台北地區國民小學學校護理人員性教育執行狀況及其影響因素探討

A Study of Sexuality Education Performance and Associated Factors Among Elementary School Nurses in Taipei

## 中文摘要

本研究目的在探討國民小學學校護理人員性教育執行狀況及其影響因素,以台北地區 342 所公 立國民小學學校護理人員為研究對象,採橫斷式調查研究法,以自擬結構式問卷為研究工具,運 用郵寄問卷方式進行資料收集,共計回收有效問卷 145 份,回收率 42.39%。重要結果歸納如 下:

一、研究對象的性知識屬中等程度,以「自慰」、「性騷擾與性侵害」的知識,平均得分最高,「青春期的身體發展」、「月經與經期保健」、「性傳染病」平均得分最低。

二、研究對象的的性態度相當正向,有八成左右的研究對象認為學校護理人員負有促進全校師生性健康的責任,而有九成以上的研究對象願意積極參與學校性教育,提供教師與學生性健康諮詢與輔導,並願意學習有關學校性教育相關課程及教學方法。

三、有二成左右的研究對象因未獲主辦單位邀請與工作忙碌沒時間參與,而在學校性教育相關教 學活動中缺席。參與學校性教育相關教學活動的研究對象,在規劃學校性教育工作計畫時,約有 四至五成的人會將性教育列入工作計畫或行事曆,且多數能主動與主辦處室聯繫及尋求社區資 源。提供學校性教育的方式,依序為提供諮詢、輔導與講授。有七成五的人曾實施教學成效評值, 最常採行的評值方法是觀察學生上課情形及統計參與人數。有六成六的研究對象自認可以勝任學 校性教育工作,而有近八成的人自覺參與學校性教育成效良好。

四、學校規模及學校護理人員之人口學特徵,如:婚姻狀況、最高學歷、職稱、校護年資、在職 教育或訓練經驗、性態度,均是影響學校護理人員的性教育執行狀況的相關因素。

五、整體而言,學校護理人員對於學校性教育相關教學活動相當投入,但作風趨於保守,學校護 理人員應該化被動為主動,將性教育工作計畫列入學校行事曆,並在校務會議中報告;主動與教 師及家長溝通學童性健康相關議題,使學校行政主管及教師瞭解學校護理人員的專業角色功能, 提高專業的能見度。

根據研究結果,本研究建議:

一、在專業養成教育及在職教育中,應加入「性教育」方面的課程,以提昇學校護理人員性教育相關知識與技能。

二、 學校應將性教育納入學校政策,並明訂學校性教育實施計劃。確立學校護理人員在學校性 教育中的角色與功能。

三、發展學校性教育工作模式,建構學校、社區的資源網路,並整合教師與護理人員專業間的工作模式,以提供學童優質的學校性教育,促進學童性健康。

## 英文摘要

The purpose of this study was to investigate the performance and associated factors of sexuality education by elementary school nurses in Taipei. A cross-sectional study design was conducted via self-structured questionnaire collected by mail. One

hundred and forty-five questionnaires were returned (42.39%). Significant results were as followed  $\therefore$ 

1. Sex knowledge was high among study samples. The average scores of sex knowledge regarding "masturbation", "sexual harassment", and "sexual abuse" were among the highest; those regarding "physical development during puberty", "menstruation and its health care", and " sexually transmitted diseases" were among the lowest. Scores of sex knowledge had no significant influence on school nurses's implementation of sexuality education.

2. Sex attitude was positive. Eighty percent of the study subjects agreed that school nurses was responsible for the health promotion of sex in school. More than 90% of study subjects were willing to participate actively in sexuality education in school, providing health consultation and guidance, and willing to learn courses and teaching method relating to sexuality education in school. Scores of sex attitude was statistically correlated with the implementation of sexuality education.

3. Twenty percent of the study subjects were absent from teaching activities of sex education in school because they were not invited or did not participate due to busy working schedule. Among the subjects who participated in related activities of sex education in school, 40% to 50% included sex education in their work plan or schedule, and most of them actively contacted the office in charge and sought community resource. Methods for sex education in school were providing consultation, guidance, and lecturing, in that order. Seventy-five percent performed evaluation of teaching effectiveness; the most common method for evaluation was observing pupils in classes and recording the number of participants. Sixty-six percent of the study subjects considered themselves capable for sex education in school, and close to 80% considered the effectiveness of sex education in school were good.
4. Special features of the school and demographic characteristics of school nurses, such as: marital status, highest level of education, job title, job seniority, continuing education or training experience all were related factors that influenced the implementation of sexuality education in school by school nurses.

5. As a whole, school-nurses is quite involved in teaching activities related to sexuality education in school, but their approach tended to be conservative. School nurses should be active, instead of passive, in integrating plans for sex education into school calendar, and reporting at school meeting; and should initiate communication with teachers and parents for topics relating to pupils' sexual health. So school administrators and teachers may better understand the professional role of the school nurses, thus elevate the perception of their professionalism.

According to the results of this study, I propose the followings:

1. "Sexuality education" courses should be part of curriculum for professional

education and continuing education programs.

2. Sexuality education should be incorporated into school policy with clear program for implementation of sex education in school and establishment of the role and function of school nurses in sex education in school.

3. Create network of resources among schools and community, and coordinate the working mode between professional teachers and nurses, so as to provide pupils high quality sexuality education in school and to promote their sexual health.