
10	I feel comfortable talking with children about healthy sexual behaviors and supporting sexuality development.					
11	I view sexual activities (like masturbating) by children as being uncomfortable and problematic.					
12	I am comfortable using correct anatomical labels (Penis, Vagina, Anus) when talking to children about their bodies.					

13	I am comfortable using anatomically correct dolls in my classroom.					
14	I am comfortable using age-appropriate print materials (like books and posters) to talk with children about their bodies.					
15	I am comfortable making a child abuse / neglect report.					
16	I have avoided making a child abuse / neglect report for fear of negative impact to my program.					

- 17 As a provider, what is the biggest challenge you have encountered regarding sexualized behavior in your setting?

#### Knowledge Base:

18	I believe a great deal of specific research has been done in children's sexual development.					
19	I know how to make a report of suspected child abuse / neglect.					
20	I believe a great deal of specific research has been done in children's sexual behaviors.					
21	I feel empowered to respond to sexual behaviors in a meaningfully relevant fashion.					
22	It is important for early childhood educators to be knowledgeable of healthy sexual development in young children.					
23	I do not tolerate any kind of sexual behavior in my classroom.					
24	I believe early childhood educators need to include information about healthy sexuality development in their curriculum.					
25	I view my State Child Care Licensing authority as a resource when issues arise.					
26	I know the difference between child abuse and developmentally appropriate sexual behaviors.					
27	I have made a report of suspected child abuse or neglect.					
28	I believe masturbation is normal in young children.					
29	I believe children's play should be limited by gender roles (boys play with trucks, girls with dolls).					
30	I clearly understand my role as a mandated reporter.					

- 
- 31 What kind / type of support do you feel would be most beneficial so you can respond confidently and appropriately to incidents of sexualized behavior in your setting?

**Communication:**

32	I believe sex education is ONLY the parents' / caregivers' role.					
33	I support issues surrounding sex education in the schools.					
34	I believe parents often speak to early childhood educators about their child's sexual behaviors.					

- 35 Please add any additional information you would like to share on this topic.

Thank you! I sincerely appreciate your taking the time to complete this survey. Your thoughts, feedback, and ideas are valued!

Feel free to contact me at [jamie.l.spencer@maine.edu](mailto:jamie.l.spencer@maine.edu) if you'd like to provide any additional information.

## References

- Chrisman, K., & Couchenour, D. (2002). *Healthy sexuality development: A guide for early childhood educators and families.*, P.O. Box 932569, Atlanta, GA: NAEYC .
- Counterman, L., K., & Kirkwood, D. (2013). Understanding healthy sexuality development in young children. *NAEYC Voices of Practitioners*, 8(2), 1-13.
- Derman-Sparks, L. (2011). Anti-bias education: Reflections. *Exchange*, 200, 55-58.
- Freud, S. (1920). *Three essays on the theory of sexuality*. London: Hogarth Press.
- J. Whitten (personal communication, February 25, 2019)
- Honig, A. S. (2000). Psychosexual development in infants and young Children: Implications for caregivers. *Young Children*, 55(5), 70–77. Retrieved from <http://www.jstor.org/stable/42727859>
- Kellogg, N. D. (2010). Sexual Behaviors in Children. *American Family Physician*, 82(10), 1239. Retrieved from <https://www.aafp.org/afp/2010/1115/p1239.html>
- Kellogg, N. D., & Committee on Child Abuse and Neglect. (2009). Clinical report: The evaluation of sexual behaviors in children. *Pediatrics*, 124(3), 992–998.
- Kenny, M. C., Dinehart, L. H., & Wurtele, S. K. (2013). Recognizing and responding to young children’s sexual behaviors in the classroom. *Young Exceptional Children*, 18(1), 17-29.
- Prevent Child Abuse Vermont (PCAVT) - Prevent Child Abuse Vermont. (n.d.). Retrieved February 2, 2019, from <https://pcavt.org/>
- Sciaraffa, M., & Randolph, T. (2011). "You want me to talk to children about what?" Responding to the subject of sexuality development in young children. *Young Children*, 66(4), 32-38.

Wilson, P. (1991). *When sex is the subject: Attitudes and answers for young children:*

*Suggestions for teachers, parents, and other care providers of children to age 10.* Santa

Cruz, CA: ETR Associates.