

An Orientation Workshop on International Technical Guidance on Sexuality Education

Background

Sexuality education is considered as a new subject to Nepalese educationists though it has been incorporated since 1998 in the school curriculum of Nepal. A short-term training was organized in many places of the country to meet the immediate needs of the teachers. The particular subject teacher was not available in the school because quota for health education teacher has not been created in the schools.

It was a big debate around the world about abstinence-only programme in 2000. Even the federal government of US also spent billions of dollars to promote abstinence-only programmes in the school level. But the programme was found to be ineffective because it could not prevent premarital sex, teen and unwanted pregnancy, spread of HIV and STIs. The incidence clearly indicated that abstinent-only programme did not work to address the risk behaviours of the vulnerable group especially the young people. Comprehensive sexuality education (CSE) is emerged to educate young people for addressing those problems.

Comprehensive sexuality education teaches young people a range of information related to their own sexual anatomy, the act of sex, the use of contraceptives, and the risks of pregnancy and STDs including HIV associated with having sex.

CSE emphasizes a holistic approach to human development and sexuality. UNESCO identifies the primary goal of sexuality education as that “children and young people become equipped with the knowledge, skills and values to make responsible choices about their sexual and social relationships in a world affected by HIV” (UNESCO, 2009). The International Planned Parenthood Federation (IPPF) defines a rights-based approach to CSE as “to equip young people with the knowledge, skills, attitudes and values they need to determine and enjoy their sexuality – physically and emotionally, individually and in relationships” (IPPF, 2011).

Considering the importance of CSE, the updated school curriculum has introduced it from basic education to high school education. Different universities also included CSE components in their programmes especially in faculty of education. The inclusion of CSE in curriculum is not sufficient to implement in the grass root level. It is equally important to aware the policy makers, supporting agencies and implementers for the effective implementation of the programme.

Therefore, under the initiation of UNESCO office in Kathmandu in association with UNFPA (United Nations Population Fund), and UN Women Joint Programme, KOICA (Korean International Cooperation Agency), Government of Nepal, Ministry of Education has organised an "Workshop on International Technical Guidance on Sexuality Education (ITGSE)," in 28th and 29th of March, 2017 in Dhulikhel, Kavre.

Objectives

The overall objective of the workshop is to make policy level personnel aware about the implementation of CSE in grass root level; however, the specific objectives of the workshop are listed below:

1. To make the participants aware of the importance of CSE.
2. To provide basic concepts of CSE based on ITGSE.
3. To make consensus on the responsibilities of different organisations to implement the CSE programme in different sectors.

Outcomes of the workshop

It was expected that altogether different 30 participants would be oriented on ITGSE key concepts of CSE.

Participants of the workshop

Participants from different sectors were invited to participate in the workshop. They were mainly the policy level personnel from different government sectors, NGO, (Nongovernmental organisations), and university. The list of participants is enclosed in Annex A.

Procedures of the workshop

The following procedures were adopted to accomplish the workshop.

1. First of all the key concepts of ITGSE was identified and Schedule for training programme was prepared in consultation with UNESCO Office in Kathmandu. The workshop schedule is presented in Annex – B.
2. Facilitators for workshop were confirmed before commencing the programme.
3. Slides for power point presentation and handouts for workshop were prepared before going to the venue.

4. All the participants from different sectors were invited to attend the workshop.
5. A separate logistic management was arranged to support all the participants.
6. The workshop was conducted in participatory approach where participants openly put their views although the contents were of the sensitive ones.

Contents of the workshop

The contents dealt in the workshop were the six key concepts of CSE which were recommended by ITGSE. The detail description of all the six concepts is presented in Annex – C.

Facilitators

Prof. Ram Krishna Maharjan, Ph.D. retired professor from Tribhuvan University and Dr. Khem Bahadur Karki from Nepal Health Research Council were mobilised as the facilitators for the programme. Both of them have deep knowledge on CSE and they are the pioneers of incorporating CSE in Nepal.

Opening and Closing Session

A very informal opening session was conducted by Mr. Om Sharma from Mega Skill. Mr Laxman Prasad Basyal from Ministry of Education welcomed all the participants in the programme. Mr Deergha Narayan Shrestha from UNESCO highlighted the purpose and importance of the workshop and activities of UNESCO.

Similarly, the closing session was also organised as an informal session. Ms. Kalpana Gyawali, from Sanothimi Campus, Tribhuvan University and Mr. Jeevan Sharma Poudel, Former Joint Secretary of Ministry of Education, representing participants, spoke about the importance of the workshop and they also expressed their commitment to incorporate the ideas in their respective fields in future. Similarly, both the facilitators Prof. Ram Krishna Maharjan and Dr Khem Bahadur Karki also expressed their views to disseminate the information in grass root level. Mr. Deergha Narayan Shrestha from UNESCO thanked all the participants, facilitators and event managers for successfully accomplishing the programme. Mr. Laxman Prasad Basyal announced the closing of the programme followed by his remarks.

References

UNESCO (2009). *International technical guidance on sexuality education*

IPPF (2011). *From evidence to action: Advocating for comprehensive sexuality education.*

Annex – A. List of Participants

SN	Name	Orgnisation
1	Mr. Asta Lama	Ministry of Education
2	Mr. Deergha Narayan Shrestha	UNESCO
3	Laxmi Shiwakoti	Non-Formal Education Centre, Ministry of Education
4	Padma Kumari Sharma	Non-Formal Education Centre, Ministry of Education
5	Sita Ram Koirala	Education Training Centre, Ministry of Education
6	Shekhar Sapkota	Aasman, Nepal
7	Rojina Shrestha	Aasman, Nepal
8	Rosy Shakya	Sammunat Nepal
9	Udaya Manandhar	Sammunat Nepal
10	Krishna Kajee Shrestha	Sambridhi Nepal
11	Khumananda Subedi	SISO Nepal
12	Bhagwan Aryal	Tribhuvan University
13	Kalpana Gyawali	Tribhuvan University
14	Maheswar Sharma	Ministry of Youth and Sports
15	Laxman Khanal	Free lancer
16	Narayani Joshi	Education Training Centre, Ministry of Education
17	Bina Poudel	Nari Shakti
18	Suma Mainali	Department of Education
19	Sushila Shah	Department of Education
20	Suman Bajracharya	National Centre for Education Development
21	Shyam Singh Dhama	National Centre for Education Development
22	Diwakar Chapagai	National Centre for Education Development
23	Laxman Prasad Basyal	Ministry of Education
24	Bindu Dahal	Education Training Centre, Ministry of Education
25	Sitaram Koirala	Education Training Centre, Ministry of Education
26	Arjun Khanal	
27	Jeevan Sharma Poudel	Freelancer
28	Om Sharma	Mega Skill
29	Pushpa Adhikari	JBS
30	Shanti Neupane	Mega Skill
31	Subhas Nepali	UN Women
32	Om Laxmi Siwakoti	Non-Formal Education Centre, Ministry of Education
33	Dr. Khem B Karki	NHRC/TU
34	Prof Dr Ram Krishna Maharjan	TU

Annex – B Workshop Schedule

Empowering Adolescent Girls and Young Women through the Provision of
Comprehensive Sexuality Education and a Safe Learning Environment In Nepal

An Orientation Workshop on
International Technical Guidance on Sexuality Education
28 – 29 March, 2017
Dhulikhel

Schedule

Date/time	Key activities
28th March	
9 00 - 10.30	Breakfast, Opening ceremony and some key note speech and Highlights of the workshop – Deergha N. Shrestha, UNESCO
10.30 – 10 40	Tea break
10.40 – 12.10	Relationships – Prof. Ram K Maharjan
12.10 – 13.00	Lunch
13.00 – 14.30	Values, Attitudes and Skills of Sexual learning – Prof. Ram K Maharjan
14.30 – 14.45	Tea break
14.45 – 16.15	Culture, Society and Human Rights – Dr. Khem B. Karki
29th March, 2017	
8.00 – 9.00	Breakfast
9.00 – 10.30	Human Development – Dr. Khem B. Karki
10.30 – 10 40	Tea break
10.40 – 12.10	Sexual Behaviour – Prof. Ram K. Maharjan
12.10 – 13.00	Lunch
13.00 – 14.30	Sexual and Reproductive Health – Dr. Khem B. Karki
14.30 – 15.30	Closing

Annex – C. Notes of Different Sessions Concept 1: Relationships

- The way in which two or more people, groups, countries, etc., talk to, behave toward, and deal with each other.

Relationship types:

- The relationship between the two countries
- The relationship between the family members
- The relationship between the coworkers, team mates, peers, teachers, students
- Love-hate relationship

Fundamentals of relationship

- Speak up
- Mutual respect
- Compromise
- Be supportive
- Respect each other's privacy

Roles, rights and responsibilities of family members

Roles and responsibilities of parent

a. Policy maker

b. Leader - exemplars

c. Educators

d. Inspirers

e. Pals/Friends

Roles and responsibilities of adolescents

- **A transition period**
- **Difference between 10 years and 14 years**
- **Parents' role to develop adolescents' responsibilities**
- **Scholarship**
- **Domestic chores**
- **Employment**

Roles and responsibilities of adolescents

- **Financial Planning**

- **Volunteerism**
- **Decision Making**
- **Facing Consequences**
- **Family Time**
- **Relationship Building**
- **Future Planning**

Communication between parents and children

- **A good conversation between parents and children**
- **Observe child's conversational style**
- **Remember children's individual differences**
- **Try to change those behavior which are possible**
- Family roles and responsibilities for health and disease
 - Family support during health problems
 - Family support during crisis
 - Family support to maintain confidentiality
 - Family support to take care of chronic disease and other diseases
- Family life education including quality of life, family size and family planning, marriage
- Neighborhood
 - Neighbourhoods are often social communities
 - Good neighbourhood is necessary to educate adolescents

Impact of sexual and relationship issues on family

- Disclosures of an issues of family members
 - Adolescence pregnancy, premarital sex, unwilling marriage
- Support system during the crisis, Mutual respect and gender equality
- Incest

Friendship, love and relationship

- Management of relationship with friends, opposite sex and healthier relationship
- Different ways of friendship and kind of relationship
- Love, sexual attraction, emotions, close relationship, sexual relationship

- Influence of friends, romantic relationship (positive and negative influence)
- Violence and abusive as an unhealthy relationship
- Skills required to identify abusive
- Report and Support mechanism for abusive
- Gender roles and roles affect relationship
- Relevant laws concerning relationship, citizen's responsibility and accountability towards family and society.

E. Tolerance and Respect

- Bias, prejudice, stigma, intolerance, harassment, rejection and bullying
- Violence of human rights on the basis of status and sexual orientation
- Stigma and discrimination
- Impact of discrimination and its importance
- Everyone's responsibility against bias and intolerance
- Support mechanism
- Laws against stigma and discrimination.(Existing law and new formed law)

F. Long-term Commitments, Marriage and Parenting

- Marriage and partnership
- People has rights for - when to become a parent and with whom to marry
- Successful marriages and long-term commitments are based on love, tolerance and mutual respect
- Marriage and long-term commitment are challenging and that affects children when there is difficult relationship. (Role of children in difficult relationship of their parents)

Concept 2: Values, Attitude and Skills

Values

We give value to those

- Which gives us satisfaction
- Which is important for our life
- Which is useful/helpful in our life
- Values on sexuality should be taught from the family itself

Attitude

- Attitude is a way of feeling of a person which is positive or negative
- We develop attitude through experience
- Sometimes our socio-cultural and religious factors also affect in developing our attitude
- Attitude towards sexuality should be taught from the family and school

Skills

- Skill is concerned with the action
- It is determined by values and attitude or sometimes vice versa

Effect of personal values on decisions and behaviour

- There is a great influence of personal values in taking any decision.
- Critical and creative thinking are necessary to make correct decision.
- Decision is also made on the basis of person's preoccupied judgment which may be wrong or hasty.

Sources of values, attitude and sexual learning

Parents, families and communities as sources of values and attitudes

- Learning is a continuous process
- There are different mediums of learning
- Learning is dynamic
- An adolescent can learn many things from parents, friends, communities and so on.
- These are considered as the sources of learning values and attitude

Values regarding gender, relationship, intimacy, love, sexuality and reproduction

- Gender – roles can be changed
- Relationship – can be long lasting

- Intimacy – can share many things
- Love – can be joyful or harmful
- Sexuality – we should respect sexuality differences
- Reproduction – reproduction should not harm our health

Gender role of male and female

- Male and female are two wheels of a cart and they should go together
- We should not discriminate on our sons and daughters
- We must respect different roles.
- Male and female are two wheels of a cart and they should go together
- We should not discriminate on our sons and daughters
- We must respect different roles.

Personal values in relation to a range of sexuality and reproductive health

Effect of personal values on decisions and behaviour

- There is a great influence of personal values in taking any decision.
- Critical and creative thinking are necessary to make correct decision.
- Decision is also made on the basis of person's preoccupied judgment which may be wrong or hasty.

Impact of values, beliefs and attitudes on rights of others

- A well cultured person always thinks about the violation of the rights of others whereas a person with aggressive thinking does not.

Respects for different values, beliefs and attitudes

- Values are emotional feelings and there is no right or wrong values
- Whatever values the persons have we must respect their values
- However, the values which are harmful to one's sexual health should be changed

Parent child relationships

- Closure interaction in terms of physical, emotional and social behaviours to understand the child-parent relationship.
- Age, experience, self- confidence level of parent influence in relationship
- Attitude of parent also influences the relationship

Social norms and their influence on behaviour

Influence of social norms on values and behaviour, including sexual values and behavior

- Sexuality education can be provided in those societies where social norms and values are positive towards sexuality

- If we want change in the society we should change the social norm and values first

Influence of peer pressure on assertive behaviour and other means

- We respect our own rights, values and beliefs and respect others' rights, values and beliefs if we follow assertive behaviour.
- Advantages of assertive behaviour
 1. Improved self-image
 2. Improved understanding of others
 3. Improved self-awareness and self-confidence
 4. More time and more energy

Rational decisions about sexual behaviour

- Creative and critical thinking are necessary for rational decision
Decision on consequences of premarital sex and condom use for safer sex

Decision making process to address sexual and reproductive health concerns

- Identify the decision
- Gather relevant information
- Identify the alternatives
- Weigh the evidence
- Choose among alternatives
- Take action
- Review the decision & its consequences

Advantages, disadvantages and consequences of different decisions

- Early marriage
- Marriage without parents' consent
- Unsafe sexual relation
- Unplanned pregnancies

Legal, social and health consequences of sexual decision making

- Legal consequences of sexual decision making
- Social consequences of sexual decision making
- Health consequences of sexual decision making

International conventions on sexual and reproductive health

- ICPD, Beijing, ICPD +5, MDG, SDG

Social norms and their influence on behaviour

Sexual harassment

Unwelcome sexual advances, requests for sexual favours, and other verbal or physical conduct of a sexual nature.

Health seeking behaviour and Adolescent friendly health services like AFS

- Adolescent friendly health services
- Characteristics of service providers
- Management of health service centre
- Programme and facilities management

Key Concept 3– Culture, Society and Human Rights

3.2 Sexuality and the Media

Learning Objectives for Level I (5-8 years)

- *Identify different forms of media*
- *Distinguish between examples from reality and fiction (e.g. television, Internet)*

Key Ideas:

- Television, the Internet, books and newspapers are different forms of media
- All media present stories which may be real or imagined

Learning Objectives for Level II (9-12 years)

- *Identify examples of how men and women are portrayed in the mass media*
- *Describe the impact of mass media upon personal values, attitudes and behaviour relating to sex and gender*

Key Ideas:

- The mass media may be positive and negative in their representation of men and women
- The mass media influence personal values, attitudes and social norms concerning gender and sexuality

Learning Objectives for Level III (12-15 years)

- *Identify unrealistic images in the mass media concerning sexuality and sexual relationships*
- *Describe the impact of these images on gender stereotyping*

Key Ideas:

- The mass media influence our ideals of beauty and gender stereotypes
- Pornographic media tend to rely on gender stereotyping
- Negative mass media portrayals of men and women influence one's self-esteem

Learning Objectives for Level IV (15-18 years)

- *Critically assess the potential influence of mass media messages about sexuality and sexual relationships*
- *Identify ways in which the mass media could make a positive contribution to promoting safer sexual behaviour and gender equality*

Key Ideas:

- Negative and inaccurate mass media portrayals of men and women can be challenged
- Mass media have the power to influence behaviour positively and promote equal gender relations

3.3 The Social Construction of Gender Learning Objectives for Level I (5-8 years)

- *Define gender*

Key Idea:

- Families, schools, friends, media and society are sources of learning about gender and gender stereotypes

Learning Objectives for Level II (9-12 years)

- *Explore ways in which gender inequality is driven by boys and girls, women and men*

Key Ideas:

- Social and cultural norms and religious beliefs are some of the factors which influence gender roles
- Gender inequalities exist in families, friendships, communities and society, e.g. male/son preference

- Human rights promote the equality of men and women and boys and girls
- Everyone has a responsibility to overcome gender inequality

Learning Objectives for Level III (12-15 years)

- *Explain the meaning and provide examples of gender bias and discrimination*

Key Ideas:

- Personal values influence one's beliefs about gender bias and discrimination
- Gender equality promotes equal decision-making about sexual behaviour and family planning
- Different and unequal standards sometimes apply to men and women

Learning Objectives for Level IV (15-18 years)

- *Identify personal examples of the ways in which gender affects people's lives*

Key Ideas:

- Sexual orientation and gender identity are widely understood to be influenced by many factors
- Gender inequality influences sexual behaviour and may increase the risk of sexual coercion, abuse and violence

3.4 Gender-Based Violence, Sexual Abuse, and Harmful Practices

Learning Objectives for Level I (5-8 years)

- *Describe examples of positive and harmful practices Define sexual abuse*

Key Ideas:

- There are positive and harmful practices that affect health and well-being in society
- Human rights protect all people against sexual abuse and gender-based violence
- Inappropriate touching, unwanted and forced sex (rape) are forms of sexual abuse
- Sexual abuse is always wrong

Learning Objectives for Level II (9-12 years)

- *Explain how gender role stereotypes contribute to forced sexual activity and sexual abuse*
- *Define and describe gender-based violence, including rape and its prevention*
- *Demonstrate relevant communication skills (e.g. assertiveness, refusal) in resisting sexual abuse*

Key Ideas:

- Traditional beliefs and practices can be a source of positive learning
- Honour killings, bride killings and crimes of passion are examples of harmful practices and gender inequality that violate human rights
- There are ways to seek help in the case of sexual abuse and rape
- Assertiveness and refusal skills can help to resist sexual abuse and gender-based violence, including rape

Learning Objectives for Level III (12-15 years)

- *Identify specific strategies for reducing gender-based violence, including rape and sexual abuse*

Key Ideas:

- All forms of sexual abuse and gender-based violence by adults, young people and people in positions of authority are a violation of human rights
- Everyone has a responsibility to report sexual abuse and gender-based violence
- There are trusted adults who can refer you to services that support victims of sexual abuse and gender-based violence

Learning Objectives for Level IV (15-18 years)

- *Demonstrate ability to argue for the elimination of gender role stereotypes and inequality, harmful practices and gender-biased violence*

Key Idea:

- Everyone has a responsibility to advocate for gender equality and speak out against human rights violations such as sexual abuse, harmful practices and gender-based violence

Key Concept 4 – Human Development

4.1 Sexual and Reproductive Anatomy and Physiology

Learning Objective for Level 1 (5-8 years)

- *Distinguish between male and female bodies*

Key Ideas:

- Everyone has a unique body which deserves respect, including people with disabilities
- All cultures have different ways of seeing our bodies
- Men and women and boys and girls have different bodies which change over time
- Some body parts are considered private and others not Learning Objectives for Level II (9-12 years)

Describe the structure and function of the sexual and reproductive organs

Key Ideas:

- Sexual and reproductive anatomy and physiology describe concepts such as the menstrual cycle, sperm production, erection and ejaculation
- It is common for children and young people to have questions about sexual development e.g. why are one breast larger than the other? Do these changes happen to everyone?

Learning Objectives for Level III (12-15 years)

- *Distinguish between the biological and social aspects of sex and gender*

Key Ideas:

- The sex of a fetus is determined by chromosomes, and occurs at the early stages of pregnancy
- Hormones play a major part in growth, development, and the regulation of reproductive organs and sexual functions
- Cultural, traditional and religious practices are an important influence on one's thinking about sex, gender, puberty and reproduction
- All cultures have different ways of understanding sex, gender and when it is appropriate to become sexually active

Learning Objectives for Level IV (15-18 years)

- *Describe the sexual and reproductive capacity of males and females over the life cycle*

Key Idea:

- Men and women's bodies change over time, including their reproductive and sexual capacities and functions

4.2 Reproduction

Learning Objectives for Level 1 (5-8 years)

- *Describe where babies come from*

Key Ideas:

- Babies are formed when a human egg and a sperm cell combine
- Reproduction includes a number of steps, including ovulation, fertilisation, conception, pregnancy and the delivery of the baby
- A woman's body undergoes changes during pregnancy

Learning Objectives for Level II (9-12 years)

- *Describe both how pregnancy occurs and how it can be prevented*
- *Identify basic contraceptive methods*

Key Ideas:

- Unprotected vaginal intercourse can lead to pregnancy and STIs, including HIV

- There are ways of preventing unintended pregnancy including abstaining from sex and using contraception
- The correct and consistent use of condoms and contraception can prevent pregnancy, HIV and other STIs
- Hormonal changes regulate ovulation and the menstrual cycle
- At certain points in a woman's menstrual cycle, conception is more likely to occur
- There are health risks associated with early marriage (voluntary and forced), and early pregnancy and birth
- Pregnancy does not endanger the health of an HIV-positive woman, and there are steps that can be taken to reduce the risk of HIV transmission to the baby

Learning Objectives for Level III (12-15 years)

- *Describe the signs of pregnancy, and the stages of fetal development and childbirth*

Key Ideas:

- There are signs and symptoms of pregnancy which can be confirmed by a test
- Fetuses undergo many developmental stages
- Steps can be taken to promote a healthy pregnancy and safe childbirth
- There are health risks to foetal development associated with poor nutrition, smoking and using alcohol and drugs during pregnancy

Learning Objectives for Level IV (15-18 years)

Differentiate between reproductive and sexual functions and desires

Key Ideas:

- Mutual consent is a key requirement before sexual activity with a partner
- Sexual decision-making requires prior consideration of risk-reduction strategies to prevent unintended pregnancy and STIs
- Men and women experience changes in their sexual and reproductive functions throughout life
- Not everyone is fertile and there are ways of trying to address this

4.3 Puberty

Learning Objectives for Level I (5-8 years)

- *Describe how bodies change as people grow*
- *Describe the key features of puberty*

Key Idea:

- Puberty is a time of physical and emotional change that happens as children grow and mature

Learning Objectives for Level II (9-12 years)

- *Describe the process of puberty and the maturation of the sexual and reproductive system*

Key Ideas:

- Puberty signals changes in a person's reproductive capability
- Young people experience a range of social, emotional and physical changes during puberty
- As the body matures, it is important to maintain good hygiene (e.g. washing the genitals, menstrual hygiene, etc.)
- During puberty, young women need access to and knowledge about the proper use of sanitary pads and other menstrual aids
- Male hormonal changes regulate the beginning of sperm production

- Young men may experience wet dreams during puberty and later in life

Learning Objectives for Level III (12-15 years)

- *Describe the similarities and differences between girls and boys in relation to the physical, emotional, and social changes associated with puberty*
- *Distinguish between puberty and adolescence*

Key Ideas:

- Puberty is a time of sexual maturation which leads to major physical and emotional changes and can be stressful
 - Puberty occurs at different times for different people, and has different effects on boys and girls
 - Adolescence is the time between the beginning of sexual maturation (puberty) and adulthood

Learning Objectives for Level IV (15-18 years)

- *Describe the key emotional and physical changes in puberty that occur as a result of hormonal changes*

Key Ideas:

- Male and female hormones differ and have a major influence on the emotional and physical changes that occur over one's lifetime
- Hormones can affect body shape and size, body hair growth, and other changes

4.4 Body Image

Learning Objectives for Level I (5-8 years)

- *Recognize that bodies are all different*

Key Ideas:

- All bodies (including those with disabilities) are special and unique
- Everyone can be proud of their body

Learning Objectives for Level II (9-12 years)

- *Differentiate between cultural ideals and reality in relation to physical appearance*

Key Ideas:

- Physical appearance is determined by heredity, environment and health habits
- A person's value is not determined by their appearance
- Ideals of physical attractiveness change over time and differ between cultures

Learning Objectives for Level III (12-15 years)

- *Describe how people's feelings about their bodies can affect their health, self-image and behaviour*

Key Ideas:

- The size and shape of the penis, vulva or breasts vary and do not affect reproduction or the ability to be a good sexual partner
- The appearance of a person's body can affect how other people feel about and behave towards them
- Using drugs to change your body image (e.g. diet pills or steroids) to conform to unrealistic, gendered standards of beauty can be harmful
- There are ways of seeking help and treating harmful eating disorders, e.g. anorexia and bulimia

Learning Objectives for Level IV (15-18 years)

- *Identify particular culture and gender role stereotypes and how they can affect people and their relationships*

Key Ideas:

- Unrealistic standards about bodily appearance can be challenged
- One's body image can affect self-esteem, decision-making and behaviour

4.5 Privacy and Bodily Integrity

Learning Objectives for Level I (5-8 years)

- *Describe the meaning of 'body rights'*

Key Ideas:

- Everyone has the right to decide who can touch their body, where, and in what way
- All cultures have different ways of respecting privacy and bodily integrity

Learning Objectives for Level II (9-12 years)

- *Define unwanted sexual attention*
- *Demonstrate ways of resisting unwanted sexual attention*

Key Ideas:

- During puberty, privacy about one's body becomes more important
- Private space, including access to toilets and water, becomes more important as girls mature
- Unwanted sexual attention and harassment of girls during menstruation and, indeed, at all other times is a violation of their privacy and bodily integrity
- Unwanted sexual attention and harassment of boys is a violation of their privacy and bodily integrity
- For girls, communicating to their peers, parents and teachers about menstruation is nothing to be ashamed of
- Being assertive about privacy is a way of refusing harassment and unwanted sexual attention

Learning Objectives for Level III (12-15 years)

- *Identify key elements of keeping oneself safe from sexual harm*

Key Ideas:

- Everyone has the right to privacy and bodily integrity
- Everyone has the right to be in control over what they will and will not do sexually
- The Internet, cell phones and other new media can be a source of unwanted sexual attention

Learning Objectives for Level IV (15-18 years)

- *Describe some ways in which society, culture, law and gender roles can affect social interactions and sexual behaviour*

Key Ideas:

- International human rights instruments affirm rights to privacy and bodily integrity
- Men's and women's bodies are treated differently and double standards of sexual behaviour may impact upon social and sexual interactions

Concept – 5: Sexual Behaviour

Biological, social, psychological, spiritual, ethical, legal and cultural components of sexuality

Biological component

- Fertilization
- Prenatal development
- Infancy period
- Childhood
- Adolescence

Socio-cultural component of sexuality

- Human sexuality as a part of the social life of humans, governed by social norms, implied rules of behaviour
- Society's views on sexuality have changed throughout history
- Each society has different norms about sexuality
- Family, education system, peers, media, and religion affect these norms

Psychological component of sexuality

- Sexual feelings, desires and fantasies
- Attitude towards sexuality and sexual matters
- Sexuality is the central source of human personality
- Sense of self-identification

Spiritual components of sexuality

- Sexual energy
- Orgasm of male versus female
- Spiritual practice to overcome the limitations imposed by nature on our sexuality.
- Transform the inherent mismatch between male and female sexuality into an incredible opportunity for spiritual growth.

Ethical component of sexuality

- Sexual morality
- Ethical sex is consensual, respectful, and protected.

Legal components of sexuality

- Criminalization of particular sexual behaviours
- Granting or restricting autonomy, privacy to make decisions about sexual lives and behaviours
- Rights of protections and recognitions
- Marriage, family and partnership recognition and regulation
- Protection or lack of protection from violence, harassment and persecution by both state and private actors.

Sexual behaviour

- Solitary sexual behaviour
 - Masturbation
 - Use of sex toys
- Heterosexual behaviour
- Homosexual behaviour

Sexual Response Cycle

- Excitement
- Plateau

- Orgasm
- Resolution

Sexual behavior including sexual orientation

- Sexual orientation is a term used to describe our patterns of emotional, romantic, and sexual attraction
- Attraction may be to persons of the opposite sex, the same sex, or to both sexes or more than one sex.

Mutual Consent before sexual activity with a partner

- Consent should be the basis for every sexual encounter.
- Engaging in a sexual act without the other person's consent is considered sexual assault or rape.
- Every sexual act requires consent

Prior consideration of risk-reduction strategies to prevent unintended pregnancy and STIs

- Involvement in creative activities like games, yoga, music and dance, arts, etc.
- Abstinence
- Masturbation
- Involve in sexual activities rather than penetrative one
- Correct and consistent use of condom

Key Concept 6 – Sexual and Reproductive Health

6.1 Pregnancy Prevention

Learning Objectives for Level I (5-8 years)

- *Recognize that not all couples have children*

Key Ideas:

- All people regardless of their health status, religion, origin, race or marriage status can raise a child and give it the love it deserves
- Children should be wanted, cared for, and loved
- Some people are unable to care for a child

Learning Objectives for Level II (9-12 years)

- *Describe key features of pregnancy and contraception*

Key Ideas:

- There are many myths about condoms, contraceptives and other ways to prevent unintended pregnancy - it is important to know the facts
- Not having sexual intercourse is the most effective form of contraception
- Correct and consistent use of condoms can reduce the risk of unintended pregnancy, HIV and other STIs
- Deciding to use a condom or other contraceptives is the responsibility of men and women, and gender roles and peer norms may influence these decisions
- There are common signs and symptoms of pregnancy, and tests to confirm if one is pregnant
- Unintended pregnancy at an early age can have negative health and social consequences

6.1 Pregnancy Prevention (contd.)

Learning Objectives for Level III (12-15 years)

- *Describe effective methods of preventing unintended pregnancy and their associated efficacy*
- *Explain the concept of personal vulnerability to unintended pregnancy*

Key Ideas:

- Different forms of contraception have different effectiveness rates, efficacy, benefits and side effects
- Abstaining from sexual intercourse is the most effective method to prevent unintended pregnancy
- The correct and consistent use of condoms can reduce the risk of unintended pregnancy among the sexually active
- Emergency contraception (where legal and available) can prevent unintended pregnancy, including as a result of lack or misuse of contraception, contraceptive failure or sexual assault
- Natural contraceptive methods should only be considered on the advice of a trained health professional
- Sterilization is a permanent method of contraception
- Condoms and contraceptives can typically be accessed locally - although barriers may prevent or limit young people's ability to obtain them
- No sexually active young person should be refused access to contraceptives or condoms on the basis of their marital status, their sex or their gender

Learning Objectives for Level IV (15-18 years)

- *Describe personal benefits and possible risks of available methods of contraception*
- *Demonstrate confidence in discussing and using different contraceptive methods*

Key Ideas:

- Contraceptive use can help people who are sexually active plan their families, with important related benefits for individuals and societies
- Some contraceptive methods may cause side effects and/or be unadvisable for use in certain circumstances (also known as “contra-indicated”)
- All contraception, including condoms and emergency contraception, must be used correctly
- Among the sexually active, the decision about the most appropriate method or mix of contraceptives is often based on perceived risk, cost, accessibility and other factors

6.2 Understanding, Recognising and Reducing the Risk of STIs, including HIV

Learning Objective for Level I (5-8 years)

- *Describe the concepts of ‘health’ and ‘disease’*

Key Ideas:

- People can make choices and adopt behaviours that preserve and safeguard their health
- The immune system protects the body from diseases and helps people to stay healthy
- Some diseases can be transmitted from one person to another
- Some people that have a disease can look healthy
- All people - regardless of their health status - need love, care and support

Learning Objectives for Level II (9-12 years)

- *Explain how STIs and HIV are transmitted, treated and prevented*
- *Demonstrate communication skills as they relate to safer sex*

Key Ideas:

- HIV is a virus that can be transmitted through: unprotected sex with an infected person; blood transfusion with contaminated blood; using contaminated syringes, needles or other sharp instruments; or from an infected mother to her child during pregnancy, childbirth and breastfeeding
- The vast majority of HIV infections are transmitted through unprotected penetrative sexual intercourse with an infected partner
- HIV cannot be transmitted through casual contact (e.g. shaking hands, hugging, drinking from the same glass)
- There are ways to reduce the risk of acquiring or transmitting HIV, including before (e.g. using a condom) and after (e.g. Post-Exposure Prophylaxis) exposure to the virus
- It is possible to be tested for common STIs such as Chlamydia, Gonorrhoea, Syphilis and for HIV
- Treatments exist for many STIs • There is currently no cure for HIV - although anti-retroviral
- therapy (ART) can suppress HIV and stop the progression of the disease commonly known as AIDS
- Communication, negotiation and refusal skills can help young people to resist unwanted sexual pressure or reinforce the intention to practice safer sex, including the correct and consistent use of condoms and contraceptives

6.2 Understanding, Recognising and Reducing Risk of STIs including HIV (contd.)

Learning Objectives for Level III (12-15 years)

- *Identify specific ways of reducing the risk of acquiring or transmitting HIV and other STIs including the correct use of condoms*
- *Explain how culture and gender affect personal decision making regarding sexual relationships*
- *Demonstrate skills in negotiating safer sex and refusing unsafe sexual practices*

Key Ideas:

- STIs such as Chlamydia, Gonorrhoea, Syphilis, HIV and HPV (genital human papilloma virus) can be prevented
- Not having sexual intercourse is the most effective protection against HIV and other STIs
- If one is sexually active, there are other ways to reduce the risk of acquiring or transmitting HIV and other STIs including: avoiding penetrative sex; practicing ‘mutual monogamy’; reducing the number of sexual partners; consistently and correctly using condoms; avoiding having multiple concurrent partners; and getting tested and treated for other STIs
- In certain settings where there are high levels of HIV and other STIs, age-disparate/intergenerational relationships can increase the risk of acquiring HIV
- Post-exposure prophylaxis (PEP), or short-term ART, can reduce the likelihood of HIV infection after a potential exposure
- Sexual health services, including VCT centers offering pre- and post-test counselling can help people to assess personal risk and perceived vulnerability, and explore their attitudes about safer sexual practices
- Everyone has a right to confidentiality⁷ about their health, and should not be required to disclose their HIV status
- Programmes promoting positive living can help people with HIV feel supported to practice safer sex and/or to voluntarily disclose their HIV status to their partner(s)
- Culture, gender and peer norms can influence decision making about sexual behaviour
- Alcohol and drug use can impair rational decision-making and contribute to high-risk behaviours

Learning Objectives for Level IV (15-18 years)

- *Assess a range of risk reduction strategies for effectiveness and personal preference*
- *Demonstrate communication and decision-making skills in relation to safer sex*

Key Ideas:

- There is a range of factors that may make it difficult for people to practice safer sex
- Some risk reduction strategies offer dual protection against both unplanned pregnancy and STIs, including HIV
- Among the sexually active, the decision about the most appropriate risk reduction strategies to adopt is often influenced by one’s self-efficacy, perceived vulnerability, gender roles, culture and peer norms
- Communication, negotiation and refusal skills can help young people to resist unwanted sexual pressure or reinforce the intention to practice safer sex, including the correct and consistent use of condoms and contraceptives

6.3 HIV and AIDS Stigma, Treatment, Care and Support

Learning Objectives for Level I (5-8 years)

- *Identify the basic needs of people living with HIV*

Key Ideas:

- All people need love and affection
- People living with HIV can give love and affection and can contribute to society
- People living with HIV have rights and deserve love, respect, care and support
- There are medical treatments that help people live positively with HIV

Learning Objectives for Level II (9-12 years)

- *Describe the emotional, economic, physical and social challenges of living with HIV*

Key Ideas:

- HIV and AIDS affect family structure, family roles and responsibilities
- Finding out one's HIV status can be emotionally challenging
- Disclosing one's HIV status can have negative consequences, including rejection, stigma, discrimination and violence
- Stigma, including self-stigma, can prevent people from accessing and using treatment, care and other support services
- The emotional, health, nutritional and physical needs of children orphaned or made vulnerable by AIDS may require particular attention
- People living with HIV experience changes in their viral loads (the amount of HIV circulating in their bodies) which can impact the risk of transmitting of HIV
- Treatment for HIV is a life-long commitment, and can often come with side effects and other challenges and may require careful attention to nutrition
- Children and young people can also benefit from treatment, although careful attention is required during puberty to ensure proper dosage and adherence

Learning Objectives for Level III (12-15 years)

- *Explain the importance and key elements of living positively with HIV*

Key Ideas:

- Sexuality education programmes for people living with HIV can support them to practice safer sex and to communicate with their partner(s)
- People living with HIV should be able to express their love and feelings and to marry or enter into long-term commitments and to start a family, if they choose to do so
- Support groups and mechanisms typically exist for people living with HIV
- Discrimination against people on the basis of their HIV status is illegal

Learning Objectives for Level IV (15-18 years)

- *Describe the concept and causes of stigma and discrimination in relation to people living with HIV*

Key Ideas:

- Stigma and discrimination against individuals and communities can impede access to education, information and services, and can heighten their vulnerability
- People living with HIV are often powerful advocates for their own rights, which can be enhanced through support from others
- People living with HIV can be important educators and mobilizers of young people because of their own experience and they can provide guidance and support to young people