

Training course in adolescent sexual and reproductive
health 2019

Comprehensive sexuality education provision

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Question 1:

What evidence could you use to convince decision makers that CSE does not harm children and adolescents?

Human beings are sexual beings, and CSE prepares young people with the knowledge and attitudes related to sexual and reproductive health and behavior that are vital for their well-being, and to lead a healthy and safe life. Not only is CSE not harmful but is critical for sustainable development. CSE allows children and adolescents to learn and understand the cognitive, emotional, physical and social aspects of sexuality, to grow into healthy young people who understand and can make informed decision about their relationships and sexuality, free from violence and health risks. CSE has multiple positive effects, including increasing knowledge and improving SRH outcomes, delaying sexual activity and minimizing sexual risk-taking behavior, promoting safe and gender equitable learning environments and improving education access and achievement. It is by not providing CSE, such as providing abstinence-only programming or by withholding scientifically accurate information, we can actually do harm to children and adolescents.

Question 2:

What in your opinion is one widely held misconception about CSE?

One of the most common misconceptions about CSE is rooted in adults' fear of adolescent sexuality. Many adults believe that by talking to children and adolescents about sex it will lead them to have sex early and that CSE provision can lead to early or risky sexual behavior. There is no evidence that proves this, but rather that CSE either has no impact or can lead to delayed initiation of sexual activity and more responsible behavior.

Question 3:

What are the eight underpinning concepts of the ITGSE? In your opinion, which one is the most important and why?

The eight underpinning concepts are: 1) Relationships 2) Values, Rights, Culture and Sexuality 3) Understanding gender 4) Violence and staying safe 5) Skills for Health and Well-being 6) The Human Body and Development 7) Sexuality and Sexual Behaviour 8) Sexual and Reproductive Health

All these key concepts are interlinked and complement each other for sexuality education to be as comprehensive as possible, but if I was to choose one it would be 7) Sexuality and Sexual Behaviour as I believe this is a critical component of sexuality education, and the most difficult and challenging topic for educators, who may feel uncomfortable and skip this. Some of the other topics such as understanding rights, gender and staying safe, body development might be covered in related areas are often also covered in other areas of work (gender equality, protection programmes, life skills etc) but the hardest concept to tackle is 7 – yet it is most critical for young people to understand that sexuality and sexual feelings are normal, that it's natural for us to enjoy our bodies and to explore our sexuality and that there are many different ways this can take shape, and to gain the knowledge and confidence to be able to make informed decisions about sexual behavior.

Question 4

The UNESCO publication identifies barriers to the implementation of CSE (pages 4-11). Of these barriers, identify three that are most relevant to your country and explain why.

I grew up and now live in Sweden, where CSE has been compulsory in schools since 1955. There is strong public understanding and support for CSE, and hardly any opposition. Yet there are still many operational constraints. Last year a study was conducted which showed shortcomings in the CSE implementation in Sweden:

- Teachers are not adequately prepared and supported. This is one of the main challenges in Sweden. Whilst CSE is compulsory, teacher training was not. Quality of teaching thus vary greatly, and many teachers felt they lack the capacity and support to teach these subjects, particularly when it values and norms around sexuality and sexual orientation. They also felt they lacked the capacity to teach students that have recently arrived to Sweden to deal with sensitive topics.
- Curricula and teaching resources omit key topics and do not meet young people's needs. In Sweden, only half the young people participate in the planning, implementation and evaluation of the CSE programmes. Involving young people in curriculum development is critical to ensure that the content is relevant and meets their needs, if young people are not adequately consulted it risks that we miss critical topics, such as sexual orientation and sexual harassment. The CSE curriculum is also lacking in terms of adequately addressing values and norms around LGBTIQ+.
- Planning and implementing comprehensive sexuality education programmes is complex. In many schools in Sweden, the CSE is taught piecemeal and infrequent, and often too late. Students have been requesting to have CSE taught in earlier grades.

Question 5

The UNESCO publication proposes actions to overcome these barriers (pages 12-14). Of these actions, identify two that are most appropriate to the barriers that you have identified.

- Invest in teacher education and support: In Sweden the demand to make teacher training compulsory has increased and CSE has in fact this year been included as a compulsory topic in graduate level teacher education. This will hopefully support new teachers with the knowledge and skills to provide high-quality CSE, similar to in Estonia.
- Make curricula relevant and evidence-based: A central board should be set up in Sweden to review the curricula and update with key materials, and this should be done in co-creation with a youth advisory group. Teachers should also adapt curricula and sessions to what's most relevant for their class so not to omit important discussions around topics that otherwise might be missed, particularly around values and norms, LGTIQ+, and gender equality (which could also be done in better linkage with the broader gender equality trainings within the school).