

To cite this article: Ph.D. Nguyen Thi Van Anh and Nguyen Ngoc Ha Anh (2024). Barriers to accessing sexuality education for Hmong girls in Simacai district, Lao Cai, Vietnam. International Journal of Education, Business and Economics Research (IJEER) 4 (2): 340-362

BARRIERS TO ACCESSING SEXUALITY EDUCATION FOR HMONG GIRLS IN SIMACAI DISTRICT, LAO CAI, VIETNAM

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<https://doi.org/10.59822/IJEER.2024.4216>

ABSTRACT

Sex education focuses on preparing teenagers and young adults with the necessary knowledge, skills, mentality, and values to help them: acknowledge their health status, benefits, and self-worth; develop social relationships and sexual intercourses based on the core value of respect; acknowledge how your personal decisions affect yourself and others; acknowledge and ensure that your rights are being protected. This research focuses on understanding the different types of barriers in accessing sex education for young girls in Simacai, Lao Cai based on literature reviews for clarification on key term definitions such as the definition of children, girls, barriers, education, sex education, and the importance of sex education. Additionally, the literature reviews different types of barriers to accessing sex education for young girls, including: (i) Barrier of family/Social prejudices; (ii) Barrier of limited policies on sex education; (iii) Economic barrier; (iv) Medical barrier; (v) Psychological barrier. Our team based our research on those barriers to conducting surveys on two different respondent groups which are young Hmong girls under the age of 18 in Simacai Lao Cai and adults to evaluate different barriers in accessing sex education for young girls in Simacai, Lao Cai. Based on the data, our research team will offer some discussion/suggestions for families, schools, and society in order to reduce the previous stereotypes on this issue and improve the accessibility of sex education for both young girls and children in general.

KEYWORDS: Accessing barriers, sex education, young girls, Hmong ethnicity, Simacai district, Lao Cai province.

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Published Online: Mar 2024

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1. INTRODUCTION

Sex education is not a new topic in Vietnam's society, but it still hasn't been fully integrated into the mindset of the general public. The aching issue of child marriage, interfamilial marriage in rural

ethnicities has been a longing problem for local authorities, resulting in mental and physical damages for young children there, especially young girls.

The Simacai district is a border district of Lao Cai province, comprising 15 different ethnicities living together, of which the Hmong ethnicity is the most populated (81.24%) (truyenhinhsimacai.vn). Since 2022, when the 8th project “Implement gender equality and solve urgent problems for women and children” about national program for targeting socio-economic development for ethnic minorities in mountainous areas in the period 2021-2025 (ChuongtrìnhMụctiêủquốcgia 1719) got implemented in Lao Cai, and most women associations pay special attention and focus on promoting and cooperation the project into every lives (Phuong Thao, 2023).

However, since the project faces many obstacles while implementing these sex education programs so ethnic minorities in rural areas and in Simacai are having a hard time accessing these new educational programs. In order to understand these barriers in sex education for young girls in Simacai district, Lao Cai province, the research team have conduct a literature review to define some related terms such as the definition of children, girls, barriers, education, sexual education, and the importance of sex education. Additionally, we conduct literature review on different type of barriers that block girls from accessing sex education, including: (i) Barrier Of Family/Social Prejudices; (ii) Barrier of Limited Policies On Sex education; (iii) Economic Barrier; (iv) Medical Barrier; (v) Psychological Barriers. To conduct the research, our research team have used 2 different research methods, including desk research and sociological research (surveying two different respondent groups, one is young Hmong girls from the age of 6-18 years old and the adult group representing for families/schools/society currently study or live at Simacai). All the data will be synthesize and analyze by Excel. We based on the synthesized and analyzed data to give suggestions to improve people’s mindset on sex education and to improve the accessibility of sex education for Hmong girls.

2. THEORETICAL BASIS

2.1. Definitions

Definition of children

Based on United Nation’s Convention on the Rights of the Child in 1990, the definition for children is “every human being below the age of eighteen years.” These definitions have been the criteria for many countries in the world with the definition of children.

However, Viet Nam’s 2016 children law stated that “Children are people under the age of 16,” which means that the national definition for children is two years different from UN’s definition. This is considered as a particular case that is different from the general definition. When we compare Vietnam’s 2016 children law to Vietnam’s educational law in 2019, we can see that there are contradictions within the two laws. Based on Article 28th in 2019 educational law, it states that “each individual needs at least 12 years of basic education, including 5 years of elementary school, 4 years old secondary education, and 3 years of high school education, and the entry age for the first grade is 6 years old.

This means that the average age for an individual to finish basic education program is 18. If we use the definition of 2016 Children Law then high school students from the age of 16-18 are not included in the research's respondents; however, that age range is still attending high schools.

In result, our research team decided to based our definition of children on United Nation's definition to determine that **"Children are people below the age of 18"**.

This definition allows the research team to focuses the respondent groups to Hmong girls in Simacai district, Lao Cai province from the age of 6-18 on the topic of barriers barriers to sex education for young Hmong girls.

Definition of girls

In researches the team has conduct literature review on, including the United Nation's 1990 Convection on the Rights of the Child; it is appearance to see that most of them differentiate the two sexes by biological appearance.

Based on Viet Nam 2006 Gender Equality, sex indicates biological characteristics of man and woman.

In this research, the definition of girls is understood as people who are under the age of 18 that biologically indicates as women.

Definition of barriers

Based on Vietnamese Dictionary (2008) by Viet Nam's Institute of Linguistic, barriers could be defined as aspects that prevent any actions or activities from achieving its expected goal.

Definition of education

Education is a human-oriented activity through a system of impact and measures aimed at passing on knowledge and experience, skills and lifestyle training, fostering the necessary thoughts and ethics for the subject, helping to form and develop the capacity and qualities, personality in accordance with the purpose and objectives of preparing the subjects to participate in production labor and social life. (Bui Hien, & et al, 2001)

Definition of sex education

Sex education is an educational program for children to understand surrounding topics on genders and sexual intercourse. This is a process that prepares children the necessary knowledge and social skills for themselves. Based on that, the children can safely form new relationships based on the core value of respect and empathy toward one another. This program will teach children to acknowledge their significance and how their decision could affect others, and vice versa. Additionally, they can also learn about their rights stand how it protects them. This program can be taught at home, at school, and at any community-based organizations. Sex education gives children a clear understanding on genders and sexual ideas so that they can comprehension the significant of the issue and its surroundings. (ischool.vn, 2022)

The barriers to accessing sex education for young girls means aspects that prevent young girls currently attending schools, from elementary to high school, from receiving knowledge about the complex topic of sex education. (ischool.vn, 2022)

Fertility education for high school students is a purpose-based, planned process to help students have the right awareness of sexual health, thereby having the right attitude and behavior to achieve healthy state, in all aspects related to the fertility system, functions and processes of reproduction. (Huong, & et al, 2021)

2.2. Importance of sex education

During their teenage years, children will slowly see the changes occurring on their bodies. These changes cause confusion and also curiosity in understanding and exploring the new physical state they have. Because of this new behavior, it is crucial to teach children sex education, thus will help them:

Avoid social evils

Parents can be involved in the sex education program by teaching their children about the body parts that need to be protected so that children can understand and protect themselves from any possible dangers such as sexual harassment.

Prevent underage childbearing

When the child has all the knowledge of reproductive health and protective sexual measurements, they will be able to prevent any possibilities of early childbearing or carrying any type of sexual diseases.

Understanding self-worth and developing a healthier lifestyle

By providing sex education to teenagers, they will have a clearer understanding of the changes occurring within their bodies, thus they will be able to prevent themselves from getting involved in any type of dangerous relationships that put themselves and their health at risk.

There is a strong rationale for ensuring that all learners have access to good quality CSE (Comprehensive sexuality education). CSE is a form of transformative education – primarily enabling children and adolescents to develop the knowledge and skills to deal with critical aspects of their health and development while their bodies mature and they transition into adulthood. Delivered well, CSE can instill positive behaviours and values, as well as building personal and social competencies, such as critical thinking, risk assessment, problem solving and the ability to consider multiple perspectives. In this way, CSE equips learners to not only avoid negative health outcomes, but enjoy positive and healthy sexual and social relationships and thrive both now and in the future. (UNESCO, UNFPA, UNICEF, UN Women, WHO, 2021)

In a 2019 online survey, over 1,400 young people (aged 15-24) from over 27 countries in Asia and the Pacific reflected on their experience of sexuality education. Less than one in three believed that their school taught them about sexuality very well or somewhat well (28 percent). (UNFPA, 2021)

At least 10 million unintended pregnancies occur each year among adolescent girls aged 15–19 years (UNESCO, UNFPA, UNICEF, UN Women, WHO, 2021)

2.3. An overview of different types of barriers that prevent young girls from accessing sex education

Barrier of family/Social prejudices

There are traditional beliefs on the social role of women that still influence some people, especially ethnic minorities, on the value of gender, stating that male are more prioritized compare to female, and that female should be marry and doing domestic chores. Other believes include the intelligence of women -girls are not as intelligent as boys-, the physical power of women -girls are easier to be a bull victim than boys-, and other negative stereotypes being implemented onto girls. This action in result affecting the view of society and school on girls, thus the gap of gender imbalances further grow and the access to sex education to women also worsen.

When there are multiple children in low-income family, parents favor the boys' education because of the return on investment for educating their son. From the parents' perspective, they value a boy's education because of the economic return they may see from his job after school and the success that he is projected to have. (Camryn Lonchar, 2022)

Young women, especially older daughters, may have a role dedicated to caring for other siblings due to the family's lack of accessible childcare. They also have the responsibilities such as retrieving water and helping the family's income opportunities; thus, low-income households do not find it wise to voluntarily lose such an important role. (Sperling et al., 2016)

The biggest barrier to sex education is the belief that sex education will lead to more sex. (Lori Beth, 2017)

Vietnamese sons are expected to remit some of their income to their parents. The expected return on a son's education is higher than the return of investment on a daughter's human capital, which is lost upon marriage (Haughton and Haughton, 1994; Hill and King, 1991)

The wide variety of parental opinions as to what it is appropriate to teach. This is one of the biggest barriers to comprehensive sex education in schools. Many parents do not wish sex education to be taught in school at all. Schools find themselves at the mercy of the parents, the governing bodies and various government bodies. Most sex education programmers neglect to talk at all about the pleasure involved in sex, orgasm and problems with orgasm. (Lori Beth, 2017)

Furthermore, the extent to which parents value education affects their willingness to invest in their children's education, holding other factors constant. The parents' background, education, occupation and how much they care about their children's education also affects their investment decision about their children's education. (Liu, 2004)

Most parents are supportive of school-based sexuality education and many parents report feeling uncomfortable discussing sex or relationships with their children. While young people often seek

information about sex, sexuality and relationships from their peers, the internet or other sources, sexuality education that is delivered by trusted and trained adults is proven to be more effective in promoting healthy sexual behaviour. (UNESCO, 2015)

Confucianism values men more than women and sons more than daughters. Survey evidence in Vietnam suggests that son preference in Vietnam is quite extensive (Goodkind, 1994; Haughton and Haughton, 1994). According to the Confucian saying, “If you have a son, you can say you have a descendant. But you cannot say that if you have even ten daughters”. Another saying: ‘Thi met’ meaning ‘Girl’s middle name; a cheap basket’ means that girls are not valuable. Most parents in Vietnam rely on sons to provide support for their old age. Besides, sons in the Confucian tradition, which remains strong in Vietnam, maintain the family line. These customs and norms could shape parents’ perception of the rate of children’s income that is transferred to the parents. If cultural norms dictate that sons provide security to the parents in old age, while daughters marry and provide no support to the parents, then parents can recoup little from educating their daughters. Therefore, parents may choose to invest less in their daughters’ education. (Liu, 2004)

Barrier of limited policies on sex education

The educational systems are not prioritized in terms of funding; thus, students remain vulnerable to not only an insufficient education, but also to under qualified teachers and few school buildings. These results of underfunded education systems impact girls specifically because they will be kept at home to fulfill their responsibilities, or unenrolled by the secondary level due to the lack of accessibility. (Camryn Lonchar, 2022)

Many teachers in the developing world, particularly in rural areas, are temporary teachers hired to teach in a non-formal setting or in primary schools. This provides an opportunity for children to learn; however, temporary teachers have other jobs and commitments that may call for their absence. (Sperling, et al., 2016).

Time and funding issues. All schools suffer from funding issues. Privately funded schools suffer less but they still suffer. The amount of information and the number of subjects that must be taught as part of the full curriculum exceeds the amount of time available. (Lori Beth, 2017)

The decision to send children to school is also conditional on the quality of education available. The numbers of teachers, blackboards and textbooks per student, as well as the teacher–pupil ratio, are often used in the literature to capture the quality of education (Betts, 1995; Gertler and Glewwe, 1992; Glewwe, 1996).

If the quality of the schooling that girls receive is poor, the returns to parents from educating girls even before marrying could be low. Hence, parents may not want to educate girls. (Liu, 2004)

Economic barrier

Enrollment, transportation costs, textbook costs, and uniform costs that are required to receive an education. Many poor households in the Global South cannot afford these fees. Additionally, students including girls in low-income areas attend schools that are seemingly inadequate to many

well-paying jobs. This leads to a decreased chance for educated women to sustain a job and a livable wage, resulting in more incentives for parents to prioritize their sons' education (Van der Berg, 2008).

Parents keep their daughters at home as a means to save money and generate potential income, but there are also extreme times in which parents make more permanent decisions. For example, in order for poor families to sustain or improve their means of income, they keep their daughters out of school to either use her for labor or sell her in exchange for a variety of resources. Girls are consistently less likely to be enrolled in school due to the longer distance and more expensive cost of transportation (Camryn Lonchar, 2022).

The time spent traveling to and from school represents another opportunity cost that parents have to consider if they decide to send their children to school. Distance from school carries with it a time cost and, to some extent; parents may be unwilling to send daughters to distant schools due to safety considerations (Gertler and Glewwe, 1992).

Families make the decision to not educate their daughters in hope of avoiding further economic burdens; however, that solution is not always enough in terms of sustaining or improving financial situations. Parents, in times of desperation, result to 10 selling their daughter into a marriage in return for resources such as food, cattle, or money. Their daughters are used as a bargaining tool for the family's welfare and in some cases; she may be worth more "if she is young and uneducated". (Girls Not Brides, 2021)

Another reason why girls in low-income households are being kept from school is because their household responsibilities are also seen as an opportunity cost. Girls in the developing world carry out household responsibilities for 160 million more hours than the boys (UNICEF, 2016). Starting at age five, these girls are retrieving water and firewood, caring for other siblings or family members, and cooking for their families. As the young girls grow older, their responsibilities become more time consuming, resulting in increased drop-out rates. (UNICEF, 2016)

Medical barrier

Health hazards can include poor infrastructures without running water or functional toilets. A considerable portion of the literature surrounding the poor infrastructure of schools focus on how water, sanitation, and hygiene (WASH) can be a large factor in girls' attendance and their ability to retain information. For starters, girls in the developing world do not receive substantial education regarding the changes in their bodies after puberty, which affects their ability to accommodate to their menstrual cycles. Attendance rates may be impacted because schools that lack private, functional toilets do not have a space for girls during their menstruation period to tend to their specific needs. (Camryn Lonchar, 2022).

In some rural areas of Vietnam, there are still issues of ethnic women engage in marriage and childbearing underage, where their psychological, sexual, and physical states are not fully developed, thus resulting in: preterm, intrauterine growth restriction, malnutrient, weak physical condition, ... Currently, the medical teams are trying to reduce the rate of child mortality, especially

at the mountainous, remote areas. It seems like the reason behind this unequal development and access to medical facilities is because of transportation difficulties, thus home birth is their only choice, and most of the time the process is unassisted by any other medical staff. This unassisted birth results in many miscarriages. Moreover, quality of medical staff such as specialized staff in obstetrics, pediatrics, and anesthesiology or quality of medical facilities such as equipments and technologies in rural areas are lacking, thus it's hard for medical facilities on rural area to fully carry out a safe labour and birth process. However, within the ethnic group, there are multiple "côđõ", or the village's midwives that help with the labour process, thus reduce the parental and child mortality. Yet there are little attentions and policies to support these midwife groups. The national medial standard survey shows that in 2021, up to 80% of the total household are in economic disadvantages, and most women do not have the access to family planning. The accessibility and provision of medical support also faces many obstacles as people see it as unnecessary (suckhoedoisong.vn, 2022).

Psychological barrier

Sexuality is a complex matters that perplexed many adults. There's no specific information or methods on hoto approach children about sexuality. Thus, for some parents it is more comfortable for them to ignore the topic to lie to their children, and it's a common approach for parents when they're hesitant. Since the past, Vietnamese people have been heavily influenced by the Eastern mindset, thus the topic of sex education are always avoided in the family, Parents are scared that the mention of sex education further arouse the children's curiosity, so the content is often left outside of the family's discussion. So this family believe take up to 58.3% of the influence on sex education for adolescens (Le Dang, 2018).

With the developing society, many families are now more comfortable to talk about sexualality topics with their children. On the other side, most parents are still shy about this topic, and they're not comfortable to talk about the topic, some even ignores the topic when the children ask about "adult stuff" (Dantri.com.vn, 2021). Part of the reason is the lack of interest, but mostly it's caused by a psychological barrier or the lack of knowledge and skills on how to approach this topic. Many parents admit that it's hard for them to talk about the topi with their children about sexual and gender changes; many scares that teaching the topic to their children are considered as "grist to the mill" (dangcongsan.vn, 2023).

Moreover, another barrier to consider is the indigenous women's acknowledgement about pregnancies, family planning, and their health in general. The notion of natural childbirth and neutrality of the child causes parents to be incautious about the importance of prenatal checkup (suckhoedoisong.vn, 2022).

Due to the lack of female representation in schools and ongoing discrimination, girls attending school in developing countries are more likely to be exposed to school-related gender-based violence (SRGBV) by a figure at school. SRGBV is considered UNESCO as physical, psychological, or sexual abuse that occurs in schools, on the way to school, or on school grounds at any time that is a result of gender stereotypes. (UNESCO, 2020)

3. RESEARCH METHODOLOGY

The research team use two methods including desk research to do literature review on barriers to accessing sex education for girls with the flowering barriers: (i) Barrier Of Family/Social Prejudices; (ii) Barrier of Limited Policies On Sex education; (iii) Economic Barrier; (iv) Medical Barrier; (v) Psychological Barrier, through academic database systems including: the Research gate, Scien Direct, IEE Explore, Scopus, Emerald, Insight, Taylor & Francis Online; In addition, there is a Google Scholar search engine and information pages about girls, sex education on Hmong girls in Simacai district, Lao Cai. We use the information we gatherers to conduct a sociological survey (collecting questionnaires with 2 subjects) which are Hmong girls from 6-18 years old and adults representing family/school/social groups working and living in Simacai, Lao Cai, Vietnam. The data will be synthesized and analyzed using Excel software.

Using desk research, the research team reviewed documents on children, girls, barriers, education, sex education, and the importance of sex education. At the same time, an overview of research on barriers to accessing sex education for girls. The research team developed a survey form to conduct the survey in Simacai district and surveyed 2 groups of subjects to have a multi-dimensional view on sex education and barriers to sex education for the whole group of children, girls, and adults.

The survey is answered by the subjects through hard copies and the data is entered into a Google Form. We pretest the survey on 18 Hmong girls and 5 adults in Simacai district and we make changes on our survey based on the feedback of the testers so we could finalize the survey distributing to the two experimental groups as planned. After collecting the hard copy questionnaires, the team filled in the questionnaire into Google Form into two copies, one for young Hmong girls (<https://docs.google.com/forms/d/e/1FAIpQLSdhu0p7LC6IB4aHzNuPTxOITvnCLO3bbCLYvI1tzFWA36a-g/viewform>) and the other form for adults representing school/family/society (<https://docs.google.com/forms/d/e/1FAIpQLSeK6u2LdmfZpSBJWmpnyEP6IgrSRGh1XTQQuDwigKRtz1mfNQ/viewform>). The total respondents for young girls are 278, and the adults are 51. Then the data is synthesized, then analyzed to demonstrate the problem the research team wants to focus on.

The content of the survey is designed corrodng to a 5-likert scale, in which:

1. Strongly uninterested
2. Uninterested
3. Neutral
4. Interested
5. Strongly interested

The research team collects survey data and calculates the average value of them. Then, based on our evaluation of the different levels of perception of the respondents, the research team calculated:

Interval value = (Maximum - Minimum) / n = (5-1)/5 = 0.8

The average distance between each interval is calculated within the range of:

- 1.00-1.80. strongly uninterested
- 1.81-2.60. Uninterested
- 2.61-3.40. Neutral
- 3.41-4.20. Interested
- 4.21-5.00. strongly interested

4. Survey result on young Hmong Girls in Samacai district, Lao Cai province, Vietnam on the topic of barriers accessing sex education

The total sample for the survey is 278 girls, and the age of the participants ranges from 11-14 years old, and all of the participants are Hmong ethnic living in Simacai district, Lao Cai province.

General information on sex education is recorded in Table 1.

Table 1. Level of interest and support on sex education among girls in Simacai, Lao Cai

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Are you interested in Sex education?	240	86.3%	38	13.7%
Do you get informed about sex education?	218	78.4%	60	21.6%
In your family, do your parents talk to you about sex education?	181	65.1%	97	34.9%
Do you receive support or training from Social Organizations?	131	47.1%	147	52.9%%
Do you think sex education is necessary for young girls?	220	79.1%	58	20.9%

Source: Survey Result

According to the survey result, the majority of the participants show an interest in sex education, with 240 participants said yes (86.3%). Most of them, 218 people (78.4%), also got informed about sex education and 181 people (65.1%) said their parents had discussed sex education for them. 79.1% of the participants said that sexual education is necessary (220 people). But the number of people who do not find sex education necessary is still high with 58 people (20.9%), and only 131 people (47.1%) said they had support from social organizations to exchange knowledge about sex education, while more than half of 52.9% (147 people) did not receive the same accessibility.

The survey shows that all 278 participants are Middle Scholars. Among them, 179 people think that sex education is currently integrated into the learning content, and 233 people think that the time spending on teaching sex education is enough to change the awareness of girls, but there are still 33 people think that it's not enough. 179 people answered that current learning conditions support students to learn more about sex education, but 87 students still think that current learning

conditions do not support students enough. Most people, 173 people, think that sex education should be organized into separate classes, only 93 people think it is not necessary.

The research team looked specifically at each type of barrier accessing sex education, including: 1. Barrier Of Family/Social Prejudices; 2. Barrier of Limited Policies On Sex education; 3. Economic Barrier; 4. Medical Barrier; 5. Psychological Barrier. The survey results are shown in Table 2.

Table 2: Barrier of Family/Social Projudices

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Do you feel that families will invest more money for boys' education than girls?	135	48.6%	143	51.4%
Do girls got advised to get marries early?	68	24.5%	210	75.5%
Have you ever been bullied at school because you are a girl?	103	37.1%	175	62.9%
Do you think that women have an important role (being respected, having the right to make decisions, having an influence) in family and society?	185	66.5%	93	33.5%
Does your family believe that sex education is a sensitive topic and it should not be discussed?	126	45.3%	152	54.7%

Source: Survey Result

With the question “Do you feel that families will invest more money for boys’ education than girls?” “ The number of people answering no was 143 people (51.4%), but the number of people answering yes was still high at 135 people (48.6%). Regarding whether girls are advised to get married early, only 68 (24.5%) answered yes, while 210 answered no (75.5%), showing that advising girls to get married early is a popular belief anymore. On the topic of gender-based violence at school, 103 participants answered yes (37.1%), while 175 (62.9%) said no. 185 people (66.5%) answered that women have an important role (respected, have decision-making power, have a voice) in family and society, while 93 people (33.5%) answered no. 152 people (54.7%) do not think that gender topics are sensitive topics and should be discussed to young people, but there are still 126 people, accounting for 45.3%, who think that gender topics are sensitive and children shouldn’t discuss it.

Table 3. Barrier of limited policies on sex education

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Do you and your family receive policies propagation from local government about sex education?	173	62.2%	105	37.8%

Does the local government support households with knowledge on sex education through training sessions?	156	56.1%	122	43.9%
Does the local government provide medical support and necessities for your family?	180	64.7%	98	35.3%

Source: Survey Result

105 people (37.8%) answered that they did not receive support or propagation from the local government, while 173 people (62.2%) said they did. 156 people (56.1%) answered that the local government equips everyone with knowledge about sex education through training sessions, while 122 people (43.9%) answered no. 180 people (64.7%) answered that the local government provides medical support and supplies for families, while 98 people (35.3%) answered that they do not. Thus, this shows that the rate of sex education accessibilities on both policies and training is very limited, so there needs to be higher measures for girls to have knowledge on policies supporting and protecting sex education.

Table 4. Economic barrier

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Does your family have the thought of letting you drop out of school to help with family chores/business?	106	38.1%	172	61.9%
Do you want to quit school to participate in work to financially support your family?	82	29.5%	196	70.5%
Does your family having difficulty paying for reproductive health care?	127	45.7%	151	54.3%

Source: Survey Result

172 participants (69.1%) responded that their families don't support the idea of children skipping school to financially support their families, while 106 people (38.1%) said their families believe that idea. Out of the total consus, 29.5% wants to skip school to support the family's economic status, and the other 70.5% don't. Particularly, 127 people (45.7%) noted financial difficulties in their families' ability to cover healthcare and reproductive expenses, while 151 people (54.3%) responded that they did not. This data shows that many rural ethnic families are still facing economic instabilities and still need local government support to improve economic conditions to improve the access to reproductive healthcare, showing the needs to be attentive on the economic and social development policies in Simacai, Lao Cai, and more broadly, among mountainous ethnic communities in Vietnam.

Table 6. Medical Barrier

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Do you receive enough necessities (menstrual pads, toilet paper, clean water ...) to support your menstruation and daily hygiene?	145	52.2%	133	47.8%
Have you ever witnessed a home birth?	114	41%	164	59%
Do you receive support from local health stations?	188	67.6%	90	32.4%
Are you provided with medicine from the medical station?	198	71.2%	80	28.8%

Source: Survey Result

With the question “Do you receive enough necessities (menstrual pads, toilet paper, clean water ...) to support your menstruation and daily hygiene?” 133 people (47.8%) answered no, the other 145 people (52.2%) answered yes. 164 people (59%) have not witness home birth, but 114 people (41%) have witnessed it. 188 people (67.6%) answered that they received support from local health stations, 90 people (32.4%) answered that they did not. On the question of medical support/medicines from nearby medical station, 198 people (71.2%) answered that they did received medicines from them, while 80 people (28.8%) did not.

Table 7. Psychological barrier

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Do you hesitant to share your desires/ changes with your family/teachers, friends... or not?	152	54.7%	126	45.3%
Do you feel embarrassed when information about sex is being taught?	131	47.1%	147	52.9%
Have you ever felt like you were inferior to the boys at school?	111	39.9%	167	60.1%

Source: Survey Result

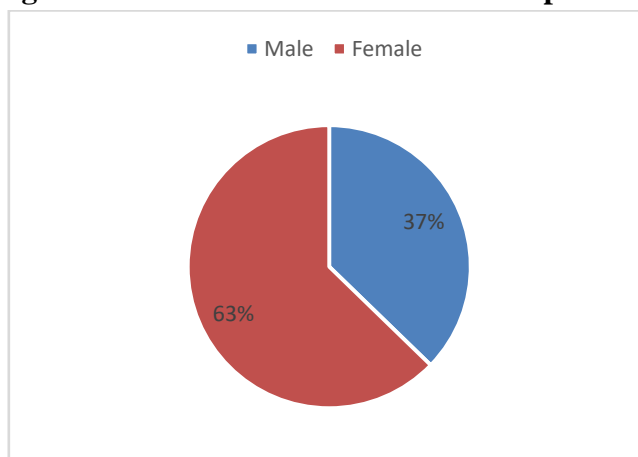
In response to the question “Do you hesitant to share your desires/ changes with your family/teachers, friends... or not?” 152 individuals (54.7%) answered that they do feel hesitant, while 126 (45.3%) said they do not. Therefore, it is necessary to design a more welcoming and open-minded sex education program, and implementing measure to help young girls overcome these barriers and feel more comfortable with the changes they’re going through by feeling secured and understood from the adults. 131 people (47.1%) responded that they feel hesitant/uncomfortable/ashamed when receiving/learning about sex education, while 147 people (52.9%) answered that they do not. Regarding the inferiority feelings of girls at school compared to boys, 11 people (39.9%) responded affirmatively, while 167 people (60.1%) said no, indicating an

improvement in gender equality, and the feeling of hesitant among girls reduced to those who are attending school.

5.2. Survey result on the topic of barriers accessing sex education of young Hmong Girls in Simacai, Laocai, Vietnam from the perspective of adults representing family, schools, and society

The total consensus is 51 people, in which 19 respondents are male (37%) and 32 respondent are female (63%)

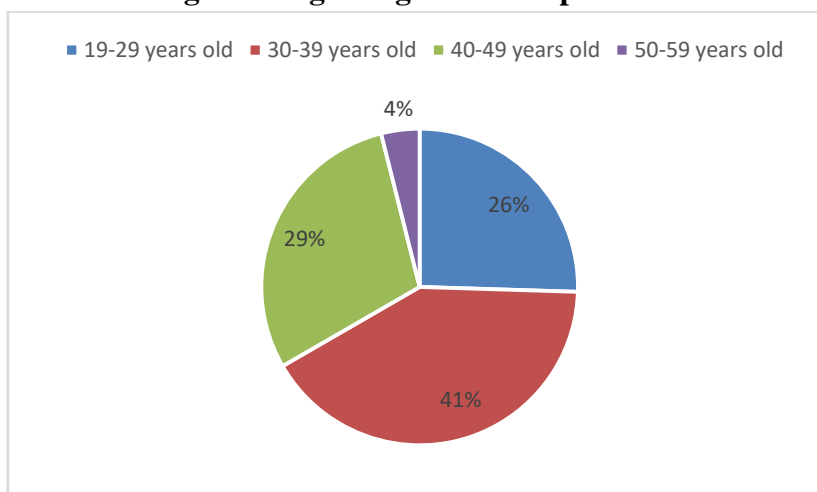
Figure 1. Genders distribution of the respondents



Source: Survey Result

The age of respondents ranges from 19-59 years old, with 13 people are from the age range of 19-29 years old (25%), 21 people (41%) are around 30-39, 15 people (29%) are from the age range of 40-49, and 2 people from the age range of 50-59 years old (4%).

Figure 2. Age range of the respondents



Source: Survey Result

For adult participations that are age 19 or older, 40 people (78%) were of the Hmong ethnic group, and 11 people (22%) were of other ethnicities. And most of the people participating in the survey

reside in Simacai district, Lao Cai (47 people - 92%), with only 2 people residing in Bac Ha district, 1 person in Bao Thang district and 1 person in Lao Cai city.

Table 8 display the survey result for general questions about sex education.

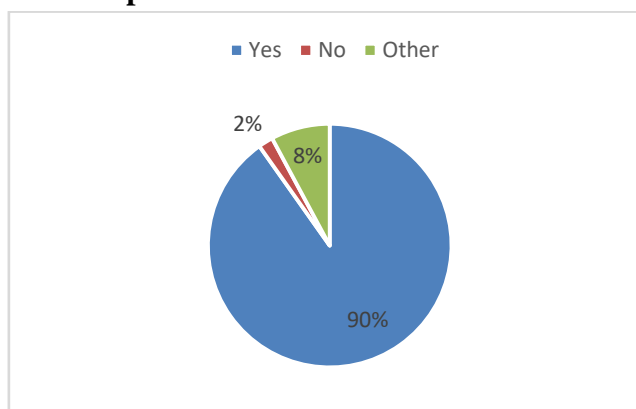
Table 8. Level of interest and support from family/school/society with sex education

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Are you interested in sex education?	47	92.2	4	7.8
Do you think sex education is necessary for young girls?	48	94.1	3	5.9
Do you support the dissemination of sex education to young people?	38	74.5	13	25.5

Source: Survey Result

According to the survey results from 51 participants regarding the level of interest and support, the majority of the people showed interest in sex education. Specifically, 47 people (92.2%) shows a positive interest in sexual education, and 38 people support the provision of sex education to young girls (74.5%). However, there are still 13 people (25.5%) doesn't support sex education, indicating that the oppositions to implementing sex education program is still relatively high.

Figure 3. The prevalence of sex education for Hmong girls



Source: Survey Result

When the respondents are asked about the prevalence of the sexual knowledges for young girls, 46 respondents (90%) think that it's very prevalence and sidespread, only 5 people think it's not or choosing other options.

With the question: *How do you perceive the current sex educational program for young Hmong girls?* The answer is shown in Figure 9, using conversion previously stated, the research team have calculated the average scores of the question to 3.529412 (in the range of "interest" on the likert scale, implying that the respondents are interest on the sex education program for young girls)

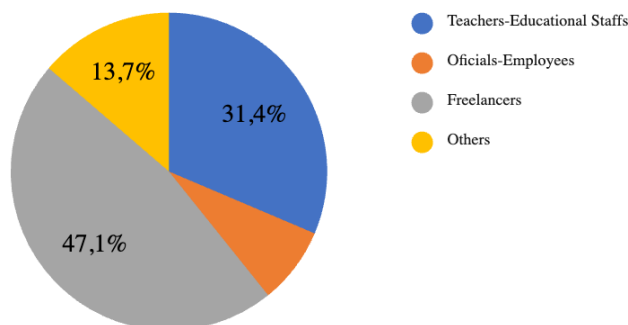
Table 9. Interest scale on sex educational program for young Hmong girls

	Respondents	Likert Scale
Vey Interested	7	5
Interested	15	4
Neutral	27	3
Uninterested	2	2
Very Uninterested	0	1
Average		3.529412

Source: Survey Result

Respondents' occupations ranges from educational staff with the total of 16 individuals (31%), officials and employees accounting for 8% (4 people), and freelancers comprising with 24 people (47%), and other jobs not listed include 7 individuals (14%)

Figure 4. Respondents' Profession



Source: Survey Result

In the 16 respondents who are teachers/educational staff, 3 of them work in kindergarten, 1 in elementary school, and 12 works in middle schools. With these 16 respondents, all believe that sex education is integrated within the school program; however, only 6 of them think that the amount of time spend on sex education is enough for teenagers to understand the changes and the complexity they're going through, the other 10 don't think so. All 16 respondents answered that the facilities' quality is up to standard to support them with their curiosity about sexual education. 12 respondents think that sex education should be a separate program; only 4 people think it's not necessary.

The research team examine specific barriers to accessing sex education, including: 1. Barrier Of Family/Social Prejudices; 2. Barrier of Limited Policies On Sex education; 3. Economic Barrier; 4. Medical Barrier; 5. Psychological Barrier. The survey's result shows that:

Table 10. Barrier of Family/Social Prejudices

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Do you think that families invest more for boys' education than girls'?	21	41.2	30	58.8
Do girls get recommended to marry early?	9	17.6	42	82.4
Have you ever experienced/witnessed violence against girls?	22	43.1	29	56.9
Do you think that women have an important role (being respected, having the right to make decisions, having an influence) in family and society?	33	64.7	18	35.3
Do you believe that sex education is a sensitive topic and it should not be discussed?	12	23.5	39	76.5

Source: Survey Result

In response to the question “Do you think that families invest more for boys' education than girls'?” 30 individuals (58.8%) answered no, while 21 individuals (41.2%) answered yes. Regarding advising girls to marry early, only 9 individuals (17.6%) responded affirmatively, while 42 individuals (82.4%) answered no, indicating that advising young girls to marry early is no longer common. When asked if they had experienced or witnessed violence against girls, 22 individuals (43.1%) responded yes, while 29 individuals (56.9%) responded no. 33 individuals (64.7%) believe that women play an important role (being respected, having decision-making power, having a voice) in families and society, while 18 individuals (35.3%) disagreed. Additionally, 39 individuals (76.5%) do not believe that topics related to gender are sensitive and should not be discussed with young people, but 12 individuals (23.5%) still consider gender-related topics as sensitive and not suitable for discussion among young people.

Table 11. Barrier of Limited Policies On Sex education

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Do you receive policies propagation from local government about sex education?	24	47.1	27	52.9
Does the local government support households (especially young girls) with knowledge on	36	70.6	15	29.4

sex education through training sessions?				
Does the local medical station support young girls with healthcare support and hygienically necessities?	30	58.8	21	41.2

Source: Survey Result

27 individuals (52.9%) responded that they did not receive support or promotion of sex education policy initiatives, while only 24 individuals (47.1%) answered yes. Regarding local government efforts, 36 individuals (70.6%) stated that their local authorities provided sex education knowledge through training sessions for everyone, especially young people, while 15 individuals (29.4%) answered no. Furthermore, 30 individuals (58.8%) stated that their local government provided healthcare support and essential supplies to young people (especially girls), while 21 individuals (41.2%) answered no.

Table 12. Economic Barrier

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Do you think that children should be financially involve and support the family?	24	47.1	27	52.9
Have you witness children dropping school to participate in economic support for their families?	32	62.7	19	37.3
Do you think that household (especially those with young children) face difficulties in paying for reproductive healthcare?	33	64.7	18	35.3

Source: Survey Result

27 individuals (52.9%) responded that they do not believe young people should engage in financial support for their families, while 24 individuals (47.1%) answered yes. 32 individuals (62.7%) have observed many young people skipping school to participate in economic support for their families, while 19 individuals (37.3%) have not noticed this. 33 individuals (64.7%) have observed that households (especially those with young children) face difficulties in paying for reproductive healthcare, while only 18 individuals (35.3%) answered no.

Table 13. Medical Barrier

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Do young girls in your area receive adequate supplies (sanitary pads, toilet paper, clean water, etc.) to support menstruation and daily hygiene?	25	49	26	51

Have you witnessed underaged childbirth at home?	13	25.5	38	74.5
Do young girls in your area receive support from local medical stations?	34	66.7	17	33.3
Do young girls in your area receive medicine from medical stations?	34	66.7	17	33.3

Source: Survey Result

With the question “Do young girls in your area receive adequate supplies (sanitary pads, toilet paper, clean water, etc.) to support menstruation and daily hygiene?” 26 individuals (51%) answered no, while 25 individuals (49%) answered yes. 38 individuals (74.5%) have not witnessed childbirth at home among young people, but 13 individuals (25.5%) have. 34 individuals (66.7%) responded that young girls in their area receive support from local medical stations, while 17 individuals (33.3%) answered no. Additionally, 34 individuals (66.7%) responded that young girls in their area receive medicine from medical stations, while 17 individuals (33.3%) answered no.

Table 14. Psychological Barrier

	Yes		No	
	People	Proportion (%)	People	Proportion (%)
Do you think that young girls feel hesitant/ uncomfortable/ ashamed when receiving/learning information about sex education?	27	52.9	24	47.1
Do you think that girls often feel more insecure than boys?	23	45.1	28	54.9

Source: Survey Result

27 individuals (52.9%) responded that young girls feel hesitant/ uncomfortable/ ashamed when receiving/learning information about sex education, while 24 individuals (47.1%) answered no. Regarding the perception that girls often feel more insecure than boys, 23 individuals (45.1%) responded yes, while 28 individuals (54.9%) answered no.

6. Discussions aimed at improving the accessibility of sex education for young girls

6.1. In terms of families

Discussing and educating children will affect their understanding in relationships with the opposite gender. The method of confiding with children is the most positive approach in gender and sex education for them. Confiding with children helps family members understand and empathize with each other easier. And through this method, children can understand the complexity of menstrual changes they’re going through and understand their own personal confidential desire.

It is true that in many families, parents try to avoid discussing issues related to gender education and sex education with their children for as long as possible because they're afraid that their children will know too these knowledge too early. They wait for their children to ask them before considering whether it is necessary to talk to them. They always instill in their children the awareness of not getting involved in adult issues. So when will children be considered as grownups by their parents? This question is rarely thought about by parents. Therefore, many children are neglected in understanding sex education. Therefore, to overcome the barriers of sex education with children in general and Hmong ethnic children in Simacai, Lao Cai in particular, it is very necessary for the understanding of parents, sharing with children to understand them better.

Sex education in the family must be deeply integrated into the family's activities. First of all, parents must set a bright example of love and marriage, not allowing irresponsibility between partners in the family. Love and marital obligations are moral values; parents' love is an indispensable condition for the development of children.

Parents educating children on gender issues must be very practical, seriously explaining to children what they need to know. Fathers usually confide in their sons and mothers confide in their daughters, reminding them to maintain hygiene for health. Especially for daughters and at the age of puberty, mothers need to communicate with their daughters more, explaining to them what the opposite gender is, the limits of friendship, menstruation phenomena, the best age for the first pregnancy, signs of pregnancy so that children can avoid bad things that may happen in life.

Exchanging knowledge about gender and sex with children is very important. Therefore, parents should not neglect their children. Education should also be tailored to the age and specific circumstances, choosing different levels of exchange appropriate for children.

6.2. In terms of schools and social organizations

It is necessary to have sex education and sexuality education programs for children according to their age groups. The lack of training programs will results in parents feeling loss when discussing this area with their children. Because the education journey for children needs corporations from all side, thus no sides should be irresponsible on the child's education, especially on sex education where they will learn about how to protect themselves.

It is essential to integrate content on population education, reproductive health, sexual health, gender, gender equality, and sexuality into the new general education curriculum and textbooks. Diverse forms of education such as lectures, adolescent health clubs, counseling sessions, etc., should be encouraged. Students should be encouraged to contribute their opinions on the content, programs, educational activities, and other related materials regarding population education, reproductive health, etc.

Schools and organizations should organize discussions and forums with parents of students and the community on population education, reproductive health, sexual health, gender, gender equality, and sexuality within the school.

To improve the quality and effectiveness of sex education in families, organizations and institutions need policies and methods to enhance communication and specialized education in local areas; strengthen integration between media and counseling services, health examinations during campaigns; focus on expanding the target audience to include parents, grandparents, etc., to educate and encourage children to participate in counseling and regular health care.

Schools need to have regular and periodic training plans for teachers participating in sex education at secondary schools every school year and during summer breaks to supplement new knowledge and methods when participating in sex education at school.

Participation in educating students involves not only teachers but also many educational forces inside and outside the school. Educational forces within the school including: the Trade Union, the Ho Chi Minh Communist Youth Union, the Ho Chi Minh Young Pioneer Organization, etc. Educational forces outside the school include families, local authorities, police, Women's Union, healthcare, Patriotic Front, Red Cross, etc., mobilizing the combined strength of all forces in the work of sex education for children.

REFERENCES

- Betts, J. R., (1995). *Does school quality matter? Evidence from the National Longitudinal Survey of Youth*. Review of Economics and Statistics, 77, pp. 231–50.
- Bui Hien, Nguyen Van Giao, Nguyen Huu Quynh, Vu Van Tao (2001). *Educational dictionary*. Bach Khoa Publishing House, Hanoi, 105.
- Camryn Lonchar (2022). *Barriers to Girls' Education in the Developing World*. The College of Arts and Sciences Ohio University
- dangcongsan.vn (2023). *Overcoming the "gap" of sex education*. <https://dangcongsan.vn/giao-duc/khac-phuc-lo-hong-giao-duc-gioi-tinh-632680.html>
- Dantri.com.vn. (2021, June 15). *Don't be afraid that Sex Education will Encourage children to "eat the forbidden fruit" Dan Tri E - Newspaper*.<https://dantri.com.vn/giao-duc/dung-so-giao-duc-gioi-tinh-se-khuyen-khich-tre-an-trai-cam-20210615063231619.htm>
- Gertler, P. and P. Glewwe (1992). *The willingness to pay for education for daughters in contrast to sons: Evidence from rural Peru*. The World Bank Economic Review, 6, pp. 171–88.
- Girls Not Brides. (2021). *Girls not brides Impact Report 2020*.https://www.girlsnotbrides.org/documents/1504/Girls_Not_Brides_Impact_Report_2020.pdf
- Glewwe, P., (1996). *The relevance of standard estimates of rates of return to schooling for education policy: A critical assessment*. Journal of Development Economics, 51, pp. 267–90.
- Global Education Monitoring Report Team, UNESCO, & Constanza, G. (2020). *School-related gender-based violence (SRGBV): a human rights violation and a threat to inclusive and equitable quality education for all*. Unesdoc.unesco.org.<https://unesdoc.unesco.org/ark:/48223/pf0000374509>

- Goodkind, D., (1994). *Sex preference for children in Vietnam*. Paper presented at the Paper presented at the UNFPA symposium on Issues Related to Sex Preferences for Children in the Rapidly Changing Demographic Dynamics in Asia, Seoul, South Korea
- Haughton, J. and D. Haughton (1994). *Measuring son preference in Vietnam: methodology and evidence*. Paper presented at the Northeast Universities Development Conference. Economic Growth Center, Yale University
- Huong, N. T., Hoa, N. T. H., & Anh, N. T. Q. (2021). *Reproductive Health Education for Vietnamese High School Students in the Current Context*. American Journal of Educational Research, 9(3), 97-105.
- Hill, M. A. and E. King (1991). *Women's education in the third world: An overview*. In: *Women's Education in Developing Countries*. M. (eds Hill A. and King E.) World Bank, Washington.
- Institute of Linguistics(2008). *Vietnamese Dictionary*. Hong Duc Publishing House
truyenhinhsimacai.vn. An overview of Simacai district.<https://truyenhinhsimacai.vn/about/Tong-quan-ve-huyen-Si-Ma-Cai.html>
- ischool.vn (2022). *What is sex education? How to educate children about sex according to each age*. <https://ischool.vn/giao-duc-gioi-tinh-la-gi/>
- Le Dang (2018). *Barriers to sex education for adolescents*.<https://giaoducthoidai.vn/rao-can-trong-giao-duc-gioi-tinh-cho-tre-vi-thanh-nien-post326969.html>
- Liu, A. (2004). *Flying ducks? girls' schooling in rural Vietnam: A revisit*. Asian Economic Journal .https://crawford.anu.edu.au/pdf/staff/amy_liu/LiuA_04.pdf
- Lori Beth (2017). *6 Barriers to Sex Education Every Parent Needs to Know*.<https://drloribethbisbey.com/6-barriers-sex-education-every-parent-needs-know/>
- Lonchar, Camryn (2022). *Barriers to girls' education in the developing world*. [Tetd.ohiolink.edu/apexprod/rws_etd/send_file/send?accession=ouashonors1650462652784817&disposition=inline](https://ohiolink.edu/apexprod/rws_etd/send_file/send?accession=ouashonors1650462652784817&disposition=inline).
- merriam-webster (2016). *Girls spend 160 million more hours than boys doing household chores everyday*.<https://www.merriam-webster.com/dictionary/culture>
- Ministry of Education and Training (2016). *Guidance document ""Gender integration and general education textbook program"". Hanoi*.
- Nguyen Trung Hai (2022). *Barriers to accessing education for girls in Hoa Binh province*. Grassroots level project at the University of Labor and Social Affairs
- Peter Scales and Douglas Kirby (1983). *Perceived Barriers to Sex education: A Survey of Professionals*. The Journal of Sex Research. Vol. 19, No. 4 (Nov., 1983), pp. 309-326 (18 pages)
- Phuong Thao (2023). *Promoting gender equality for women and children in Si Ma Cai highland commune, Lao Cai*.<https://suckhoedoisong.vn/thuc-day-binh-dang-gioi-cho-phu-nu-va-tre-em-o-xa-vung-cao-si-ma-cai-lao-cai-169231117113646726.htm>
- Quoc hoi (2016). *The law on children*. 102/2016/QH13, ngày 5/4/2016, <https://thuvienphapluat.vn/van-ban/Giao-duc/Luat-tre-em-2016-303313.aspx>

- Quoc hoi (2006). *The law on gender equality*. 73/2006/QH 11, ngày 29/6/2006. <https://thuvienphapluat.vn/van-ban/Quyen-dan-su/Luat-Binh-dang-gioi-2006-73-2006-QH11-15866.aspx>
- Quoc hoi (2019). *The law on education*. 43/2019/QH14, ngày 14/6/2019. <https://thuvienphapluat.vn/van-ban/Giao-duc/Luat-giao-duc-2019-367665.aspx>
- Sperling, G. B., Winthrop, R., & Kwauk, C. (2016). *What works in girls' education: Evidence for the world's Best Investment*. Brookings Institution Press.
- suckhoedoisong.vn (2022). *Barriers to health care for women and children in ethnic minority areas*. <https://suckhoedoisong.vn/nhung-rao-can-trong-cham-soc-suc-khoe-phu-nu-va-tre-em-vung-dan-toc-thieu-so-169221128214845351.htm>
- Ultr.edu.vn (2022). *Barriers to sex education in schools and families*. <https://ultv.edu.vn/nhung-rao-can-cua-giao-duc-gioi-tinh-trong-truong-hoc-va-gia-dinh-d7424.html>
- UNESCO (2020). *School-related gender-based violence (SRGBV) – A human rights violation and a threat to inclusive and equitable quality education for all*. <https://unesdoc.unesco.org/ark:/48223/pf0000374509>
- UNESCO (2015). *Comprehensive sexuality education: a global review, 2015*. Unesdoc Digital Library. <https://unesdoc.unesco.org/ark:/48223/pf0000235707.locale=en>
- UNESCO, U. N. E., Scientific and Cultural Organization (2018). *International technical guidance on sexuality education: An evidence-informed approach (2nd ed.)*. UNESCO.
- UNESCO, UNFPA, UNICEF, UN Women, WHO (2021). *The journey towards comprehensive sexuality education*. UNESCO. https://cdn.who.int/media/docs/default-source/hrp/379607.pdf?sfvrsn=5b6761dc_7&download=true
- United Nations (1990). *International Convention on the Rights of the Child*. <https://thuvienphapluat.vn/van-ban/Linh-vuc-khac/Cong-uoc-cua-Lien-hop-quoc-ve-quyen-tre-em-233659.aspx>
- UNFPA (2021). *Learn. protect. respect. empower.* - UNFPA ASIAPACIFIC. United Nations Population Fund. https://asiapacific.unfpa.org/sites/default/files/pub-pdf/cse_summary_review.pdf
- UNICEF. (2016). *Girls spend 160 million more hours than boys doing household chores everyday*. <https://www.unicef.org/press-releases/girls-spend-160-million-more-hours-boys-doing-household-chores-everyday>
- Vander Berg (2008). *Poverty and Education*. 978-92-803-1322-2, UNESCO IIEP [3178], International Academy of Education [108]