



country advocacy brief

BANGLADESH

COMPREHENSIVE SEXUALITY EDUCATION: THE WAY FORWARD

SECTION 1:

INTRODUCTION

Bangladesh is a land of 147,000 square kilometres. With a population of approximately 158 million and population density of 1070 per square kilometre (in 2014), it is one of the 8th most densely populated countries. Around one-third of Bangladeshis live in urban areas, including Dhaka, the capital.

According to Bangladesh Demographic Health Survey 2014 (BDHS 2014-current), the Population growth rate is 1.37%, TFR is 2.3 (no further decrease from 2011), contraceptive prevalence rate (CPR) is 62% and adolescent birth rate is

113 per 1,000 women (No significant decrease as compared to 140 in 1993-94). Majority of health facilities excluding Community Clinics (CC) have FP commodities and equipment but only 40% have readiness to offer modern FP services¹.

The largest reproductive segment (15-24) who are adolescent and young, constitute 19% of the total population. Each year reproductive health (RH) age group population increases by 5%. Low levels of secondary and post-secondary education enrolment and 59% of women (20-24 years) marry before age 18 indicate that proper education, especially the correct knowledge and understanding on sexual and reproductive health (SRH) services are evidently low or even none among the adolescent and young clusters of the population.

YOUTH AND ADOLESCENT: IMPORTANCE OF SEXUAL EDUCATION AND THE GAPS:

Adolescence is the transitional stage for changing behavior, values, beliefs and attitudes. It is also the prime period of sexuality development. Therefore, without the sexuality education including right awareness on the physical changes occurs during this stage, they are vulnerable to unwanted pregnancies, STIs and HIV/AIDS as they are more unaware and less cautious about the risks of sexual behaviour than adults.

The knowledge gaps on SRHR and communicable diseases, especially HIV and STIs are even more alarming for gender diverse adolescent and young populace. Though the HIV prevalence rate is 1% among the most-at-risk population², this knowledge gap poses a higher risk as against the country efforts towards attaining UNAIDS Fast Track targets.

KNOWLEDGE GAPS: REASONS AND IMPACT

One of the key reasons why youth and adolescents do not have required knowledge and access to adequate information about their own sexual and reproductive health



including HIV and STI is that there is a strong religious sensitivity and socio-cultural taboo attached around the issue. The learning scope from parents, guardians, elders and peers is also very narrow due to hesitation and conservativeness rooted in the culture.

Due to these socio-religious reasons, a considerable number of youth and adolescent populace remain out of access from SRHR and other health care services including HIV despite having dire needs and demands. It was also noticed that a certain number of youth population kept themselves away from taking services due to fear of identity exposure especially who belong to gender diversity clusters.

All these result into an alarming silence among the youths and adolescents that poses a high risk for going astray unknowingly at the cost of deteriorating physical and mental health including risk of having and/or spreading STI and HIV.

SECTION 2:

COMPREHENSIVE SEXUALITY EDUCATION IN THE NATIONAL CONTEXT

Sexual and reproductive health services and related education are yet to gain due momentum in Bangladesh and people still attach social, cultural and religious stigma to issues related to SRHR. The words 'sex' 'sexual' and 'sexuality' are considered taboo and not to be discussed openly or publicly.

Therefore, information provided in the chapters³ on adolescent reproductive health (ARH) from class VI to class VIII has the reflection of conservativeness persistent in the society and neither provide nor contain information on access to SRH services to young people and hence, insufficient for adolescent and young clusters in terms of 'comprehensiveness'.

The national education policy⁴ of Bangladesh has no mentioning of comprehensive sexuality education (CSE) but the country has several policies which state the needs for life skill education which are yet to be implemented. Bangladesh's **National Youth Policy (2003)** includes a focus on raising awareness about STIs, HIV and AIDS, enabling young women's decision making on reproductive health, empowering young women, and expanding facilities for young women's education and for reproductive health services for young people.

This policy is currently being revised and the revised content is reported to include SRH issues. The draft Youth Policy also proposes to ensure HIV/AIDS and drug free society and to create proper environment for their health services.

The **Population Policy (2012)** includes among its objectives to build awareness among adolescents on family planning, reproductive health, reproductive tract infections and HIV/AIDS. Strategies include educating adolescents on health and life skills, building awareness of parents, teachers and service providers, ensuring marriage registration, and making registrars aware of their responsibilities.

The 2011 – 2016 Health Population & Nutrition Sector Strategic Plan (HPNSSP) underlines the needs of 'life-skills

education' (RH, Gender, FP) and the access to correct information about the physical and psychological changes for adolescents (both males and females), so that they are better prepared to manage the challenges that are part of their age. It also mentions that the adolescent health services will be provided through partnerships with existing school health programs on a pilot basis. If successful, they will be scaled up through school and non-formal education initiatives. Bureau of Health Education, the School Health Program Unit of Directorate General of Health Services (DGHS) will be responsible for these services.

Some national and international NGOs are currently undertaking number of activities and offering youth friendly services related to youth and adolescence reproductive and sexual health i.e. vouchers scheme, helpline and face to face counselling, clinical services, social gathering, social media campaign etc. There are also different alliances (e.g. Unite for Body Rights -UBR), civil society organizations, different projects such as Generation Breakthrough (GB), BALIKA etc. who provide SRHR information linking up the services with existing public or private/NGO services.

Despite these provisions of youth and adolescent friendly services, usage rates are yet to improve and therefore calls for awareness among youth and adolescent clusters, teachers and guardians particularly and in society as a whole.

SECTION 3:

COMPREHENSIVE SEXUALITY EDUCATION ACCORDING TO INTERNATIONAL STANDARDS AND WHERE DOES THE COUNTRY STAND

Comprehensive sexuality education when delivered in its fullest extent will uphold young people sexual and reproductive rights. Such education should reiterate and emphasize human sexuality and pleasure, especially young people's entitlement to this. It shall be practical and based on the realities of young people's lives, enabling them to gain life skills like negotiation, bargaining power in a relationship, making choices for survival, and others.

CSE aims to empower young people to achieve greater well-being – physically, socially, and mentally. According to international standard, CSE should contain the basic elements which must be covered by curricula at all times. These include, gender equality, SRH and HIV, sexual citizenship and rights, pleasure, freedom from violence, diversity and relationships.

CSE should enable young people to gain accurate information on sexual and reproductive rights to develop life-skills like critical thinking, decision making and empathy, as well as to nurture positive attitudes and values like respect for self and others and open-mindedness⁵. And, it has to be based on the premise that sexuality is a fundamental aspect of human life with several dimensions and it cannot be understood without reference to gender and diversity⁶.

From the perspective of the international standards, Bangladesh needs to go a long way in terms of ensuring 'comprehensiveness' in the sexuality education covering the basic elements of CSE stated above.

Bangladesh society is conservative, especially in terms of religion. Though sex outside marriage is forbidden, reality and studies show that there is a diverse sexual practices and

behaviors practiced both within and outside marriage, especially among young population, and lack of correct information and services often bring about risky behaviors as well.

Evaluations of comprehensive sexuality education from around the world show that these programs can help youth delay onset of sexual activity, reduce non-consensual sexual behaviours, reduce number of sexual partners, and increase condom and contraceptive use. Importantly, the evidence shows youth who receive comprehensive sexuality education are not more likely to engage with sexual activities early, and engage with risky experimental sexual activities. Effective programs exist for youth from a variety of racial, cultural, and socio economic backgrounds⁷.

Most of the parents and adults in Bangladesh are reluctant to give young and adolescent people accurate sexual information. They fear that knowledge about sex leads to early sexual activity but the reality is that accurate and comprehensive sexuality education will empower young people, reduce unwanted pregnancies, unsafe abortions, STIs and RTIs and enable health and well-being of young people including adolescents.

With effective sexual education from home and school, adolescents can be provided with factual information to make wise decisions about their behavior. It would also promote safer sex; reduce the risk of STDs including HIV/AIDS and unintended pregnancy. The curriculum or education actually includes self care and well being, which is an integral part of growing up as a happy confident productive adult.

Therefore, in the current context of Bangladesh, there should not be any question whether the young people including adolescents will receives education, the only question is: how?

SECTION 4:

RECOMMENDATION TO GOVERNMENT

Only knowledge generating programmes that rely mainly on conveying information about sex or moral perceptions – how the body's sexual system functions, what teens should-do and should-not-do, are not enough to address 'comprehensiveness' in sexuality education. Rather, programs focused on helping youths to change their behaviour using role playing, games, and exercise that strengthen social skills could be thought of.

In addition, following recommendations are placed for consideration:

- Include Comprehensive Health and Life Skills Education covering the basic elements of CSE in the school and out of school curricula
- Include Comprehensive Health and Life Skills Education in teachers training manual to train and motivate them on delivering CSE related information to young and adolescent students considering socio-religious contexts.
- Raise public awareness through massive media campaign through GO-NGO partnership to increase awareness and social tolerance on importance and long term benefit of Life Skills Education for young and adolescent boys and girls.

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7. Gender equality, SRH and HIV, sexual citizenship and rights, pleasure, freedom from violence, diversity and relationships

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ABOUT THE ADVOCACY BRIEF

This Advocacy Brief was developed by Bandhu Social Welfare Society and Durbin Foundation of Bangladesh. The publication has been produced as part of the regional strategizing meeting "Integrating Sexual and Reproductive Health and Rights within the Post-2015 Sustainable Development Agenda". This project is being implemented in Bangladesh in partnership with the Asian-Pacific Resource and Research Centre for Women (ARROW).

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ABOUT BANDHU

Bandhu Social Welfare Society, a leading national organization, has been working on improving sexual and reproductive health and human rights of sexual minority populations since 1996. Today after 19 years, Bandhu is sincerely continuing to serve the communities with undivided commitment and is paving the way for obtaining their

social justice, equality, sexual and reproductive health and rights (SRHR).

As a part of addressing the gaps stated above, Bandhu has scaled up essential SRHR activities including legal support, advocacy and policy development programs that work on addressing the social, religious, cultural and legal impediments of young and adolescent clusters of the gender diverse communities. ARROW (The Asian-Pacific Resource and Research Centre for Women) supported project is one such intervention to address young people's sexual and reproductive health and rights needs in Bangladesh.

Again, to build next generation movement leaders and raise voice on the needs of correct knowledge on health issues at puberty, the organization has established "HIM" (corner) in 2013, a dedicated corner for young and adolescent gender diversified population. The aim of this corner is to provide mental and psychosexual counselling, medical care services and education facilities to the young gender diverse population.

Bandhu is now aligning its 4th Strategic Plan (2017-2021) to ensure that its program interventions on health and health rights, implemented through 37 well-equipped field health centers in 22 districts and 25 partner CBOs across the country, can add significant value to national response on health for achieving Sustainable Development Goals (SDGs) particularly 1, 3, 5, 16 and 17.

ABOUT DURBIN FOUNDATION

Durbin is a youth-led, youth development organization which has been working for the development of ICT, education and health in Bangladesh. With a vision to establish knowledge based economy in Bangladesh Durbin started its journey on 2011. The main office of Durbin is Dhaka but it successfully organized campaigns, trainings and workshop in different parts of Bangladesh in order to motivate and aware young people. Durbin App, an initiative of Durbin Foundation has received national and international recognition and awards.

Durbin's work is focused on the following six areas:
Durbin App, Wake Up, Education for All, SRHR, ICT Skill Development, Free Medical Service, Innovation and Entrepreneurship

Durbin Foundation is growing and creating opportunity for young people every day with a total 34 members. In collaboration with ARROW Durbin has been implementing a SRHR awareness raising project in Bangladesh since 2015 Overall Durbin Foundation is inspiring youth to chase their dreams keeping sustainable development at the heart for the betterment of the country.

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