



Minerva Access is the Institutional Repository of The University of Melbourne

**Author/s:**

Teh, J;Duncan, C;Nzenza, T;Bolton, D;Lawrentschuk, N

**Title:**

Gender bias in sexual health education: why boys do not know where the prostate is?

**Date:**

2019-05-01

**Citation:**

Teh, J., Duncan, C., Nzenza, T., Bolton, D. & Lawrentschuk, N. (2019). Gender bias in sexual health education: why boys do not know where the prostate is?. ANZ Journal of Surgery, 89 (5), pp.467-468. <https://doi.org/10.1111/ans.15126>.

**Persistent Link:**

<https://hdl.handle.net/11343/285792>

## **Gender bias in sexual health education – why boys do not know where the prostate is**

Jiasian Teh<sup>1,2,3,4</sup>, Catriona Duncan<sup>2</sup>, Tatenda Nzenza<sup>1,2,3,4</sup>, Damien Bolton<sup>1,3,5</sup>,  
Nathan Lawrentschuk<sup>1,3,5</sup>.

1. University of Melbourne, Department of Surgery, Austin Hospital, Melbourne, Victoria AUSTRALIA
2. Young Urology Researchers Organisation (YURO), AUSTRALIA
3. University of Melbourne, Melbourne, Victoria, AUSTRALIA
4. Department of Surgical Oncology, Peter MacCallum Centre, Melbourne, Victoria, AUSTRALIA
5. Sir Peter MacCallum Dept. of Oncology, University of Melbourne
6. Olivia Newton-John Cancer Research Institute, Austin Hospital, Melbourne, Victoria, AUSTRALIA

Corresponding author: Jiasian Teh  
ORCID: 0000-0002-7882-5155  
Austin Health  
Department of Urology  
Level 8, Harold Stokes Building  
145 Studley Road, Heidelberg VIC 3084

Email: [Jiasian@gmail.com](mailto:Jiasian@gmail.com)

### **Key words**

Prostate cancer, gender bias, sexual health education

### **Disclosure**

This is the author manuscript accepted for publication and has undergone full peer review but has not been through the copyediting, typesetting, pagination and proofreading process, which may lead to differences between this version and the Version of Record. Please cite this article as doi: [10.1111/ans.15126](https://doi.org/10.1111/ans.15126)

Authors have no potential conflicts of interest to disclose

### **Funding**

This research did not receive any funding

7. University of Melbourne, Department of Surgery, Austin Hospital, Melbourne, Victoria AUSTRALIA
8. Young Urology Researchers Organisation (YURO), AUSTRALIA
9. University of Melbourne, Melbourne, Victoria, AUSTRALIA
10. Department of Surgical Oncology, Peter MacCallum Centre, Melbourne, Victoria, AUSTRALIA
11. Sir Peter MacCallum Dept. of Oncology, University of Melbourne
12. Olivia Newton-John Cancer Research Institute, Austin Hospital, Melbourne, Victoria, AUSTRALIA

Australia has one of the highest rates of prostate cancer (PC) incidence in the world, yet men continue to have poor knowledge of where their prostate is located and what functions it performs.(1, 2) Given the growing interest in men's health as a priority issue, and calls for greater involvement of men in sexual and reproductive health, we propose that knowledge of the prostate through basic sexual education taught in schools can increase awareness and serve to improve health outcomes for men.

A recent survey of children in primary school reported that 74% of boys cited school programs as the most used source of information about sexuality and health.(3)

Sexual health education in schools refers to a curriculum of addressing urogenital anatomy and physiology, reproduction, contraception, and related topics which begins around age ten. (4) The learning goals as set by Australian Curriculum, Assessment and Reporting Authority (ACARA), are the identification of private parts of the body with progression to basic male and female anatomy(4). Despite this early opportunity to teach boys about male urogenital anatomy (Figure 1), anecdotally it appears that the prostate is rarely included, while female anatomy is taught in greater detail. The lack of prostate education at a young age may contribute to poor understanding of the prostate that has been identified by a survey of Australian men which demonstrated that 80% of men did not understand the function of the prostate.(2) This is consistent with a more recent survey of men in the United Kingdom, in which 17% of participants were not aware they had a prostate, only 8% understood the function of the prostate and the majority unaware of its anatomical location.(5)

Currently, changes in health priorities and social mores have broadened the focus of sexual health education from bio-medical and physiological aspects to include preventative health measures. (4) Given the aim of health education to improve health over the course of a person's life, neglecting to teach boys about the prostate during their formative years has potentially harmful consequences. Multiple studies have demonstrated that men with greater understanding and education about

prostate health are more likely to engage in health services and shared decision making about prostate cancer screening.(6) Not taking advantage of sexual health education in schools to teach boys about basic prostate health seems a disservice to future generations.

The high prevalence of prostate disease in our community means arming children with a basic understanding of the prostate relevant even at an earlier stage in life. Health literacy plays a significant role in patient's ability to interact with health care professionals and engage in the treatment process (7). If education factors cannot provide sufficient information, there is room for media campaigns to help fill the gap.(8) However, the ability to engage with media campaigns and health promotion messages requires a basic understanding of the prostate.

Sexual health education must expand beyond puberty, contraception and the spread of STIs. Broadening these programs to include knowledge about the prostate may help future generations develop the competence and confidence to engage in health services including prostate cancer screening. Given the current revision of sexual health education, the prostate, an integral player in men's health and reproduction, should not be overlooked.

1. Wong MC, Goggins WB, Wang HH, Fung FD, Leung C, Wong SY, et al. Global Incidence and Mortality for Prostate Cancer: Analysis of Temporal Patterns and Trends in 36 Countries. *Eur Urol.* 2016;70(5):862-74.

2. Arnold-Reed DEH, D.A.; Bulsara, M.K.; Ngo, H.; Eaton, M.; Wright, A.R.; Jones, F.R.; Kaczmarczyk, W.; Marangou, A.G.; Brett, T.D. Knowledge and attitudes of men about prostate cancer. *Med J Aust*. 2008;189(6):312-4.
3. Johnson B, Harrison, L., Ollis, D., Flentje, J., Arnold, P. , Bartholomaeus, C. . 'It is not all about sex': Young people's views about sexuality and relationships education. Report of Stage 1 of the Engaging Young People in Sexuality Education Research Project. 2016.
4. (ACARA) ACAaRA. Health and Physical Education 2018 [Available from: <https://www.australiancurriculum.edu.au/f-10-curriculum/health-and-physical-education/>].
5. Fiore N. Prostate Cancer. *Nurs Stand*. 2016;30:17.
6. McFall SL, Hamm RM, Volk RJ. Exploring beliefs about prostate cancer and early detection in men and women of three ethnic groups. *Patient Educ Couns*. 2006;61(1):109-16.
7. Taylor AM, Diggle P, Wessels Q. What do the public know about anatomy? Anatomy education to the public and the implications. *Anatomical Sciences Education*. 2018;11(2):117-23.
8. Smith J. Addressing men's health policy concerns in Australia: what can be done? *Australia and New Zealand Health Policy*. 2007;4:20-4.