“Does my child touch herself at school?”
“What do I do when my child uses bad language?”

When parents ask questions like these, especially about their children’s sexual behavior and language, they often turn to the preschool teacher or caregiver as a resource. Teachers may feel uncomfortable about how to respond. They are at a loss to provide answers that are developmentally appropriate as well as honest and well-informed. In addition, teachers may wonder how to deal with issues concerning gender anatomy—physical differences between boys and girls—that arise in the classroom.

According to a growing field of research, a young child’s questions and concerns about the body, as
well as body exploration, are not only common, but necessary for the child’s development and progress toward emotional well-being and adjustment. This article may provide useful information to teachers and parents alike when deciding how to address children’s natural curiosities about their own bodies and those of others.

**The role of the teacher**

The job of the teacher or caregiver is to help preschoolers develop a clear, healthy sex identity. You do this by using correct words when talking about body parts and answering their questions. You also help children become aware of the differences and similarities between girls and boys in social interactions that occur naturally in the classroom.

However, it is not the teacher’s job to teach sex education in preschool or to inform children of sexual matters that go against the beliefs and values of the child’s family. These issues sometimes generate strong feelings among parents—and teachers. When dealing with these sensitive issues, we must be aware of parents’ concerns and values.

---

**Normal childhood sexual development**

Children learn about their bodies and their environment starting from their first days of life through direct touching and skin contact from others. Babies who lack sufficient skin-to-skin caressing early in life fail to develop a sense of well-being in later life. Children who experience tender stroking and gentleness often will be better able as adults to experience closeness, warmth, and trust with another person.

Sexual awareness begins with the earliest contact with our own bodies as well as the bodies of our parents and other people. It has been said that our need to be touched, caressed, and cuddled is as basic as our need for food.

During the first two years of life, children learn through their senses: touching, tasting, seeing, smelling, and hearing. During the first months of life, babies discover their hands, mouth, feet, and eventually their private areas.
Working with parents

In working with parents, we are encouraged to include them when providing new and maybe controversial or sensitive information to their children. Talk with parents beforehand about your ideas on sensitive issues. This dialogue is vital to a sound working relationship between home and school. This relationship thrives when we acknowledge and respect the background, culture, and values of every child, parent, and teacher involved in our school or center.

Parents and teachers don’t always have to agree, but it is essential that they set common goals and keep the discussion open. By inviting parents to approach a sensitive subject, teachers show much respect and commitment to providing the best environment possible for the child. Any decisions or solutions need to be agreeable to both parent and teacher.

Keeping communication open is the key to a great parent-teacher relationship. It is easy to talk to parents when you have much in common and agree on everything. It is much more difficult to keep an open mind and heart when you disagree.

Anatomically correct terms

Children around 3 years of age begin to notice whether they are a girl or a boy—and to comment on differences. For example, Johnny might say, “Look, I have a wee-wee (penis) and you don’t!” Or Susie might say, “I don’t have one of those (penis).” It is possible that preschool or child care may be the first opportunity that some boys and girls have to observe physical gender differences.

The natural curiosity of 3-year-olds creates an environment in which they are constantly exploring, noticing, and trying to make sense of their world. It is only expected that they would begin remarking about the obvious differences they see in their peers.

What to do: Respond casually and briefly. “That’s right, you have a penis and she does not.” And you might add, “and she has a vagina.”

Much of what children learn about their sexual identity can occur in instances such as this one. Introducing sexual terminology is part of learning about real life. Learning the correct terms for body parts is crucial to the child’s well-being and social-emotional development.

Avoid remarks such as “We don’t talk like that at school” or “That’s nasty; we don’t talk about our bodies!” Children need a comfortable acceptance of their gender anatomy and a healthy sexual identity. We want them to understand that all parts of their bodies are OK.

Approach children’s observations and questions in a matter-of-fact manner, without laughter or embarrassment. That way, children will know that you are someone they can always use as a resource when they have questions about a sometimes taboo subject.

Children’s anatomy books

Some parents and teachers believe that providing picture books with anatomically correct pictures can...
harm a child’s sexual development and might create an unhealthy, heightened sense of curiosity. Adults may also be concerned that the pictures will cause young children to explore their bodies and those of others.

Experts tell us that children may be more curious at first. However, in the long run, this curiosity will not last. Children who interact in natural surroundings, such as going to the bathroom or looking at books with anatomically correct pictures, will be less curious over time and more comfortable with their own physical features.

**What to do:** Choose books carefully. The books *What Is a Girl? What Is a Boy?* and *Bodies* contain photographs of children’s bodies and use correct anatomical terms. Before placing them in the library center for the children to browse, let parents know the purpose of the books and your intent to use them. If you think that parents may have concerns or even oppose using the books, allow time to get their feedback. It is in the best interest of everyone to keep lines of communication open.

**Anatomically correct dolls**
The use of anatomically correct dolls in the preschool classroom is sometimes controversial among caregivers and parents. The purpose of using the dolls is to provide children with a clear, healthy idea of what it is like to be a boy or a girl.

**What to do:** Place the dolls in the dramatic play center along with other props such as a small plastic bathtub, washcloths, soap, bath toys, towels, and clothes for dressing. Allow children to use the dolls in play rather than as a lesson on gender anatomy. Allow the children to comment on likenesses and differences in the boy and girl dolls without shaming or reproaching. Treat any misuse of the dolls just as you would any other toy or learning material: “We play with this doll by washing gently over every body part.” If misuse continues, you might direct the child to another activity: “When you show that you can play with the doll gently, you can come back.”

The more casual and relaxed we are with the use of such materials, the more relaxed the children will become with their sexual identity and that of others. For places to find anatomically correct dolls, see the resources section at the end of this article.

**When children engage in sex play**
Children often talk about—and sometimes act out—what they have seen or heard. One teacher tells of a child who was taken to an R-rated movie and then came to school reenacting scenes from that movie. The child’s friends reported to the teacher that the girl was “getting sexy,” when in fact the child was replaying what she had seen.

Young children regularly try to make sense of their world by dramatizing what they see and experience. It is their attempt to figure out where these observations fit in their expanding idea of the world.

**What to do:** Exploratory or curious sexual play is most common among preschoolers who are the same age and familiar with one another. It is not child abuse when the two are equally matched in size, age, and ability.

If a child dramatizes or uses pretend play with another child that is sexual in nature and content, try not to overreact. Address the act as calmly as you would if they spilled paint. The child most certainly will not have the same feelings and thoughts about the act as an adult would have. Exploratory

---

Parents and teachers don’t always have to agree, but it is essential that they set common goals and keep the discussion open.
or curious play does not necessarily lead to preco-
cocious sexual behavior as the child gets older. It is
related to the child’s developmental stage. Curiosity
usually diminishes with age, especially when a
child’s questions have been answered openly and
honestly.

The teacher can address curi-
ous play by talking to the chil-
dren involved. If they have taken
off their clothes, make a mental
note to provide closer supervi-
sion. You might say in a matter-
of-fact tone: “We wear our clothes
at school” or “We take our clothes
off when we take a bath.”

Talk to parents about these
occurrences and let them know
how you handled the behaviors.
Tell them how much you value
their child’s emotional well-being and consider this
as much a part of your job as teaching other devel-
opmental skills. Also, provide information to par-
ents about how television shows and movies with
adult themes may lead to curious play.

Curious play becomes harmful when it happens
between children who are not the same age and the
older child is dominating or leading the younger
one. Or a child is the same age but not matched
physically, emotionally, or socially. Play is not typi-
cal if either child is unable to stop or get out of an
uncomfortable situation. These behaviors may need
additional adult intervention and discussion.

**When children use toilet language**

Between the third and fourth birthdays, children
may begin using toilet language or socially unac-
ceptable words. Often, children are imitating the
conversation or exclamations of older siblings or
adults.

Children seem to be all the more fascinated with
language related to the body and private parts when
special meanings are attached. Even words such as
“underwear” can evoke embarrassing squeals and
giggles from young children. For instance, in the
book *Froggy Gets Dressed*, one group of 4-year-olds
yelled with laughter—even after they heard the
story many times—every time the mama frog told
Froggy that he forgot his underwear.
What to do: Sometimes children use potty language to get a reaction from you or other children in the class, and from parents or siblings. Usually when tattling occurs right after the potty language, the act of tattling encourages the child to use inappropriate language again. The immediate attention provides instant gratification.

Try not to provide extra attention. To the tattler, say, “We don’t use those words in school.” To the child using the foul language, say, “Let’s think of some other words to describe what you feel” or “Let’s think of a word to use instead of that one.”

The regular use of foul language may be a cue for the teacher that the child needs more positive attention. Offer positive attention at times when the child chooses not to use foul language. For example: “Wow! Angie bumped your bike and you managed to stay on the track and keep riding!”

In some instances, the child may say that his dad or mom uses the word at home. Without discounting the parent, assure the child that school words are sometimes different than words we hear in movies, on TV, or even from our family members.

Self-exploration and masturbation
Self-exploring or self-pleasuring by young children is often the most difficult behavior for parents and teachers to understand. Even though studies have shown that this behavior is normal, societal norms seem to say just the opposite. Parents and teachers alike often find it difficult to address, let alone accept.

The most common times in which children engage in this behavior is nap time and quiet periods such as story time on the group-time rug. Children who have often used this action to soothe themselves find it hard to understand what all the fuss is about.

What to do: Remember that our goal is to build or maintain the child’s self-esteem and to send positive messages about the child’s own body. Remain cool, calm, and collected. You might turn the child to lie stomach down, and gently rub the child’s back. Or you might offer the child a comfort object such as a teddy bear, a pillow, or blanket. In most cases, this behavior will disappear without comment from you as the child learns other ways to relax and feel comforted.

Again, young children do not have the mental or cognitive abilities to know the same sense of sexual pleasure that is found in an adult relationship. This behavior is not a direct indication that the child will engage in premature sexual behavior or is being sexually abused.

It is challenging to address this behavior when the parents’ social customs and values are contrary to yours or to the principles of the anti-bias curriculum. The most appropriate responses will preserve children’s self-esteem, help them continue to feel good about themselves, and engage parents in an open dialogue based on real information.

Maintaining the health and well-being of every child in our care is important in dealing with explorations of their sexuality. Children so often act and do based upon what they have experienced and by their own natural curiosities about the world around them. We can help them to better understand their world by using common sense combined with sound practices based on early child development research.

Resources

Anatomically correct dolls
Constructive Playthings, 1-800-448-4115 or www.cptoy.com
Discount School Supply, 1-800-607-4410 or www.earlychildhood.com
Kaplan Inc., 1-800-334-2014 or www.kaplan.com

About the author
Karen Petty, Ph.D. is an assistant professor of family sciences at Texas Woman’s University in Denton, Texas.