

country advocacy brief



PAKISTAN

COMPREHENSIVE SEXUALITY EDUCATION IN PAKISTAN: THE WAY FORWARD

1. INTRODUCTION

Country context

The characteristic that defines Pakistan more than anything else is its demography. A very large percentage of Pakistan's population is young (15-29). Almost 64 percent of its 182 million population is currently below the age of 30, and the numbers of young people will continue to grow until 2035. This is the much touted 'youth bulge'. Capitalizing on this demographic dividend is key to Pakistan's future prosperity. What is more, Pakistan only has a limited window of opportunity to leverage on its shifting age structure – the opportunity that may not come again for many generations. The quality of addressing the needs and aspirations of young people today will define the common future of Pakistan – whether it grows and thrives or fails and implodes.

In this context it is important to understand the link between SRHR and broader developmental objectives like alleviating poverty, hunger, unemployment or societal violence. The health and well-being of young people, their right to informed choices about their life, their ability to live with dignity and without discrimination, are all inextricably linked to larger developmental goals. This link has not been recognized by governments and policy makers, making young people's SRHR a marginalized issue, and one that is often sacrificed to cultural and religious sensitivities for other priority areas like the economy or job creation, not realizing that resources spent on young people's SRHR would lead to gains in these areas as well.

Following the 18th Amendment in the constitution of Islamic Republic of Pakistan in 2010, legislative and fiscal authority has been transferred to the provinces from federation. In this post-18th amendment scenario, provincial Population Welfare, Health and Youth Affairs Departments have the mandate to address adolescent and young people's SRHR. Youth policies provide overall policy and legal framework on addressing youth issues including SRHR while health and population policies along with costed implementation plans (developed by Population Welfare Departments) provide policy and programmatic guidance on health and population, specifically sexual and reproductive health services. Health and population policies also outline the structural framework for public health services, including SRH services, provision at village and district levels while costed implementation plans outline the monetary aspects. Youth Affairs, Health and Population Welfare departments' policy documents also refer to provision of LSBE through formal and informal mechanisms. However, the primary mandate for provision of LSBE through formal mechanisms lies with Education department and ministry only.

The inclusion of LSBE in mainstream curricula in secondary and higher education has found its way into Pakistan's national and provincial education policies. However, implementation is severely limited because of a lack of capacity, political will and coordination between government sectors. The National Education Policy of 2009 contains no definition of LSBE or what particular skill is to be imparted through what curricula and at what stage. As a result it is likely that skills not conforming to traditional values, and these will include those relating to SRHR, will not be included in any resulting curriculum and textbook reform. Existing National policies continue to apply in the

absence of corresponding provincial policies on the subject matter and therefore will need to be addressed.

According to the Bureau of Statistics, in the Pakistan Social & Living Standards Measurement Survey, Punjab has the highest primary school enrolment rate in Pakistan, however, girls have a lower enrolment rate than boys and the difference is markedly larger in rural areas than in urban areas. Also girls are more likely to leave early than are boys in rural areas. This had direct repercussions in terms of reproductive health outcomes. Parental consent and cost issues were cited as the main reason behind lower enrolment of girls in schools. Past few years have seen the efforts in Punjab gaining momentum towards adopting a results based approach and a positive step has been the setting up of the Punjab Commission on the Status of Women that has contributed in the introduction of policies as well as monitoring the implementation of the same.

In Sindh, adequate reproductive care services are not available at the required scale, especially at the rural level. There are marked differences between the health status of women and men in Sindh due to the socio-cultural norms, which hinders girls and women's mobility and access to education and public health services.

The broad challenges of youth in KP and Balochistan are economic, social and political with multiple sub-issues that need to be addressed through the youth policy. Balochistan has the worst Maternal, Newborn and Child Health (MNCH) indicators in the country. As compared to the national Maternal Mortality Rate (MMR) of 276 per 100,000 live births, Balochistan has rate of 785 per 100,000. Similarly the Infant Mortality Rate (IMR) in Balochistan is 97/1000 as compared to the national rate of 74. The antenatal coverage in Balochistan is only 21% as compared with the national coverage of 73%. The problems exist with both the demand and the supply sides of the services. In Balochistan's traditionally patriarchal society, women regularly face discrimination, assault, and murder in the name of 'honor'. They have little space in the political, cultural, economic, or social fields. The cases of violence against women are also very common but the reporting is quite low. Sexual abuses are under-reported in Balochistan's highly conservative society and issues are settled personally.

2. SITUATIONAL ANALYSIS

Section 1: Status of CSE/ LSBE in respective countries

Comprehensive Sexuality Education (CSE) in its precise form and content is non-existent in Pakistan. Nevertheless, some bits and pieces of some of its aspects are covered under the domain of Life Skills Based Education (LSBE) and reproductive health and reproductive rights. Some NGO supported initiatives have begun in the country. Noteworthy here as an example of the situation on the ground, is the LSBE program in Punjab, which was essentially run by SRHR NGOs in an arrangement where the government entered into a memorandum of agreement. In the paper, "Scaling up of LSBE in Pakistan: a case study", the authors opine that Punjab is a conservative province making it difficult to garner support at the various levels of the program. Due to strong

cultural and religious backlash the Punjab government cancelled the memorandum of agreement to include LSBE in the curriculum of public schools.

Currently the Adolescent strategy of Punjab does refer to the possibility of LSBE but how and if it will actually be accomplished remains a question mark. LSBE has been implemented in some Sindh public sector schools through IRC and Rutgers projects, however Aahung is spearheading the review by Sindh Board of Education for integrating it into regular curriculum. In KP and Balochistan there has not been any notable progress.

Section 2: Laws and policy and programme landscape on CSE/LSBE in Pakistan

A slightly unclear reference has been made in **National Youth Policy 2009** (in context of reproductive rights) but a clear reference is made to youth marriages, family and life skills. After the 18th Amendment, the provinces now hold the authority to devise their own strategies and policies regarding Youth Policies. Punjab's youth policy includes articles on provision of education on 'reproduction rights at the school level with cultural sensitivities of the regions in view', in addition to life skills based curriculum. Sindh also intends to integrate "reproductive rights education" as part of the broader LSBE education. KP also refers to inclusion of reproductive health issues in the curriculum.

The **National Health Policy 1997, 2001, 2009** do refer to the need for education and awareness on reproductive rights but do not mention the word "sexuality". They also fail to mention specific age groups which ought to be observed, educated or trained in this regard. The **National Population Policy** does aim to include education on family life in formal and non formal education and to prepare youth for parenthood but there is no clear evidence of the ambition to introduce CSE accurately in a concrete manner. The government of Punjab has made a five year plan on education and awareness of reproductive rights but fails to mention the target group. Population Welfare Department of Govt. of Punjab initiated Youth Friendly centres in Lahore and Sargodha districts with support of UNFPA as pilot project to provide RH information and services.

The **National HIV Plan** shows a clear ambition to incorporate Reproductive knowledge in context of HIV in primary and secondary education, keeping in mind the social and contextual constraints. The **Education Policy 2009** includes life skill based education in clauses 1.3.5 stating to promote LSBE through secondary education and to infuse life skill education in curricula and teacher training by developing culturally appropriate awareness material.

The 18th Amendment has dissolved the National Education Policy and now each Province is authorized to design a context specific policy. The Provincial Education Policies do stress on provision of primary and secondary education to all with inclusion of LSE but do not intend to integrate CSE in the curricula. It also aims to initiate teachers training programmes to facilitate awareness on HIV knowledge, prevention and management.

In addition to this there are following acts and policies targeting HIV:

1. The HIV & AIDS Prevention and Treatment Act(2007)
2. The Sindh HIV and AIDS Control
3. Treatment and Protection Bill (2013)
4. Voluntary Counseling and Testing (VCT)

Some policies do aim at reducing gender inequality, primarily focusing on reducing gender gap among men and women in terms of access to education, political participation, access to employment etc, but discussion on gender identity and the freedom to choose sexual identity is still considered to be too unconventional and contradictory with social and religious values. Though recent policies aim to cater to the need of awareness on reproductive health choices by young people, they fail to clearly identify the barriers to achieving safe spaces for awareness and education on sexual and reproductive right. There is also a lack of political and social intent to foster education on sexual citizenship.

3. RECOMMENDATIONS

- Provincial Education Policies should be finalized in light with National Education Policy 2009 and integrate LSBE
- National Curriculum Councils and Provincial Curriculum Boards should adopt and integrate Life Skills Based Education (LSBE) in respective curriculum
- Finalize the Provincial Youth Policies with meaningful youth engagement and ensure proper implementation where it exists.
- Introduce a comprehensive anti-discriminatory legislation to end discrimination and access to public services including information and education
- Sensitize teachers and school authorities on LSBE for effective implementation, once adopted
- End gender stereotyping in school curricula and teaching methods
- Re-orient public health campaigns and social mobilization activities with a view to involving men as responsible partners in life skills based education.
- Incrementally increase the education budget from the current level to at least 4 percent of GDP

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ABOUT CHANAN DEVELOPMENT ASSOCIATION (CDA)

Chanan Development Association (CDA) is a national youth-led organization, striving for meaningful participation and empowerment of youth since 2004 as Theatre Group and registered in 2006 under Societies Registration Act 1860. The mission of CDA is to empower young people ensuring their meaningful participation at each and every level of program and policy development and decision-making without discrimination on any basis for the creation of a healthy, just, democratic and peaceful society.

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ABOUT YOUTH ADVOCACY NETWORK (YAN)

YAN Youth Advocacy Network (YAN) is a network of vibrant and energetic young people; registered Under Society's ACT 1860 began as a youth network reaching over 500 members from 30 districts all over Pakistan. Youth Advocacy Network (YAN) believes each person is unique and significant for national development. YAN respects, values and commemorates the diversity of individuals of every race, age, gender, ethnicity, culture, religion, sexual orientation, physical and mental ability, and family background.

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Striving for Youth
Participation
& Empowerment

