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The Details of Sexuality Education Received by University Students and the Outlook for a “Comprehensive Sexuality Education”: Sexuality education at elementary school, junior high school, and senior high school

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Abstract

In Japan, Comprehensive Sexuality Education (CSE) has not yet been introduced into the national educational policy. There is no unified standard sexuality-education curriculum at higher levels of education. Against this background, a retrospective survey of first-year university students was conducted in June 2020 and May 2021 to gain insight into the students’ experiences with sexuality education at school. Based on a survey conducted at Osaka University in 2020–2021, the study explored and revealed the type of sexuality education young people aged 18 and 19 experienced. A total of 102 valid surveys were collected (36 male and 66 female respondents).

While many respondents remembered sexuality education sessions as special occasions, others had little memory of what they learned. For female students, sexuality education generally started in 5th grade with menstruation education. For both male and female students, sexuality education amounted to a few hours of content in the upper grades of elementary school and lower grades of junior high school. Some participants reported having received no sexuality education. In 2021, several respondents stated that planned sexuality-education sessions with guest lecturers had been cancelled at their high schools due to COVID-19. Survey results revealed that respondents felt that CSE was needed from the early school years to give students the necessary skills and knowledge to protect themselves from crime, avoid unwanted pregnancies, and build future relationships with loved ones.

Key words: Comprehensive Sexuality Education (CSE); Japan; adolescents and youth; COVID-19

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1. Introduction

The 15-year Sustainable Development Goals (SDG) to be achieved by 2030 underscore the importance of sexuality education for youth from an educational and health perspective. With this in mind, the United Nations has consistently promoted the dissemination of sexuality education that is truly comprehensive (Hayashi 2019).

Comprehensive sexuality education (CSE) is a curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives. (UNESCO, 2018, p. 16)

Comprehensive sexuality education incorporates eight key concepts: ① human relationships; ② values, human rights, culture, and sexuality; ③ understanding gender; ④ violence and safety; ⑤ skills for health and well-being; ⑥ the human body and development; ⑦ sexuality and sexual behavior; and ⑧ sexual and reproductive health. In other words, comprehensive sexuality education covers a wide range of topics, including not only sexual behavior, pregnancy, and sexually transmitted diseases (⑥, ⑦, ⑧) but also human relationships and human rights. Evaluation studies on comprehensive sexuality education have confirmed the positive impact of comprehensive sexuality education on children and adolescents.

In terms of implementing comprehensive sexuality education in Japan, a cross-sectional survey conducted by Momo et al. (2023) on Japanese women aged 18–45 years indicated that approximately half of the 4,631 respondents possessed incorrect knowledge about emergency contraception and were at risk of unexpected pregnancy. This suggests that comprehensive sexuality education centered on emergency contraception is needed, and preparations to respond to social and regulatory changes are required.

An understanding of the implementation status of sexuality education is necessary to promote comprehensive sexuality education.

Previous studies on the current state and awareness of sexuality education in Japan have been conducted on students in junior high school and above, as well as on teachers and parents. Focusing on sexuality education for children with intellectual disabilities, Hara (2010) conducted a survey of teachers at special needs schools, parents, and related teaching support staff. The results revealed that teachers are often indifferent or uncomfortable with sexuality education and have little experience in its implementation.

Further, the results also indicated that without established learning content and teaching methods, gaining the understanding and cooperation of parents and colleagues remains an obstacle to implementing

sexuality education. A survey of teachers conducted by Ogawa (2015) on sexuality education in elementary schools revealed that effective sexuality education requires close cooperation between the school and external teachers and that sexuality education must also adapt to students' individual and family backgrounds. In terms of sexuality education in Japanese junior high schools, a questionnaire survey by Hashimoto et al. (2011) on junior high school initiatives, students' sexual knowledge, and parents' awareness identified the time and content constraints facing sexuality education, as well as the high expectations placed by parents on sexuality education at school. Surveys of university students included those that focused on their sexual awareness and behavior (Konno and Nishiwaki 2006; Ogawa and Hikita 2016) and the content of sexuality education they had received (Shinomiya et al. 2019; I et al. 2024).

This paper aims to clarify 1) what kind of sexuality education first-year students received in elementary school, junior high school, and senior high school after being given a lecture on comprehensive sexuality education, and 2) how they evaluated the sexuality education they received. It will also consider the practice of comprehensive sexuality education in Japan and the state of sexuality education.

2. Survey Method

We recruited 18- and 19-year-old first-year university students taking the Osaka University general education course "Topics in Kyosei Studies" in June 2020 and May 2021 to participate in the anonymous survey. Valid respondents to the two surveys numbered 102 (36 males and 66 females).

In addition to questions about the respondents' attributes, the survey asked respondents to fill out a simple table with any information they remembered about the subjects or timeframe in which they received sexuality education in the latter grades of elementary school, junior high school, and senior high school; how much time was spent on it; who the teacher was; and the details of the lessons. Next, we asked whether they had received sexuality education at home and, if so, whether it was the same as that taught at school, and if otherwise, how it was different.

Finally, participants were asked whether they thought more sexuality education should be provided in schools. They were free to choose to answer the question, and it was made clear that their decision would not affect their grades in the courses they were taking.

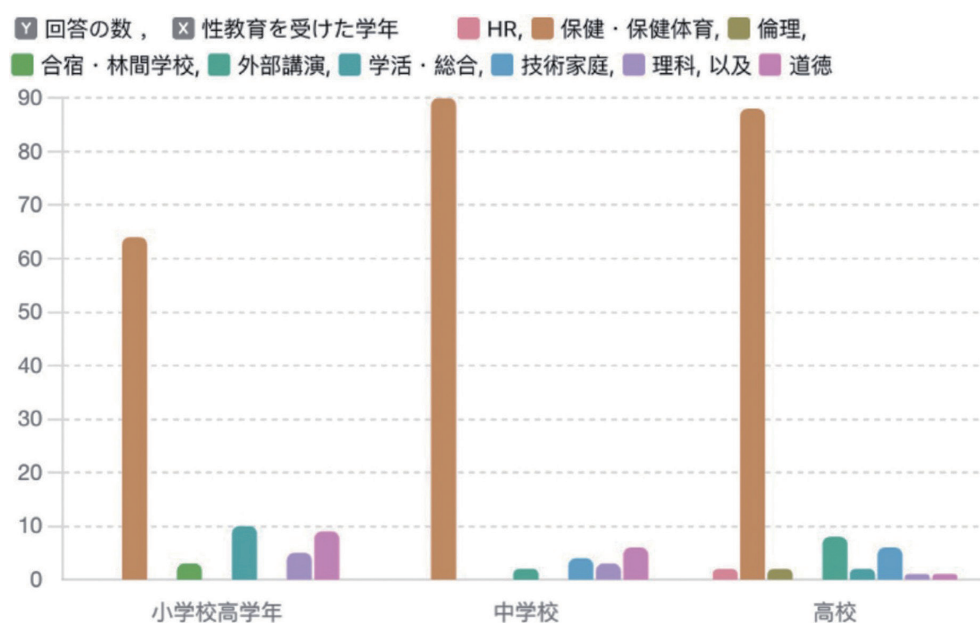
This study was reviewed and approved by the Research Ethics Committee of Kyosei Studies, Graduate School of Human Sciences, Osaka University (registration number OUKS2101).

3. Results

3.1. Sexuality education topics and their content that respondents recall receiving from elementary school to senior high school

Figure 3.1 and Table 3.1 summarize the topics and content of sexuality education that the respondents received from elementary school to senior high school.

Figure 3.1 Subjects in which sexuality education was provided from the latter grades of elementary school to senior high school



Japanese Source	Translation
回答の数	Number of responses
性教育を受けた学年	Grade level when sexuality education was received
保健・保健教育	Health education
倫理	Ethics
合宿・林間学校	Training camps and school trips
外部講演	External lectures
学活・総合	Academic activities and general
技術家庭	Technology and home economics
理科、以及	Science, etc.
道德	Morality
小学校高学年	Latter grades of elementary school
中学校	Junior high school
高校	Senior high school

Table 3.1 Subjects in which sexuality education was provided from the latter grades of elementary school to high school and examples of answers

Subjects	Grade level in which sexuality education was received (Number of respondents)	Examples of specific answers
Health and physical education	Latter grades of elementary school (64)	“Sexual differences between males and females,” “ejaculation and fertilization,” “physical development,” “reproduction,” “sexual intercourse,” “structure of genitalia,” “physical development and differences between males and females,” “how children are conceived,” “menstruation” ¹⁾

	Junior high school (90)	“Contraception,” “using condoms and pills,” “reproductive organs,” “menstruation,” “sexual activity,” sexually transmitted diseases,” “sexual consent,” “male and female bodies,” “gender bias,” “women’s way of life,” “diverse sexualities,” “childbirth,” “domestic violence,” “means of obtaining information on sex”
Health and physical education	Senior high school (88)	“Contraception,” “induced abortion,” “reproductive mechanism,” “prevention of sexually transmitted diseases and AIDS,” “use of contraceptives,” “intimate partner violence in dating relationships,” “diverse sexualities,” “healthy interactions with partners” “processes from pregnancy to childbirth,” “LGBT and gender,” “sexual interest, desire, and choice of sexual behavior,” “married life and health,” “masturbation”
Ethics	Latter grades of elementary school (9)	“Pregnancy and dating,” “relationships with other people,” “human rights,” “prevention of bullying”
	Junior high school (6)	“Gender,” “social issues such as sex-based discrimination,” “childbirth and child rearing”
	Senior high school (1)	“Delinquency prevention,” “bullying,” “human rights,” “gender”
	Latter grades of elementary school (10)	“Physical development,” “reproduction,” “sexual activity,” “human rights”
	Junior high school (0)	—
	Senior high school (2)	“Pregnancy,” “childbirth”
Science	Latter grades of elementary school (5)	“Videos and photos of fertilization of non-human organisms,” “child development in the womb,” and “the mechanism of the birth of life”
	Junior high school (3)	—
	Senior high school (1)	“Mechanism and development of pregnancy,” “process of (child) growth”
Training camps and school trips	Latter grades of elementary school (3)	“Menstruation,” “using sanitary napkins,” “Disposing of sanitary napkins”
	Junior high school (0)	—
	Senior high school (0)	—
Technology and Home Economics	Latter grades of elementary school (0)	—
	Junior high school (4)	“Maintaining health and raising children,” “how babies are born,” “gender,” “baby development,” “raising children,” “physical and mental health,” and “handling IT technology”
	Senior high school (6)	“Childbirth,” “child development,” “abuse issues,” “domestic violence,” “gender,” “male and female roles,” “sexual activity,” “pregnancy,” and “contraception.”

External lectures	Latter grades of elementary school (0)	—
	Junior high school (2)	“Masturbation,” “contraception methods”
	Senior high school (8)	“Sexual minorities,” “contraception,” “sexually transmitted diseases” “Reproductive mechanisms,” “interacting with people,” “LGBT,” “infertility treatment,” “STDs and their prevention,” “prevention of child pornography,” etc.
HR	Latter grades of elementary school (0)	—
	Junior high school (0)	—
	Senior high school (2)	“Gender discrimination,” “gender/LGBTQ”
Research ethics	Latter grades of elementary school (0)	—
	Junior high school (0)	—
	Senior high school (2)	“Abortion and the value of life,” “gender,” and “reproductive technology”

The written responses regarding the teacher in charge of sexuality education, class format, and sexuality education received at home were imported into the qualitative data analysis software QSR NVivo11 for detailed examination and comparison. Most respondents said that they had received sexuality education from the latter grades of elementary school through senior high school, primarily in classes on health and physical education, home economics, biology, ethics, general studies, class activities, human rights homeroom classes, and one-off sexuality education lectures.

Sexuality education at different educational stages (e.g., latter grades of elementary school, junior high school, and senior high school) conveyed fragmented knowledge. The respondents received most of their sexuality education through health and physical education classes in junior high and senior high schools.

3.2. Duration and format of sexuality education received

Participants’ recollections of the duration of sexuality education in elementary school to high school differed widely, ranging anywhere from 15 minutes to 10 hours. Teachers in charge taught health and physical education, technology and home economics, biology, morals, ethics, general studies, class activities, and human rights homeroom, and staffed the nurse’s office. In addition, obstetricians, nurses, or other specialists gave one-off sexuality education lectures on contraception, child pornography, and LGBT issues.²⁾ Further, when asked how they received sexuality education, the responses were “listening to explanations from the textbook,” “active learning format,” and “attending gender-specific lectures.”

3.3. The reality of sexuality education at home

Ninety-two out of 102 respondents answered that they had not received or could not remember receiving any form of sexuality education at home. In the free-form responses, some answered that “the

topic was taboo” and “it was like an unspoken rule.” Further, some respondents who answered that they had not received any particular sexuality education at home were clearly confused as to whether what they were taught could be classified as sexuality education. The following are some of their answers:

“My mother taught me how to use sanitary pads when I first had my period.”

“I was given a brief explanation about the changes in my body.”

“Dealing with menstruation and physical development.”

“When I received the cervical cancer vaccine, my mother gave me simple warnings and told me to be careful.”

“We talked when pregnant high school students were portrayed in shows, like in TV dramas.”

Ten participants answered that they had received sexuality education at home. They said that their mothers had explained “sexual intercourse,” “sex,” “rape,” “physical changes during menstruation and how to deal with these changes,” “using and disposing of sanitary pads and vaginal discharge,” “private areas and menstruation,” and “human relationships and child rearing.” As for the form sexuality education took at home, respondents answered, “mother’s experiences,” “picture books for children,” and “learned through change.”

3.4. Should more sexuality education be provided in schools?

Of the 102 respondents, 94 answered that more sexuality education should be provided at school.

Eight answered that more sexuality education was not necessary. Among the reasons for the need for more sexuality education at schools, respondents cited “preventing unwanted pregnancies” and “protecting oneself from sexual crimes.” Meanwhile, “teasing from the opposite sex” and “awkwardness in class” were cited as reasons why more sexuality education should not be provided. Because proper education is not provided at home or at school, respondents tend to look for sources of information on the Internet. However, they also recognize that false information on the Internet is dangerous and that these pieces of information should not be taken at face value. It also seems essential to improve sexuality education by conveying correct and necessary information, rather than by being vague. Specifically, respondents said that “it would be better to teach both men and women about the pain of menstruation and about sanitary products” and that “specific education should be given about condoms and the after-pill (emergency contraceptive).”

4. Discussion

This paper clarified the commonalities and differences between the sexuality educational content given to 18- and 19-year-old college freshmen in elementary, junior high, and senior high schools. It also revealed how they obtain knowledge and information and what they think about the sexuality education they have received so far. In addition, it clarified what kind of sexuality education they expect from classrooms in the future.

4.1. Sexuality education topics and content

Approximately 79% of the students answered that they had received sexuality education in the latter grades of elementary school, and 95% answered that they had received sexuality education in junior high and senior high school. Thus, most students remember receiving sexuality education at school. Sexuality education was incorporated primarily into health and physical education subjects, home economics, biology, ethics, general studies, class activities, human rights homeroom, and one-off sexuality education lectures. Upon analyzing sexuality education textbooks in France, Finland, and Germany, Hashimoto (2015) stated that differences in learning content were among the reasons why a nationwide sexuality education survey conducted in the early 2000s revealed the sexual knowledge of Japanese junior high school students to be clearly inferior to that of their counterparts in European countries.

Sexuality education was incorporated into “Science” in France, “Human Biology” and “Health Education” in Finland, and “Biology” in Germany. Sex-related topics that are covered in European science and biology textbooks are primarily covered in Japanese health textbooks. However, while this may be due to differences in subjects, it was revealed that Japanese health textbooks need to improve the quality of the medical and physiological information and knowledge they convey. In addition, similar to Japan, South Korea has a variety of subjects that deal with sexuality education, including health, physical education, technology, home economics, morality, and life and ethics, but Korean health textbooks also cover topics that cannot be taught in elementary and junior high schools in Japan because of restrictions in the curriculum guidelines. South Korean health textbooks are more likely to provide knowledge and practical skills on physiological, social, and cultural aspects of human sexuality, reproduction, and sexual behavior from elementary school onward compared with Japanese textbooks.

Further, the study found that students received a primarily “theme-based” sexuality education in educational settings from elementary school to upper grades.

In elementary school, the main topics are the differences in male and female bodies and development, menstruation, and fertilization, while in junior high school, the main topics are sexual intercourse, sexually transmitted diseases, and gender, which go a little further than the topics discussed in elementary school. Some respondents said that the educational content in senior high school was almost the same as that in junior high school, or that they realized that sexuality education was the weakest in senior high school. Asai (2018) compared “theme-based” and “task-based” sexuality education and argued that Japanese sexuality education had been based on the “theme-based” framework: “The theme-based approach is a way of thinking in which the basic task of conceiving and implementing a sexuality education curriculum is to arrange themes by grade, and the theme to be taken up in class for each grade is the axis of sexuality education practice” (p. 98). The commonalities in sexuality education themes by subject and grade level revealed in this survey may also reflect Asai’s “theme-based” approach to sexuality education.

4.2. *Format of sexuality education*

When participants were asked how sexuality education was conducted, responses included “listening to explanations from the textbook,” “active learning,” and “gender-specific lectures.” Respondents to this survey also had vague recollections of the duration of the sexuality education they received from elementary school to high school, with responses ranging from 15 minutes to 10 hours. It can be said that the educational format of listening to explanations from the textbook in a classroom does not have an impact. In comparison, the French “science” textbook states that “being scientific is being human,” and the goal is to be able to actually explain what you have learned in your own words and develop your opinions (Hashimoto 2015). Some teachers in the educational field have a negative attitude toward sexuality education, but this is explained by the opposition to sexuality education that began in the 2000s. The curriculum guidelines allow schools to organize and implement curricula that include extracurricular content if it is deemed necessary for the school. However, in the educational field, fear of providing sexuality education, the effort involved in creating sexuality education materials, the stress from parents’ perceptions, and the low priority attached to sexuality education lead to stagnation of sexuality education (Watarai 2021).

On the other hand, respondents to this survey answered that they had received sexuality education not only through classroom lectures but also through various teaching formats such as sessions by external lecturers, class discussions, and workshops. Introducing such diverse teaching formats is considered a valuable opportunity for students to think comprehensively about sex, including human rights, gender, and life. However, sexuality education is not an independent regular subject; rather, it is implemented through related subjects or external lectures that are focused on fragmented knowledge and are completed once. This leads to concerns that students will not receive structured sexuality education.

4.3. *Should more sexuality education be provided?*

In this survey, some respondents said that sexuality education should not be actively provided in public places such as schools. However, 95% of the respondents supported providing more sexuality education in schools. This survey was conducted after a lecture on comprehensive sexuality education. While the lecture tended to skew in favor of comprehensive sexuality education, it also supported the idea that if people understand comprehensive sexuality education, they will be more convinced of its necessity. The results of this survey show that 91% of respondents have almost never received sexuality education at home. Because they cannot receive specific education at home or at school, respondents tend to seek sexual knowledge on the Internet. However, they are also aware that information on the Internet is dangerous for children who have not yet acquired the ability to make judgments. Therefore, respondents indicated that they would like to receive more accurate and in-depth sexuality education in school, not just through provision of knowledge but also by being taught to understand the diverse meanings of sex. Sexuality education should reflect the realities of children and society, and match what to cover in class, and how, with the needs of children and the requests of parents. In other words, it

became clear that a shift from “theme-based” (Asai 2018) to “task-based” sexuality education was essential.

Hashimoto et al. (2011) conducted a nationwide survey of junior high schools with the aim of “understanding the actual state of sexuality education in schools, students’ knowledge, and parents’ opinions, and clarifying the issues.” The study’s results revealed that the average number of hours allocated to third graders was 9.19 hours.

The results showed that sexuality education is valued significantly lower in Japan than in Finland and the Netherlands. Further, the study revealed that “Japanese children had less knowledge about sexual health when compared with those in UK and France.” One of the reasons for this is that the current certified textbooks do not cover abortion or contraception (p. 15).

Niki (2015) pointed out that Japanese sexuality education focuses more on moral aspects and less on acquiring scientific knowledge, arguing that, while a moral perspective is important, the learning content must be reexamined from a scientific perspective and the curriculum guidelines revised. *Kyōkasho ni Miru Sekai no Seikyōiku* (Sexuality Education in the World as Seen in Textbooks) (Hashimoto et al., ed. 2018) contains the results of a survey on the current state of comprehensive sexuality education in other countries. In France, the biology curriculum standards were changed in 2011 and cover not only the physiological aspects but also themes of sexual diversity, sexual pleasure, and the social aspects of sex, including bioethics. In the case of public junior and senior high schools, sexuality education is also provided by local family planning organizations, and boys and girls often take the classes together. In preparation for inquiries and protests from parents, the classes are always conducted in pairs with a school nurse (a nurse assigned to the school).

In other words, they take measures in anticipation of the possibility of opposition to sexuality education, and cover in-depth content in sexuality education.

4.4. Concerns about sexuality education during the COVID-19 pandemic

Although the COVID-19 pandemic severely limited opportunities to meet people, the number of victims of sexual violence increased. The number of consultations received by one-stop support centers that support sexual violence survivors increased by 15.5% in the first half of 2020 compared with the same period of the previous year (*Asahi Shimbun Digital* 2020). While avoiding a simplistic connection, we would like to emphasize the simultaneously increased risks that teenagers are exposed to in the online world and the heightened reports of teenage pregnancies for such reasons as loss of homes during the COVID-19 pandemic. Further, an essay published in *The Lancet* (Burzynska and Contreras 2020) discusses the gender impact of school closures due to the COVID-19 pandemic. School closures put teenage girls at higher risk of sexual exploitation. Experts warn that girls are more likely to drop out of school than boys.

Many respondents to this survey said that schools have been closed due to the COVID-19 pandemic and that sexuality education classes have been canceled. The COVID-19 pandemic has caused school closures and the shift from face-to-face classes to online classes, both of which have had a major impact

on the format of sexuality education. There seems to be an urgent need to reconsider the format of sexuality education in the future.

5. Conclusion

In this study, by investigating the type of sexuality education received by 18- and 19-year-olds, we found that respondents expected a comprehensive sexuality education that would not only teach knowledge but also such psychological aspects as building relationships and communicating—in other words, a sexuality education that would go beyond teaching about reproduction to encompass human personality and life in general. This paper also recognizes the contemporary importance of a comprehensive sexuality education, which is an international trend that is evolving because of the influence of the accelerating information society and globalization. Understanding the discrepancy in perception between the objectives of comprehensive sexuality education and classroom practices will be essential for promoting comprehensive sexuality education in the future.

One bias of this study to consider is that the survey population was limited to students at Osaka University, a group that receives a relatively high quality of education compared with society as a whole. In future research, the study should be expanded to include a wider range of groups.

Notes

- 1) *Seiri* refers to menstruation. While *gekkei* is the medical term for menstruation, some believe that *seiri* is a slang term. However, it is now commonly used to refer to menstruation. In this paper, we use either *seiri* or *gekkei* depending on the word used by the students in their answers.
- 2) “LGBT” is an acronym that combines the initials for “lesbian, gay, bisexual, and transgender.” It can also be expressed as “LGBTQ,” “LGBTI,” “LGBTIQ,” “LGBT+,” or “LGBTQIA+,” by adding the initials for “questioning, intersexual, and asexual.” In English-speaking countries, terms such as “LGBTQ” and “LGBTI” are becoming more common, but in this survey, respondents used the term “LGBT.” We have used “LGBT” for consistency.

References

- Asahi Shimbun Digital* (2020). “Sexual violence victim consultations up 15%; increased app usage may be the result of self-restraint” November 6, 2020 <https://www.asahi.com/articles/ASNC66JN3NC6ULFA01Z.html> (accessed on September 10, 2024)
- Asai, H. (2018). *Wagakuni no seikyōiku seisaku no bunkiten to hōkatsu-teki seikyōiku no tenbō: Gakushū shidō yōryō no mondaiten to kokusai sutandādo kara no itsudatsu* (A turning point in Japan’s sexuality education policy and the outlook for comprehensive sexuality education: Problems with the curriculum guidelines and deviations from international standards), “*Manabiai*” 11, 88–101.

- Burzynska, K., Contreras, G. (2020). Gendered effects of school closures during the COVID-19 pandemic, *Lancet*, 395 (10242), 1968.
- Hara, E. (2010). Chiteki shōgai-ji ni taisuru tokubetsu shien gakkō ni okeru seikyōiku jisshi no jōkyō to, kyōyu to hogo-sha no ishiki (The status of sexual education in special needs schools for children with intellectual disabilities and the awareness of teachers and parents), *Japanese Journal of Medicopedagogy*, 30, 61–69.
- Hashimoto, N. (2015). Gender and sexuality in education reconsidering sexuality education in Japan through an analysis of school textbooks related to sexuality education in foreign countries, *The Journal of Kagawa Nutrition University*, 44, 27–39.
- Hashimoto, N., Ikeya, H., Tashiro, M. (eds.) (2018). Kyōkasho ni miru sekai no seikyōiku (Sexuality Education in Textbooks Around the World), Kamogawa Publishing.
- Hashimoto, N, Shinohara, H., Tashiro, M., et al. (2011). Sexuality education in junior high school in Japan, *Bulletin of the Department of Education: Education and Gender Studies*, 9, 3–20.
- Hayashi, R. (2019). International Argument on the Comprehensive Sexual Education (Abstract), The 71st Population Association of Japan Congress, Kagawa University (June 1, 2019) <http://www.paoj.org/taikai/taikai2019/abstract/1195.pdf> (accessed on September 10, 2024).
- I, M., Hattori, T., Izumi, T. (2024). A study on the actual situation and future prospects of sexuality education: A questionnaire survey on sexuality education for students aiming to become teachers, *Bulletin of Teikyo Junior College*, 25, 11–25.
- Konno, M. and Nishiwaki, M. (2006). Relationship of knowledge about sex and sexual morality to sexual activity in university students, *Yamagata Journal of Health Sciences*, 9, 33–47.
- Momo, K., Maeda, E., Hattori, H., Isozaki, H., Takita, H., Morohoshi, H., Ryu, K., Hida, N., Sambe, T., Shiratoe, N. (2023). Descriptive study on a nationwide exploratory questionnaire survey of emergency contraceptive pills and their sexual history and knowledge in Japan, *Biological and Pharmaceutical Bulletin*, 46, 1296–1303. DOI: 10.1248/bpb.b23-00268
- Niki, Y. (2015). The directionality of the sexuality education seen in young people's sexual action research, *The Bulletin of Hachinohe Junior College*, 40, 59–75.
- Ogawa, M. (2015). Current situations and issues of sexuality education done in elementary school: Consideration from the school personnel's questionnaire to visiting lecturer's sexuality education, *Journal of Suzuka Junior College*, 35, 15–24.
- Ogawa, M., Hikita, I. (2016). About sexuality education in the university: From the investigation of sexual awareness and sexual behavior Among junior college students, *Journal of Suzuka Junior College*, 36, 75–85.
- Shinomiya, M., Yasuda, Y., Hyakuta, Y., Kanayama, T. (2019). The current status and issues regarding sexuality education that college students have received-Content of sexuality education-, *The Bulletin of Niimi College*, 39, 65–70.
- UNESCO, translated by Haruo, A., Gon, K., Tashiro, M., Fukuda, K., and Watanabe, D. (2020). International Technical Guidance on Sexuality Education-An Evidence-Informed Approach

- (Revised Edition), Akashi Publishing (Original: UNESCO, International Technical Guidance on Sexuality Education: ITGSE: An evidence-informed approach [Revised edition], 2018).
- UNESCO (2018), International Technical Guidance on Sexuality Education-An Evidence-Informed Approach (Revised Edition).
- Watarai, M. (2021), *Shin gakushū shidō yōryō to 'jinsei o yutaka ni hagukumu kyōiku' kyōzai no sakusei* (New curriculum guidelines and the creation of teaching materials for “education to enrich life”), *The Japanese Association for Sexuality Education Journal*, 123, 1–6.