

# COMING OF AGE IN THE CLASSROOM

## RELIGIOUS AND CULTURAL BARRIERS TO COMPREHENSIVE SEXUALITY EDUCATION

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championing  
women's sexual and  
reproductive rights

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## LIST OF ACRONYMS

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| <b>AEP</b>    | Adolescence Education Programme  |
| <b>AFLE</b>   | Adolescent Family Life Education   |
| <b>CBSE</b>   | Central Board of Secondary Education, Bangladesh                           |
| <b>CEDAW</b>  | Convention on the Elimination of All Forms of Discrimination Against Women |
| <b>CSE</b>    | Comprehensive Sexuality Education  |
| <b>FGM</b>    | Female Genital Mutilation  |
| <b>ICPD</b>   | International Conference on Population and Development                     |
| <b>IPPF</b>   | International Planned Parenthood Federation                                |
| <b>LGBTQI</b> | Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, and Intersex    |
| <b>MEB</b>    | Madrasah Education Board, Bangladesh                                       |
| <b>NCERT</b>  | National Council of Educational Research and Training, India               |
| <b>SMAM</b>   | Singulate Mean Age at Marriage   |
| <b>SRHR</b>   | Sexual and Reproductive Health and Rights                                  |
| <b>STIs</b>   | Sexually Transmitted Infections  |

# COMING OF AGE IN THE CLASSROOM: RELIGIOUS AND CULTURAL BARRIERS TO COMPREHENSIVE SEXUALITY EDUCATION

Vagisha Gunasekara

## INTRODUCTION

Young people, between ages 10 and 24, comprise 1.8 billion of the world population today. This unprecedented proportion of young people,<sup>1</sup> while creating potential for promising new areas of social progress and innovation, is concentrated in 48 of the world's least developed countries.<sup>2</sup> While life circumstances, opportunities, and obstacles to improve their lives vary from country to country, poverty, discrimination, lack of social mobility, and limited access to information and advice on carving out their future hinders the promise of most young people. Too many—especially girls and women—are deprived of sexual and reproductive health and rights (SRHR),<sup>3</sup> which shape virtually every aspect of their lives.

For example, while HIV-related deaths are decreasing globally, young people remain particularly vulnerable to the disease; an estimated 100 million to 140 million girls and women alive today have undergone some form of female genital mutilation (FGM); and every day, in developing countries, 20,000 girls under 18 give birth, and many become pregnant before they are physically mature.<sup>4</sup> Hence, young people's receiving adequate preparation for their sexual lives become central to achieving SRHR for all. However, the reality is that efforts to equip young people with knowledge, skills, attitudes, and values needed to determine and enjoy their sexuality—physically and emotionally—have been met with resistance and other obstacles in a number of countries. Central to this resistance are several normative assumptions about human sexuality. First, there is an assertion and an assumption that individuals engage in sexual activity only after marriage. Norms or laws that prohibit consensual sexual activity between young and/or unmarried individuals can place these individuals at risk of harm by hindering their access to sexual and reproductive

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health.<sup>5</sup> Second, the concept of marriage is limited to heteronormative unions. The embeddedness of these assumptions in the approach to SRHR in most countries leaves behind the vast majority of unmarried individuals and those that fall outside heterosexual binary genders. Contrary to international norms, many countries criminalise same-sex sexual acts, which puts LGBTQI youth at risk of severe physical and mental harm. The lack of legal recognition does not render an imperative for service providers to ensure that SRH services are relevant and accessible to LGBTQI individuals.<sup>6</sup>

There is substantial evidence pointing to the alignment of people's reservations, panics, and anxieties about young people's sexual behaviour with deep religious and political predispositions in forming a strong oppositional force to SRHR interventions that aim to educate young people about their rights around sexuality and reproductive health.<sup>7</sup> Recent evidence from ten national studies<sup>8</sup> on the influence of religion on SRHR undertaken by ARROW in partnership with national partners suggests that the discourse and the practice of SRHR is shaped by rapidly changing political, economic, and social contexts. These contexts are in a state of flux with entangled processes of patriarchy, development, state ideology and practice, religious interpretations, and socio-political movements of religious fundamentalist character. Constraints

arising from such complex entanglements limit young people's access to the information and services they need to make informed and responsible decisions about their sexual and reproductive lives.

This paper elucidates evidence which underscores anxieties and panic about sexuality and sexual behaviour of young people influenced by movements advancing a distinct religious identity, and the implications for advocacy on advancing SRHR. Synthesised in this document is evidence from two countries—Bangladesh and India—on Comprehensive Sexuality Education (CSE), an area of controversy (to varying degree) in both countries and thematic focus areas for the broader project. Evidence from each country stem from national studies on the influence of religion on CSE, and are qualitative in nature. The collated evidence is supported by secondary literature, employed to frame the complex ways in which state policies and people's perceptions link controversies around CSE to religious beliefs and interpretations, socio-political movements bearing fundamentalist ideals, and state ideology and response.

This paper is structured as follows: the section that follows the introduction contextualises CSE within the broader economic and socio-political environment; the second and third sections hone in on evidence from Bangladesh and India about the role of religion in shaping discourse and perceptions on CSE; and the fourth section presents a conclusion, followed by a section on recommendations for future action.

## SITUATING COMPREHENSIVE SEXUALITY EDUCATION WITHIN THE SOCIO-POLITICAL AND ECONOMIC CONTEXT OF DEVELOPING COUNTRIES

Comprehensive Sexuality Education is a vital intervention that equips young people with knowledge and skills that are necessary to take informed decisions regarding their lives. CSE<sup>9</sup> is defined as “a lifelong process of acquiring information and forming attitudes, beliefs and values about identity, relationships and intimacy.”<sup>10</sup> The International Planned Parenthood Federation's (IPPF) framework for CSE recognises

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that information on sexuality alone is inadequate, and that CSE programmes must strive to equip young people with knowledge and skills they need to determine and enjoy their sexuality in all spheres of life. As such, it entails seven essential components: gender, SRHR and HIV and AIDS (including information on services and clinics), sexual citizenship, pleasure, violence, diversity, and relationships.<sup>11</sup>

The term “comprehensive” refers to the encapsulation of the full range of information, skills, and values to enable young people to exercise their sexual and reproductive rights and to make choices about their health and sexuality. CSE is geared to provide young people with accurate, scientific, and evidence-based information;<sup>12</sup> develop life skills;<sup>13</sup> and nurture non-judgmental and positive attitudes and values.<sup>14</sup> In other words, CSE is not restricted to promoting a set of messages about sex and sexual behaviour; rather it offers the full range of options available to young people to practice safer sex, helps them identify their own values, and increases their awareness of all available choices suitable for their needs.<sup>15</sup>

The significant increase in the age of marriage in Asian countries over recent decades<sup>16</sup> creates the need for CSE more than ever before. Over the last half-century, there has been a trend toward later marriage and less marriage throughout Asia.<sup>17</sup> Between 1970 and 2005, the singulate mean age at marriage (SMAM) for women in Indonesia rose by 4.1 years; in Malaysia, the Philippines, and Thailand, SMAM for women increased from 22 in 1970 to 25 in 2009.<sup>18</sup> Singlehood among well-educated women is on the rise across many countries in Southeast Asia and South Asia.<sup>19</sup> The conventional way of approaching SRHR as an intervention targeting married individuals becomes problematic amidst such demographic changes. In many Asian countries, access to contraceptives and SRH advice and services is difficult for singles. For example, in Mataram, Lombok, women are denied access to family planning in government clinics if they are unable to confirm that they are married. The alternative then is to seek SRH from private channels, which “requires the cooperation and discretion of a

willing doctor, midwife, or chemist and the financial resources to pay the inflated costs of contraception sold in the private sector.”<sup>20</sup> While the provision of CSE does not address the larger systemic issues that deny unmarried individuals SRH services, it can help educate individuals during school years about sexual and reproductive health, and about choices and options that are available to them. Despite the growing evidence<sup>21</sup> indicating the pressing need for CSE for young people and the global call for CSE outlined by the International Conference on Population and Development (ICPD) and legal and policy frameworks,<sup>22</sup> including six UN treaty monitoring bodies or committees,<sup>23</sup> this commitment remains unfulfilled in many parts of the world.<sup>24</sup>

### **BARRIERS TO COMPREHENSIVE SEXUALITY EDUCATION**

There are a number of complexities associated with conceptualising and implementing CSE as a systematic intervention.<sup>25</sup> Some of these complexities, such as the challenges in institutionalising CSE in schools, are tangible in nature. For example, inefficiencies arising from bureaucratic changes, decision-making, and coordination between different ministries (i.e., education, health, youth affairs, and others) can impede effective implementation of CSE.<sup>26</sup> Similarly, developing CSE curricula and context-appropriate pedagogic methods can be challenging for teachers and education administrators. Faced with the need to resort to new modus operandi in imparting skills, values, and knowledge, teachers and administrators are tasked with improving their own capacity, which requires adjustment on their part, as well as additional resources by the state. As previous studies find,<sup>27</sup> a disconnect between goals of CSE programmes and how they translate into curricular elements and pedagogy has a profound effect on the success of the intervention. Moreover, adequate funding and suitable technical assistance in programme development, selection, adaptation, and evaluation are crucial to effective CSE programmes.<sup>28</sup>

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Other complexities fall into the less tangible category, but have a profound impact on the implementation and outcomes of CSE. The centrality of sexuality in CSE, for example, stir up anxieties and panics in many cultures, as it is one of the most sensitive aspects of human experience with deeply ingrained moral values and judgments.<sup>29</sup> Related to this is the buy-in and commitment from key stakeholders (i.e., parents and teachers) and the political will of the state, which is often difficult to achieve due to reservations tied to fears about CSE fuelling premature sexual activity in young people. The effects of these reservations often spill over to affect the more tangible aspects of CSE programmes as well. For example, reservations about communicating information and messages about sexuality and reproduction may influence the content of curricula; may avoid a rights-based approach to gender and sexuality; may deliver messages that are old-fashioned and disconnected from the realities of young people; and such reservations may dilute the impact of teacher sensitisation and training programmes.

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### **RELIGION—A BARRIER TO COMPREHENSIVE SEXUALITY EDUCATION**

Religion plays a key role in producing and reproducing moral arguments against CSE which affects implementation of CSE programmes and people’s perceptions about them.<sup>30</sup> Common concerns about providing CSE include misunderstandings about the nature, purpose, and effects of sexuality education that are based on religious grounds. For most organised religions, matters of sexuality and family formation are paramount concerns, as they represent fundamental human behaviours that religions attempt to shape and control.<sup>31</sup> Drawing on historical antecedents to religious doctrine and teachings, religious institutions expound moral and ethical principles regarding the appropriate age for the onset of sexual activity, the regulation of non-marital sexual activity, contraception

and abortion, appropriate partners, rituals for recognition of marital unions, and gender roles, assigning responsibilities and obligations for child rearing.<sup>32</sup>

Religious assumptions about sexuality and family formation are effectively fused with concepts about private property and property rights that are central to modernisation processes of societies. In *The Origin of the Family, Private Property and the State*,<sup>33</sup> Engels describes the disintegration of the primitive community and the emergence of a class society based on private property. Tracing the origins of heterosexual monogamous marriage, Engels argues that monogamous marriages and the modern concept of family surfaced when the notion of private property became the basis of modern economic structures.

Bertrand Russell in *Why I Am Not a Christian*<sup>34</sup> argues that religion functions in a way that provides a moral and a spiritual basis for the economic regime of property rights. Hence, the purpose of sex is strictly limited to procreation, and only within the bounds of heterosexual marriage. The symbiotic relationship between property rights and religion is reproduced by laws and traditions that reinforce paternity. For example, norms of inheritance in the Quranic tradition have modern day manifestations, such as Section 13 and 13A of the Births and Deaths Registration Act of 1957 in Malaysia.<sup>35</sup> According to this law, if Muslim children are born within six months of marriage, they have to be registered under surnames such as “binti/bin,” which places a unique label on the child as “illegitimate.” This law stems from a fatwa which states that a pregnant woman may marry the father of the child, but that “the man cannot be recognised as the father of the unborn baby, inherit from him, nor be his *marham* (unmarriageable kin), and that he cannot be the child’s guardian.<sup>36</sup> This exemplifies how ideas of monogamy of the woman is ensured and policed (by religious norms and institutions) as a way of reinforcing paternal inheritance of property.

What we observe in recent times is an orchestrated entanglement of religious doctrine with political ideologies forming a potent combination that significantly affects women’s SRHR. Evidence from Bangladesh and India draw attention to socio-political trends with specific injunctions for sexual behaviour and gender, which in turn have profound effects on how CSE is conceptualised, implemented, and received. These trends include, but are not restricted to, religious fundamentalism,<sup>37</sup> extremism,<sup>38</sup> or conservative interpretations

of religion. Much of the literature on women’s SRHR fixates on religious fundamentalism, extremism, or conservative interpretations of religion as key determinants of regressive SRHR policy and practice. Another view that is articulated is that regressive attitudes about SRHR are linked with cultural practices, absolving the role of religion. The distinctiveness implicated in these labels and categories has limited use for the exercise undertaken by this paper. Contrary to the essentialist view that presumes fixed boundaries for a culture and a religion, and also for sub-categories within a religion (i.e., “fundamentalism” or “extremism”), this paper suggests a constructivist<sup>39</sup> view that assumes the interaction between religious and cultural structures with individuals who are the carriers, movers, consumers, and inventors of cultures and religions. Hence, religion as an institution is understood as fused with cultural norms, traditions, and political ideologies.

## INFUSING SECULARITY WITH MORALITY: SITUATING RESPONSES TO CSE WITHIN THE CONTEXT OF STATE FORMATION IN BANGLADESH AND INDIA

Two aspects of the concept of moral panic come into play in analysing reservations about CSE in Bangladesh and India: there is exaggerated discussion of the potential content and consequences of CSE, and CSE is constituted as part of a battle over moral hegemony. Underlying the concerns about CSE in these countries is collective panic about the ‘secular’ approach to sexuality education.<sup>40</sup> In either country, there is no formidable opposition to the concept of sexuality education; rather, the central issue is in the type of sexuality education that is being adopted by the state. For example, an abstinence-only type of CSE where young people are taught about the purpose and meaning of sex and its place within marriage would face hardly any obstacles in either country. But a focus on contraceptives and sex as a form of enjoyment finds strong opposition in both countries. Furthermore, CSE is often viewed as a premature exposure to the world of adults, and as a way of ‘corrupting’ innocent minds, ushering young people into teenage pregnancy, abortion, sexually transmitted infections (STIs), and mental and emotional problems.<sup>41</sup> In Bangladesh



and India,<sup>42</sup> sexuality is positioned as an issue closely linked to morality, culture, and religion. The general assumption about CSE in both countries is that the intervention lacks a moral framework ('amoral'); and it merely provides technical information about sex, contraceptive use, and sexuality-related health services. The absence of a moral framework to control human sexuality is perceived to invite deviant sexual behaviour of young people.

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Concerns over a perceived 'amoral' approach to CSE in both countries correlates with contemporary political discourse that focuses on how to reconcile the formation of the modern, secular nation state and morality. Criticism that is levelled against CSE as a 'value-free' intervention is part of the effort to be heard and maintain relevance of religious and conservative elements in the realm of secular politics.<sup>43</sup> In so doing, opposition to CSE also undermines rights, rigour, evidence, and health outcomes that form the core of CSE. Reservations about CSE carry pronounced anxieties about what it means for young people's sexuality and reproduction, particularly with an emphasis on controlling young women's sexuality. This is deeply intertwined with ideologies about womanhood in relation to nation and state. Here, women figure as agents who will hold the nation together; they are symbols of religion, nation, culture, and tradition.<sup>44</sup> Women have been invested with such a responsibility because—as is the case in many societies throughout the world—they are imagined to be at the core of the nation's moral identity. As economies liberalised and integrated into the global value chains, and women's labour became central to the production process in many developing

countries, societal concerns about women's changing roles, fertility, and monitoring and controlling female modesty and respectability have taken centre stage. Reactions and responses to CSE must be understood in this context.

Situating the evidence from India and Bangladesh on the role of religion in shaping the nature and delivery of CSE and people's perceptions of the intervention warrants an abridged mapping of structural continuities, historical contingencies, and contradictions in contemporary political culture. In Bangladesh, the rhetorical structure of nationalism is haunted by politics of memory dating back to its formation in 1971.<sup>45</sup> The 1971 war was an articulation of the struggle to establish a distinct Bengali cultural identity that superseded the Muslim identity of East Pakistan. However, given its relation to the cultural and geographic borders of West Bengal in India, territorial anxieties of the newly formed nation left open sites of contestation over the nation-state's religious identity and cultural identity. Highly charged ideological debates about nationalism have polarised society, which in turn has reduced the battle for national identity into a religious/secular dichotomy.<sup>46</sup>

Within authoritarian modes of governance, whether civilian or military, entrenched patronage politics and the use of identity politics have been commonly used for securing legitimacy. Despite having a secular Constitution, whims of the state would either instigate or extinguish Islamist politics, and tensions in Bengali nationalism also led to a hardening of identities along religious lines in Bangladesh. There has been a rise in Islamic militant groups such as *Jamiat ul Mujahedin* (JMB), *Hijbut Tahrir*, and *Hijbut Tawhid*, of which the latter two have been banned by the state. The number of religious parties, all with their own student wings, has also increased over the years<sup>47</sup> and the largest and the strongest of them—*Jamaat-e-Islami*—openly exploits religion for electoral and other political gains.<sup>48</sup> Pandering of extremist views to win elections is not confined to the quarters of religious political parties; rather, mainstream political parties that garner most votes in elections also have, from time to time, advocated with extreme religious views.

In the face of growing economic, political, and social inequalities, and dislocation of cultural norms and practices, formations espousing religious ideologies rally support under the banner of justice and a return to traditional values.<sup>49</sup> Their campaigns are often centred upon issues that directly resonate in people's lives. Theirs is a scathing critique of neoliberal society, which they condemn as producing selfish

and alienated individuals, engaged in the obsessive pursuit of pleasure. The alternative they offer is reverting to a collectivist and communalist society, where gender roles and ideas about family and community are deeply embedded in the collective consciousness.<sup>50</sup> In countries like Bangladesh, religious extremist rhetoric and actions appeal to the rural poor, particularly youth. According to a foreign diplomat in Dhaka, “in the 1960s and 1970s, it was the leftists who were seen as incorruptible purists. Today, the role model for many young men in rural areas is the dedicated Islamic cleric with his skull cap, flowing robes, and beard.”<sup>51</sup> Lintner<sup>52</sup> notes the emerging culture of violence, instigated by religious formations, especially among the young. He cautions that the role of *madrasahs* in shaping the next generation of Bangladeshis should not be underestimated.

Politicising and moralising the bodies of young people, particularly young women, is a notable trait among religious formations. Curtailing the rights of women in the public sphere, in an attempt to relegate them to reassuming their ‘natural role’ in the domestic sphere is another broad policy.<sup>53</sup> Limiting young women’s access to education as observed in countries like Eritrea, France, Malaysia, Pakistan, and Serbia is an example. In Indonesia, some Islamic boarding schools for young women have policies to restrict women’s expression, as they view women’s expression as a cause of social chaos. There is deep mistrust of schools as a place of emancipation, where young women can develop autonomy.<sup>54</sup>

Concern about women’s reproductive rights, adolescent access to sexuality education, and greater provision of contraceptives has always been an area under attack by religious groups. In Bangladesh, women’s reproductive rights is among the unifying factors of various religious orthodoxies that otherwise share divergent views.<sup>55</sup> The liberality and range on interpretation of Muslim law on reproductive issues is hence swiftly reduced to a monolithic and repressive interpretation of religious laws and religious views. Fuelling the hardening of extremist views on women is the increasing visibility of women in employment in both urban and rural settings in recent times. The moral panic caused by the movement of women to the ‘public’ sphere, conventionally a male space, is viewed as a threat to the religious and cultural status quo, and has catalysed religious opposition to women’s rights in general.<sup>56</sup> This had led religious fundamentalist groups to target independent, single working women who are perceived as transgressors of social norms. Inherently violent, these confrontations have been employed

by religious fundamentalists to convey signals to other women about the consequences of stepping out of gender boundaries. Moreover, cementing of regressive personal laws that govern rights within marriage and the household oppose the advancement of reproductive rights and gender equality, and stand in the way of women’s self-determination within the family and kinship structures. For example, as Amin and Hossain (1996) point out, the combination of men’s right to polygamy or unilateral divorce and women’s lack of alternatives to marriage, restrains women from exercising the choice not to bear children.<sup>57</sup>

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Many parallels can be drawn between Bangladesh and India with regard to state sponsorship of religious fundamentalism and its effects on women’s rights. Chhachhi notes that in India, the emergence of state-sponsored religious fundamentalism has to be understood in the broader context of the communalisation of the Indian society.<sup>58</sup> “Communalism” as an ideology inculcates the “belief that because a group of people follow a particular religion, they have as a result, common social, political, and economic interests.”<sup>59</sup> Many analyses link contemporary communalism in India to the Hindu nationalist politics of the independence movement; increasing communalism and casteism is often attributed to a combination of Hindu nationalism and the failure to foster a collective national consciousness in post-colonial India.<sup>60</sup>

The consolidation of Hindu sentiments and electoral strategies of political parties that capitalise on communalist sentiments has contributed to the construction of a hegemonic ideology that is required to maintain the legitimacy of the Indian state, and these forces share a symbiotic relationship with capitalist development-led class formations in post-independence India. Simultaneously, there are challenges to patriarchal structures of authority, arising from the demands of the capitalist labour market and the confrontations by women’s movements in the country. It is in this context of reasserting control over and re-imposing domination of women that religion, with its circumscribed roles for women, has found support from multiple quarters of state and society. The result is a contradictory tendency at the level of government

policies—on the one hand pushing for ideational force and policy prescriptions for including women in development for the purpose of drawing women into the work force, and on the other hand attempting to restrict women's access to the public sphere through legislation. Hence, fuelling communalism and infusing the state ideology with religion help keep both capitalist and patriarchal interests alive. The embeddedness of patriarchal control over and violence against women in these processes helps us situate its cumulative effects on women's reproductive rights vis-à-vis control over women's labour, sexuality, and fertility.

Control over women's sexuality as a source of morality increases the means for men to strengthen their control over the family, relegates women to the domestic sphere, and reinforces patriarchal controls over women. Part and parcel of this worldview is a firm stance against sexual expression outside of heterosexual marriage.<sup>61</sup> This stems from a concern to prohibit all non-male-dominant heterosexual forms of sexuality. Their claims for authenticity and legitimacy as the moral voice of the society rules out ideas of gender as a spectrum, and asserts gender binaries. As a result, a key target for discrimination and abuse in the name of protecting morality are gay, lesbian, and transgender people. A particular focus of politicised religious formations is shaping the minds of young people with these ideas about gender roles and gender binaries, as well as training them for particular social and economic roles.<sup>62</sup>

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As previously mentioned, young people's education becomes a crucial channel through which religious groups broadcast such messages. In Bangladesh, the ascendancy of the religious rights (since 1991) correlates with burning girls' schools, and the public space for cultural expression in performing arts, labelled secular, was constrained by threats of and actual political violence.<sup>63</sup> The arrest of Taslima Nasrin, a feminist writer from

Bangladesh whose writings on young people's issues, cultural restrictions, religious hypocrisy, and romantic and sexual relationships is another example of the religious right's attempt not to expose young minds to ideas considered as corrupt and secular.<sup>64</sup> Hindu fundamentalists in India take a similar approach in conditioning young people's minds. Training camps are conducted for children, young men, and women where they are taught about the imminent threat to the Hindu identity from foreign cultures and religions (namely Islam and Christianity) and are given weapons training for 'self-defence.'<sup>65</sup>

## HOW RELIGION INFLUENCES POLICY AND PRACTICE OF CSE

Evidence on CSE policy and practice in schools from Bangladesh and India confirm the presence of familiar tropes used by the religious right to justify control over gender roles, sexuality, and fertility elsewhere in the world.<sup>66</sup> These tropes, relating to the amoral nature of CSE content and implications for premature sexual behaviour of young people, can be seen as ideological tools that reaffirm the importance of the traditional family, fixed gender roles, and the return to an age of moral superiority and religious and cultural authenticity.<sup>67</sup>

### CSE PROGRAMME IN INDIA

In 2006, the Adolescence Education Programme (AEP)—an initiative that was aimed at empowering adolescents and youth by breaking the culture of silence around sexual and reproductive health matters, by changing attitudes and addressing gender relations—was introduced in India. The Indian school education system is segmented in three ways: 1) by level of education, 2) by ownership of educational institutions, and 3) by educational board affiliations.<sup>68</sup> There are six levels of school education: pre-school, kindergarten, primary school, middle school, secondary school, and higher secondary school. Ownership of schools in India is either by the state (central/state/local) or by private entities (individuals/trusts/societies). Most schools in India (78%) are owned by state entities.<sup>69</sup> The school system falls under the purview of the National Council of Educational Research and Training (NCERT), an apex body of the state. The primary objective of NCERT is to support the Ministry of Education

and Social Welfare in implementing policies and major educational programmes in schools. The various curriculum bodies governing the school education system are: national boards, the Council of Indian School Certificate Examinations, state government boards, and the National Institute of Open Schooling.<sup>70</sup> The Central Board of Secondary Education (CBSE), established in 1962, is the state board that provides affiliations to both public and private schools, and in 2014, 15,167 schools had CBSE affiliation.<sup>71</sup>

Upon the introduction of AEP to CBSE, 12 state governments resisted its implementation, arguing that such a programme would corrupt young minds.<sup>72</sup> The logic of their resistance, which eventually led to a ban of AEP in a number of states, was based on the fear of premature sexual activity of young people, which was viewed as corruption of Indian culture and traditions.<sup>73</sup> Facing heavy opposition by conservative and religious groups on the content of AEP, a separate committee of the *Rajya Sabha* (Parliamentary Petitions Committee 2007) comprising members of various political parties was appointed in 2007. After a long-drawn process of debate over the content of AEP,<sup>74</sup> the committee's decision to revise the content of the programme led to a temporary halt in the momentum built for AEP's implementation. The basis of the committee's ruling was that sex education has no place in India's social and cultural ethos.<sup>75</sup>

### CSE PROGRAMME IN BANGLADESH

In Bangladesh, the Ministry of Education introduced Adolescent Family Life Education (AFLE) in three textbooks in the secondary school curriculum in 2012. The education system in Bangladesh is structured in three tiers: primary, secondary, and tertiary. While the majority of schools are owned by the state, a significant number of *madrasahs* and NGOs also run schools.<sup>76</sup> The National Curriculum and Textbook Board (NCTB), an autonomous organisation under the Ministry of Education (MOE), is responsible for the renewal, modification, and development of the curriculum, as well as the production and distribution of textbooks at all levels of education.<sup>77</sup> Religious schools in Bangladesh fall under the non-state sector; however, their activities (i.e., curricula) follow government regulations as prescribed by the Madrasah Education Board (MEB).<sup>78</sup> The AFLE programme was implemented at the NCTB level, and the MEB was expected to adopt the inclusion of material on sexual and reproductive health in the textbook on physical education and health.<sup>79</sup>

This initiative was faced with opposition carrying arguments similar to AEP opponents in India. Organised groups of parents argued that boys and girls do not need to know the information given by AFLE prior to reaching the legal age of marriage, insinuating that such knowledge would expedite sexual activity among their children. The MEB deployed delay tactics in distributing the textbooks until 2014.<sup>80</sup> Heavy censorship of the textbooks was undertaken during the year; content on physical and emotional changes that occur in boys and girls during puberty, visuals of reproductive organs, and information on the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) were removed in the edited version.<sup>81</sup> The censorship of CEDAW in the *madrasah* edition of the textbooks is an example of exercising the sovereignty of *madrasahs* as a non-state entity. While they are not under legal obligation to recognise rights enshrined in international law, the omission of CEDAW can be interpreted as reaffirming precedence of religion over secular, international human rights commitments, and undermining the principle of gender equality in CEDAW.

### CONCERNS ABOUT CSE IN BANGLADESH AND INDIA

In both countries, the opposition to the CSE initiative was based on two inter-connected fears. First, the explicitness of material that challenges conventional ideas about SRHR, and second, the fear that young people, especially young women, equipped with this knowledge, will be lured into sexual activity before marriage. Identifying how these inter-connected fears play out and are articulated across various constituencies—state officials, parents, and young adults—helps understand how cultural and religious essentialisms fused with patriarchy, percolate both vertically and horizontally in the social organisations of nation-states. While AFLE was integrated into the public-school curriculum without revisions, the broader message of the programme was to advocate an abstinence-only policy, particularly for women and girls, in line with preserving ethics and morals defined by religion and culture. A member of the National Curriculum Coordination Committee (NCC) in Bangladesh confirms the omission of information on topics of sexuality and reproduction on the basis that explicitness in details on these topics is culturally insensitive.<sup>82</sup>

*“Although Adolescent Family Life Education is meant to provide information on physical, mental, social, and moral behavioural changes and development at different stages in their lives, keeping in mind the cultural context, we*

*could only touch upon (not in detail) puberty, menstruation, age of marriage, right age for pregnancy, problems of early marriage, problems of early fertility, relationships, prevention of and protection from HIV/AIDS, common Reproductive Tract Infections and Sexually Transmitted Diseases etc. Topics such as sexuality, sexual and reproductive anatomy and physiology with body image, safe sex methods, etc., have been excluded.”*

The data from Bangladesh suggest that the fear is in young people understanding their own bodies and natural processes, and in the repercussions of it (i.e., ejaculation in men, increase in the size of breasts in pubescent girls).<sup>83</sup> Sexual diversity is criminalised<sup>84</sup> and socially unacceptable in Bangladesh, hence content regarding LGBTQI orientation and relationships were excluded.<sup>85</sup> The 2013 edition of the *madrassa* textbook went to the extent of omitting sections on physical changes that occur in pubescent boys and girls, psychological changes relating to puberty (i.e., attraction towards opposite sex and interest in sexual intercourse, and others), and a diagram showing reproductive organs. These measures indicate the disapproval of rational and scientific ideas and information on the human body and its processes, as they are likely to challenge religious norms about the same issues that are based on belief and faith.

In India, while 89% of the respondents<sup>86</sup> considered sexual attraction between men and women as natural and supported young people seeking information about sexuality, there were concerns that ‘free-rein’ on sexuality may endanger social norms such as caste-based marriages. Preserving one’s own social group was important to most, even for the highly educated:<sup>87</sup>

*“I am not okay with love marriages, particularly with inter-caste marriage. Even though I am well educated, occupy a good status in the community, and get a decent salary, because I belong to the lower caste strata I am ill-treated; and people in society talk very badly about me, as I had a love marriage.” – College Professor, India*

The fear that underlies this statement is that of ostracism by one’s own social group. The inability to control young people’s sexuality is perceived to disrupt status quo arrangements of social institutions (i.e., marrying within one’s own caste or religion), which in turn leads to alienation by one’s own social group. In both countries, reservations about explicit details about sexuality and reproduction presented by CSE

programmes, are deeply connected to its perceived effect on disruption of status quo social institutions. Hence, there is an underlying preference for disciplining girls and boys vis-à-vis censorship of information and knowledge, and by making only one form of knowledge (i.e., religious teachings in the case of Bangladesh) available to them. This disciplining and control is particularly acute for girls. As one Christian pastor in India notes: “Inter-religious love marriages were also tolerated as long as the girl converted to the religion of the boy.”<sup>88</sup> This statement signifies anxiety about what CSE’s framing of sexuality and reproduction (i.e., sex as a right and a form of enjoyment) would mean for women’s behaviour and conduct.

The gendered enforcement of sexual abstinence is a form of patriarchal control reinforced by culture and religion and remains central to religious politics. It is linked both conceptually, and in practice, to material and psychological preservation of a collective race, religious, caste, or geographic identity. As Barbara Einhorn notes, women are denoted as ‘bearers’ of their families, communities, and their nations. This view assigns moral virtue and social norms to women as ‘representatives’ of the identity group or the nation at large, to reproduce identity in biological and cultural terms. Tied to this is a deep-seated insecurity and suspicion that women, given ‘free-rein,’ “may choose to express their sexuality” or “procreate with the ‘wrong’ men.”<sup>89</sup> Concern over inter-caste or inter-religious marriages, as evident from the survey in India,<sup>90</sup> is a manifestation of the fear of a diluting identity (religious or communal), the preservation of which is unfairly placed on women. Women’s increasing visibility in the public sphere (i.e., labour force, political institutions, etc.), as evident in both countries, thus causes moral panic about impending threats to identity politics. Hence, reinstating control over women through a variety of mechanisms is currently underway in Bangladesh and India.

The societal construction of the ‘good’ woman and the ‘bad’ woman based on cultural and religious edicts and norms is one such mechanism. Religious leaders interviewed in the study in India referred to a norm *Thaguthiyana vasthiram*, a strict dress-code only for women and girls to cover the curves of their bodies, as an important aspect of protecting family honour and respect.<sup>91</sup> Both Hindu and Christian religious leaders quoted holy scriptures to validate this norm. The constructs of honour and respect is modulated by a gender construct under which women, and particularly their sexual activities, represent the honour of the family, and men are considered the protectors of

this honour. As the following quote by a Hindu priest suggests, “people fear a lot for society, they cannot handle shame or a bad name for the family,”<sup>92</sup> reputation is a strong conservative force, controlling, to differing extents, everyone in South Asian societies. Related directly to male pride, a girl or a woman is a symbolic vessel of male honour; therefore, her behaviour and conduct are considered to reflect upon her male family members. While this moral code of conduct gives a false sense of acceptance and belonging to the ‘good’ woman (or girl)—one that abides by the code—it justifies violence against the ‘bad’ woman who shows signs of defiance of male power.<sup>93</sup>

Another trope that is evident in the data from both countries is the idea that women’s sexuality being her own ‘fault.’ On the topic of personal safety during puberty, the clear message was that girls are to exercise preventative methods in avoiding sexual and physical violence. The following explicit instructions were provided for females in the Grade 7 textbook in the Bangladesh public school system:<sup>94</sup>

*“Do not wear types of outfits that attract others.”* – Home Science Textbook, Grade 8 (2015), Bangladesh

*“Do not instantly react to the harassment towards you by any depraved group of persons. Try to ignore them tactfully. Instead of threatening to throw sandals at them or slap them, try tackling the situation wisely without scolding them loudly or creating an uproar.”* – Home Science Textbook, Grade 8 (2015), Bangladesh

Prevention or self-defence of rape, sexual assault, or harassment misplaces the burden of the crime on the women who are attacked and not on the perpetrator. Shifting the burden to women entails a problematic assumption about women’s complicity in violence. Advice on not reacting to harassment or violence reifies an endorsement to misogynist and masculine norms of socialisation in men, and the reinforcement of heteronormative and hierarchical gender order.

Integral to control mechanisms, such as the expectation of maintaining virginity until marriage, are ideas of purity. In this context, the ‘purity’ of the woman becomes a reflection of the purity of the larger collective she belongs to (i.e., caste, class, etc.),<sup>95</sup> which thereby institutes legitimacy for quelling (often through violence) any kind of dissent. The emphasis on maintaining cleanliness and purity in CSE

textbooks is noteworthy in this context. The *madrasah* textbooks in particular discussed the importance of bathing and cleansing for women after menstruation, or after intercourse, to ‘purify’ themselves before prayer.<sup>96</sup> The same is prescribed for men after ejaculation.<sup>97</sup> Such rituals situate natural physical processes and acts of sex in an ideological frame, whereby control over sexuality is made easy. It also bars women from prayer and the inner sanctums of holy places in orthodox religions, by demeaning a natural aspect of femininity. Practised over millennia in multiple religions, this view which embeds a form of patriarchal control carries a demoralising effect on women’s self-worth, based on devalorising their physical processes. This evidence renders the outlook of experts involved in curriculum development of CSE programmes in Bangladesh on concepts of gender and sexuality. While this is indicative of gendered social norms seeped in patriarchy that permeates society at large, it provides food for thought on the type of experts that ought to be considered for curriculum development. While there is value in consulting education specialists with long years of experience, involving experts on gender, adolescence, and life skills development for curriculum development may be a worthwhile future strategy.

Given the ideas surrounding the purpose of CSE discussed above, it is hardly surprising that in both Bangladesh and India, SRHR in general and CSE in particular, is considered to be women’s domain:<sup>98</sup>

*“We should provide CSE. Actually, it is more beneficial to girls than boys, in terms of preventing unwanted pregnancies, abortion, and sexually transmitted infections.”*  
– A Christian female respondent, India country report

Claiming that “CSE should be for girls”<sup>99</sup> is another way of reinforcing existing gender roles, whereby men dominate the productive (or the public) sphere, and tasks of the reproductive sphere are relegated to women. While CSE was considered ‘female territory’ there were strict reservations, especially of parents, regarding the content of the programme. For example, many disapproved the provision of information about contraception and abortion. In a focus group discussion with Hindu women, one woman expressed, “if contraceptive and abortion services are easily available, they will freely/boldly (*tunivaga*) indulge in mistakes before marriage.”<sup>100</sup> Parents and religious figures from Muslim and Christian communities expressed similar sentiments.<sup>101</sup> Acknowledging the importance

of CSE for girls, strict control over CSE material that warrants sharing of only socially-accepted information, and the panic induced by publicly discussing issues of sexuality and reproduction, are all signs of the interplay among patriarchal forms of social control embedded in the simultaneous processes of development, democratisation, and modernity.

At the heart of the contestation described above appears to be a “culture of war” of “incompatible moral worlds”<sup>102</sup> between ‘secular’ and ‘amoral’ CSE and a type of sex education, imbued with morality, that is perceived as far superior. For example, for those who oppose CSE in both Bangladesh and India, the appropriate time and place for sex is only within a heterosexual marital relationship, whereas CSE’s emphasis is on “safe sex” regardless of whether one enters the institution of (heterosexual or homosexual) marriage. CSE does not make moral judgments about non-marital sex, nor does it endorse the view that the purpose of sex is procreation. CSE’s position on sex as a human right, for both hetero- and homosexuals is another ideological point on which the two sides collide. Simply put, educating youth on engaging in non-exploitative, consensual, and less-risky sex is the principal goal of CSE. Despite the ostensible goals of CSE, the opposed moral foundations have set the proponents of CSE and its opponents in both countries on a continuous battle, not over what is effective or what works for young people, but what is right.

The manifestations of this ideological battle in school classrooms seriously hinder the quality of CSE delivered to students. First, students’ perception of CSE content is that it is insufficient, normative, and removed from the reality of young people.<sup>103</sup> In Bangladesh, students pointed out unhelpful definitions of reproductive concepts in their textbooks. The definition of “reproductive health” is stated as “health issues of those organs which are directly related to reproduction.”<sup>104</sup> And pregnancy is defined as:<sup>105</sup>

*“a condition which occurs when a female conceives. During sexual intercourse, when a male sperm succeeds in fertilising a female ovum (egg), a baby is conceived in the female womb.”* – Grade eight text book, Bangladesh

The reservations about making reproductive concepts explicit are clearly demonstrated by these definitions. However, students overwhelmingly expressed that these definitions are of limited use to their understanding of reproductive health.<sup>106</sup> This situation is worsened by the reality that many parents also

resist speaking to their adolescent children about sexuality and reproduction. While some parents are uncomfortable speaking explicitly about sexuality and reproduction to their children, others resist it altogether. Parent groups that opposed the inclusion of CSE into school textbooks in 2013, expressed fear that information delivered by CSE may lead to premature sexual activity in young people.<sup>107</sup>

Second, the classroom environment does not seem conducive to open discussion about sexuality and reproduction. In Bangladesh, students complained that the teachers did not invite questions from students:<sup>108</sup>

*“What does sexuality mean? The teacher, including the whole class, looked down at me in a way that after that incident I never asked questions in the class although I want to know what happens to boys as they change physically, like a girl experiences menstruation every month.”* – Girl, 15 years, co-education school, General education, Bangladesh country report

This statement depicts an unhelpful learning environment that discourages critical thinking and discussion among students. Reactions to students’ questions appear to have a gendered texture. For example, in Bangladesh, teachers were not as hostile or aggressive when boys asked questions in comparison to when girls queried about reproductive concepts.<sup>109</sup>

Third, in the absence of a specialised teacher training programme and support from the rest of the school community and parents, teachers found themselves grappling with conflict between their own beliefs and values about sexuality and reproduction and CSE approach and content. An easy fallback option adopted by many teachers is advising students to learn the material in an individual capacity:<sup>110</sup>

*“We teachers can’t do anything. We need the support of others such as principal, parents, and community. It is very hard to convince people that reproductive health education is important for adolescents. It is believed that this kind of information can spoil their children. I say to them: ‘It’s very easy, read it by yourself, and only ask me if there is any difficulty.’”* – Female teacher, co-education school, General education

Teachers who attempted to deliver CSE content in a comprehensive manner faced difficulties in engaging the students in discussion.<sup>111</sup> Specifically, they pointed to the lack of skills and strategies that could be employed to facilitate a lively discussion. Other teachers feared that their attempts to cover the CSE material thoroughly may cause backlash from their peers with conservative views about sexuality and reproduction.<sup>112</sup>

While teachers in the public (secular) school system faced a combination of difficulties in teaching CSE material, teachers from the *madrasah* system disapproved of the rights-based approach of CSE. For teachers in *madrasahs*, CSE content was redundant and even harmful, and all the information that is necessary to understand sexuality and reproduction already existed in religious texts:<sup>113</sup>

*“Using the Quran and Hadith would encourage students to view these texts as their first source of information and answers to their questions. I agree, these students need to know that they can get the information they want from the Quran and Hadith rather than different sites in the Internet! There are some issues that are forbidden in Islam but they too have to be thought about, such as homosexuality. This information can come straight from the Quran . . . there’s no better way to do it.”* – Female teacher, co-education, Madrasah Education

This preceding account on how CSE content plays out in the classroom calls for new approaches to teaching CSE in schools. The “Whole-school Approach”<sup>114</sup> provides a useful framework to overcome the obstacles faced by students and teachers in Bangladesh and India. The Whole-school Approach started in 2012 in 12 schools in Kenya and Uganda and has been effective in teaching more students high-quality sexuality education and in building support from school staff and parents for maintaining CSE curricula.<sup>115</sup> This approach calls for consultation and working in partnership with parents, elders, and the school community, accessing community resources, and involving students.

Adopting critical pedagogy may be useful in the flow of communication and learning between teachers and students in the classroom. Theoretically, critical pedagogy “embodies the practice of engaging students in the social construction of knowledge, which grounds its pillars on power relations.”<sup>116</sup> This approach calls for teachers to question their own

practices in the process of constructing knowledge and why the main knowledge is legitimised by the dominant culture or religion. Critical pedagogy is found to be a liberating force that challenges ideas about sexuality and reproduction as not being politically neutral, observing that perspectives and interpretations of what constitutes these concepts are ultimately political. In practice, following critical pedagogy, teachers must reconstruct their classrooms as a three-pronged discourse structure: 1) the curriculum must be founded upon students’ interests, cultural needs, and community empowerment; 2) dynamics of classroom interaction must focus on participation and skills in dialogue; and 3) space for critique and reflection among students and teacher must be created.<sup>117</sup> While tailoring the Whole-school Approach and critical pedagogy methods to the context of these countries is crucial, CSE developers must be mindful to include granular analysis of gender and power relations in framing discussions about sexuality and reproduction.



## CONCLUSIONS



This thematic paper has discussed the realities associated with operationalising the global commitment to attain universal sexual and reproductive health and rights for women and girls, as underscored by the 2030 Agenda for Sustainable Development. The barriers that young people face in making appropriate decisions on reproduction are many and varied; they are intertwined, and inexorably steeped in patriarchal gender relations. Comprehensive Sexuality Education (CSE), an integral part of SRHR, is a challenge due to multiple political economic arrangements in which religious and cultural beliefs and practices are deeply embedded.

In the two countries discussed in this paper—Bangladesh and India—response to, and the implementation of, CSE in schools in Islamic and Hindu contexts have revolved around the following contentions: the framing of CSE as a ‘secular’ and hence, ‘value-free’ approach to educating young people about sexuality and reproduction, has led to the salience of anxieties about CSE’s effects—premature- and pre-marital sexual relations (especially of women). This framing has been found to influence people’s perceptions and responses to CSE. These contentions, however, must be read against the wider context that informs the background of this paper, that is, the preoccupation of identity politics with women’s bodies. Socio-political shifts with religious overtones tend to view women and girls as mere vehicles for reproduction. CSE is perceived as an influential force that may lure young people (especially women) away from modes of power and control exercised by religion.

Solutions that address the barriers to the successful implementation and uptake of CSE are complex. The evidence from Bangladesh and India suggests that improving existing CSE programmes, scaling up, and effective uptake requires adaptability of CSE content, relevant to the current political, economic, social, and cultural contexts.<sup>18</sup> This adaptability should involve communicating messages that religions convey around gender, sex, and sexuality, and critically engaging with them. Critical engagement with these messages should invariably include in-depth discussions about the kind of morality that is being proliferated by CSE. Without reverting to the ‘value-free’ label that has been attached to CSE,

discussions about CSE must instead focus on the value systems that are deployed by CSE and the current practice of sexuality education. As parents and families play a key role in shaping attitudes, norms, and values related to gender roles, sexuality, and status of adolescents and young people in the community, a concerted effort must be taken to include and engage with these groups.

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Lastly, advancing women’s rights in both countries requires states to adopt a rights-based and gender-sensitive perspective when formulating and implementing policies and programmes. The state has a responsibility to show zero tolerance towards rhetoric, demands, and actions of religious formations that undermine women’s rights to their bodies and young people’s right to access comprehensive sexuality education. State authorities have an obligation to consult women’s rights organisations, youth-led organisations, health experts, and civil society organisations when drafting policies, especially those that have direct implications on the health, wellbeing, and rights of women and girls, including their SRHR, and ensure transparency of the adoption and implementation of public policies that have implications on the health and wellbeing of women and the family. The political will of the state in fulfilling its obligation to the citizens is particularly important. The fourth estate—the Media—has a responsibility to promote CSE as an intervention that imparts fundamental life skills that have defining effects on young people’s lives.

*The state has a responsibility to show zero tolerance towards rhetoric, demands, and actions of religious formations that undermine women’s rights to their bodies and young people’s right to access comprehensive sexuality education.*

## RECOMMENDATIONS

While a long-term approach to SRHR is imperative, it must be supplemented with ‘quick-win’ strategies,<sup>19</sup> as broader societal changes take time, time that millions of young people without access to CSE do not have. This final section of the paper identifies key policy and programme measures that could help improve implementation and uptake of CSE.

### 1. Adopting a Whole-school Approach to CSE in schools.

- Building knowledge and ownership of CSE in schools by including a variety of stakeholders in design and the related process of having CSE: students, teachers, parents, community elders, and progressive religious figures.
- Engaging men and boys within all spaces, including in schools, to discuss issues of sexuality and reproduction that they grapple with, as well as issues related to equality, empowerment, SRHR, and human rights.
- Building partnerships with community information and service-related resources (i.e., sexual violence hot lines, family planning services, HIV and AIDS support services, etc.) to expand the support system available for young people.
- Building partnerships with NGOs and research organisations, to inform curriculum development of CSE.
- Considering and implementing strategies that ensure all students attend CSE courses, that they are not allowed to opt out of them, including options for assessing learning on CSE (as opposed to a voluntary subject).

### 2. Adopting critical pedagogy methods to stimulate discussion and dialogue on religious and socio-cultural norms about gender and sexuality.

- Religious and cultural norms with specific injunctions on sexuality and reproduction must be discussed and challenged.
- Heteronormativity, gender roles, and gender stereotypes must be challenged. Dominant ideas about ‘masculinity’ must be challenged, and men and boys must be involved in these programmes.

### 3. Building capacity of teachers to deliver CSE.

- Training on critical pedagogy methods to teach CSE content.
- Improving skills of teachers to engage students in discussing content outlined by CSE programmes.
- Training teachers to be mindful of and articulating their own biases, values, and attitudes towards concepts covered by CSE.
- Training teachers to practice reflection of their own reactions to students’ questions, and creating peer support groups to discuss ways to handle such circumstances in ways that are useful to students.
- Involving NGO workers well acquainted with CSE material to deliver lectures on key topics.
- Carrying out temporary segregation of classes by gender to teach CSE as an initial step for teachers to overcome their fears and reservations in teaching co-ed classes.
- Taking special measure to include people who are expert in CSE, life skills development, and gender issues in the curriculum review/development committee.
- Making CSE a compulsory subject for teachers in training college curricula.

### 4. Initiating research on analysing religious texts to arrive at multiple progressive interpretations of women’s SRH.

Lastly, and as a long-term step, advocacy strategies to promote CSE and overcome religious and cultural barriers in order to successfully implement programmes at the national level requires building stronger and more inclusive coalitions and social movements (which include youth-led organisations) for SRHR at the local, regional, and national levels. Evidence from Bangladesh and India indicate new opportunities for people-centred advocacy at all levels of governance. It is important that these opportunities include meaningful youth participation as a central component. Some strategies that may empower young people to be a part of CSE decision making are as follows:

- Engage young people constructively in all layers of decision-making and in the research, design, planning, implementation, monitoring, and evaluation of programmes;
- Foster democratic youth-adult partnerships in decision-making on CSE;

- Make opportunities available for young people to build their capacities, and adopt management styles that facilitate young people's agency.

Holding decision makers and service providers accountable is another entry point for advocacy. Monitoring legal and policy developments, making budgetary allocations for CSE, and establishing mechanisms for increased engagement between civil society actors and decision makers would enable open dialogue on SRHR issues.

## ENDNOTES

- 1 The World Health Organisation (WHO) defines young people as those aged 10-24 years, while adolescents are defined as those aged 10-19 years.
- 2 United Nations Office of the Secretary-General's Envoy on Youth, "10 Things You Didn't Know About the World's Population," 2016, accessed December 18, 2016, <http://www.un.org/youthenvoy/2015/04/10-things-didnt-know-worlds-population/>.
- 3 The Asian-Pacific Resource and Research Centre for Women (ARROW) defines SRHR as follows: **Reproductive health** implies that people are able to have a responsible, satisfying and safe sex life, and that they have the capability to reproduce and the freedom to decide if, when, and how often to do so. **Reproductive rights** rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. It also includes their right to make decisions concerning reproduction free of discrimination, coercion and violence, as expressed in human rights documents. **Sexual health** implies a positive approach to human sexuality and the purpose sexual health care should be the enhancement of life and personal relations, as well as counselling and care related to reproduction and sexually transmitted diseases. **Sexual rights** include the right of all persons to be free of coercion, discrimination and violence, to obtain the highest attainable standard of health in relation to sexuality, including access to sexual and reproductive health care services; to seek, receive and impart information in relation to sexuality; to sexuality education; to respect for bodily integrity; to choice of partner; to decide to be sexually active or not; to consensual sexual relations; to consensual marriage; to decide whether or not, and when to have children; and to pursue a satisfying, safe and pleasurable sexual life. See: Sivananthi Thanenthiran and Sai Jyothir Mai Racherla, *Reclaiming & Redefining Rights: ICPD+20: Status of Sexual and Reproductive Health and Rights in Asia Pacific* (Kuala Lumpur: ARROW, 2013), 17, [http://arrow.org.my/wp-content/uploads/2015/04/ICPD-20-Asia-Pacific\\_Monitoring-Report\\_2013.pdf](http://arrow.org.my/wp-content/uploads/2015/04/ICPD-20-Asia-Pacific_Monitoring-Report_2013.pdf).
- 4 United Nations Office of the Secretary-General's Envoy on Youth, "10 Things You Didn't Know about the World's Population."
- 5 International Planned Parenthood Federation (IPPF), *Fulfil! Guidance Document for the Implementation of Young People's Sexual Rights* (London: IPPF., n.d.), accessed May 10, 2017, <http://www.ippf.org/sites/default/files/2016-09/Fulfil%21%20Guidance%20document%20for%20the%20implementation%20of%20young%20people%27s%20sexual%20rights%20%28IPPF-WAS%29.pdf>.
- 6 Ibid.
- 7 Janice M. Irvine, *Talk About Sex: Battles Over Sex Education in the United States* (CA: University of California Press, 2004); United Nations Population Fund (UNFPA), *Women, Faith and Human Rights* (2016); Association for Women's Rights in Development (AWID), *Towards a Future Without Fundamentalisms: Analysing Religious Fundamentalist Strategies and Feminist Responses* (Toronto, Mexico City, and Cape Town: AWID, 2011); AWID, *Understanding Religious Fundamentalisms for Activists* (Toronto, Mexico City and Cape Town: AWID, 2013).
- 8 Bangladesh, Egypt, India, Indonesia, Malaysia, Maldives, Morocco, Pakistan, the Philippines, and Sri Lanka.
- 9 According to the International Planned Parenthood Federation (IPPF), "CSE seeks 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. It views sexuality holistically and within the context of emotional and social development. It recognises that information alone is not enough. Young people need to be given the opportunity to acquire essential life skills and develop positive attitudes and values. CSE covers a broad range of issues relating to both the physical and biological aspects of sexuality, and the emotional and social aspects. It recognises and accepts that all people are sexual beings and is concerned with more than just the prevention of disease or pregnancy." See: IPPF, "IPPF Framework for Comprehensive Sexuality Education (CSE)" (London: IPPF, 2006), 6.
- 10 Sexuality Information and Education Council of the United States (SIECUS), *Guidelines for Comprehensive Sexuality Education*, 3rd Edition (Washington, D.C.: SIECUS, 2004); IPPF, *From Evidence to Action: Advocating for Comprehensive Sexuality Education* (London: IPPF, 2012).
- 11 IPPF, *From Evidence to Action*.
- 12 On sexual and reproductive rights, information to dispel myths, and references to resources and services. See: IPPF, "IPPF Framework for CSE," 6.
- 13 Such as critical thinking, communication and negotiation skills, self-development skills, decision-making skills, sense of self, confidence, assertiveness, ability to take responsibility, ability to ask questions and seek help, and empathy. See: IPPF, "IPPF Framework for CSE," 6.
- 14 Such as open-mindedness, respect for self and others, positive self-worth/esteem, comfort, sense of responsibility, positive attitude toward their sexual and reproductive health. Ibid.
- 15 Ibid.
- 16 Author unknown, "Changing Marriage Patterns in Asia," a paper presented at session 154 "Changing Demographic Landscape in Asia" at the 26th IUSSP International Population Conference, Marrakech, Morocco, September 28, 2009.
- 17 Gavin W. Jones, "The 'Flight from Marriage' in East and Southeast Asia," *Journal of Comparative Family Studies*, 36, no. 1 (2005): 93-120; Gavin W. Jones and Bina Gubhaju, "Trends in Marriage in the Low Fertility Countries of East and Southeast Asia," *Asian Population Studies*, 5(3), 2009.
- 18 Author unknown, "Changing Marriage Patterns in Asia."
- 19 Ibid.
- 20 Linda Rae Bennett, *Women, Islam and Modernity: Single Women, Sexuality and Reproductive Health in Contemporary Indonesia* (London: Routledge Curzon, 2005).
- 21 Doortje Braeken, Tim Shand, and Upeka de Silva, *IPPF Framework for Comprehensive Sexuality Education (CSE)* (London: IPPF, 2010).
- 22 The Convention on the Rights of the Child, the International Covenant on Economic, Social and Cultural Rights, the Committee on the Elimination of Discrimination Against Women (CEDAW), and the Convention on the Rights of Persons with Disabilities illustrate the international legal commitment to CSE. International agreements such as the ICPD in 1994, the Fourth World Conference on Women in 1995 and the World Summit on Children in 2002 have extended the scope of the Convention on the Rights of the Child (CRC), by affirming the right of all children and adolescents to receive sexual and reproductive health information, services and education in accordance with their specific needs. These commitments are mentioned in many regional policy documents such as the 2005 Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa (also known as the Maputo Protocol), and the 2008 Latin American Ministerial Declaration

- articulating a commitment by all countries in that region to provide sexuality education. See: United Nations Youth, n.d., "Youth and Comprehensive Sexuality Education," <http://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-sexuality-education.pdf>.
- 23 Statements relating to sexuality education were made by six UN committees between January 1993 and June 2007. They are: the Committee on the Elimination of Discrimination Against Women (CEDAW committee); the Committee on the Rights of the Child; the Human Rights Committee; the Committee on Economic, Social and Cultural Rights; the Committee on the Elimination of Racial Discrimination; and the Committee against Torture. See: Center for Reproductive Rights (CRR) (2013); "The Human Right to Information on Sexual and Reproductive Health: Government Duties to Ensure Comprehensive Sexuality Education" (New York: CRR, 2008).
- 24 S.J. Jejeebhoy, A.J. Xavier, and K.G. Santhya, "Meeting the Commitments of the ICPD Programme of Action to Young People," *Reproductive Health Matters* 21, no. 41 (2013): 18-30.
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## **Coming of Age in the Classroom: Religious and Cultural Barriers to Comprehensive Sexuality Education**

This thematic paper is an initiative of a regional partnership working on building the interlinkages of religion (fundamentalisms and extremisms) on women's sexual and reproductive health and rights (SRHR). The initiative involved generating evidence from ten countries with national partners from Bangladesh, Egypt, India, Indonesia, Malaysia, the Maldives, Morocco, Pakistan, the Philippines, and Sri Lanka.

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ARROW is a regional and non-profit women's NGO based in Kuala Lumpur, Malaysia, and has consultative status with the Economic and Social Council of the United Nations. Since it was established in 1993, it has been working to advance women's health, affirmative sexuality and rights, and to empower women through information and knowledge, evidence generation, advocacy, capacity building, partnership building and organisational development.

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