SECTION 1

Introduction

Comprehensive Sexuality Education (CSE) emphasizes a holistic approach to human development and sexuality. UNESCO identifies the primary goal of sexuality education as that “children and young people become equipped with the knowledge, skills and values to make responsible choices about their sexual and social relationships in a world affected by HIV.”[1] The International Planned Parenthood Federation (IPPF) defines a rights-based approach to CSE as “to equip young people with the knowledge, skills, attitudes and values they need to determine and enjoy their sexuality – physically and emotionally, individually and in relationships.”[2] By both the definition we can see that the sexuality is not limited to the information that are provided to the young people. Indeed, it focuses on emotional and social development with proper opportunity provided on life skill with positive attitude and value.

The Federal Democratic Republic of Nepal is a secular country of multi ethnic, linguistic, and cultural minorities with population of around 29 million. September 2015 marked the promulgation of Nepal’s constitution with unanimous decision on representation and federalism. A concerted effort of cross movements for democratic reforms, and inclusion of minorities group and the political contribution of young people recognised.

The United Nations, for statistical purposes, defines those persons between the ages of 15 and 24 as youth without prejudice to other definitions by Member States[3] According to World Population Projection (2015), out of the total population, 33 % are youths (10-24 years). Adolescent Fertility rate is 71 per 1000. The median age at first marriage for female is 17 years and male is 19 years (Nepal Adolescent and Youth Survey, 2011). Also, mean age at first sexual intercourse for the age group 15-19 years is 16.24% and for 20-24 are 18.14%. The knowledge about family planning among adolescents and youth is almost universal (99.9%). However, 14.5% of married adolescent girls age 15-19 and 23.9% of married women age 20-24 are currently using a modern contraceptive method. Only 38% of women in Nepal know about the legalization of abortion and 7% of maternal mortality in Nepal is due to unsafe abortion. 97% of young men ages 15 to 19 have heard about
HIV in contrast to only 88.7% of young women of the same age group. The major sources of information for HIV for young people aged 10-24 are reported as the following: Radio 24.1%, teachers 21.1%, TV 18.1%, and friends 4.5%. HIV prevalence among young man and young women (10-24 years) is same i.e. < 0.1. 13.6% of women ages 15 to 19 years and 25.3% of women ages 20 to 24 have encountered physical violence. Men in Nepal have had an average of 2.4 sexual partners in their lifetime, consistent with that reported in the 2011 NDHS.

The current population transition provides Nepal with a window of opportunity to attain the demographic dividend as well as the targets of SDGs. However, for this opportunity to be attained requires several investments in health, education, governance and the economy. Particularly in the area of young people’s sexual and reproductive health and rights remain critical elements of a healthy population in Nepal.

Talking about sex and sexuality is taboo in our country; hence more challenging for young people to talk, explore and learn. People hesitate to accept the information and knowledge that they get no matter how much they are keen to learn. Due to this behaviour among people it is challenging for the teachers and parents to talk to the children and equally challenging for children to hear from them. Due to the cultural values and religious beliefs/practices, people pull back themselves in accepting these issues.

SECTION 2
Comprehensive Sexuality Education in the National Context

In the context of Nepal, Environment, health and population (EHP) is one the curriculum that is mandatory course for the students. In this book itself the content of Sexual and reproductive health and rights (SRHR) is included. Hence, Sexuality education is limited to reproductive health education. Sexual health is not at all conceptualized in the sexuality education and is not comprehensive as well. It does not cover all the components of CSE. The term SRHR is not introduced in a clear way and it is very limited to reproductive health and sexual health only. However, the vague components of SRHR and specifically sexuality education are untouched. While going through the course we can see the contents are driven in the “health” perspective rather than information or rights perspective.

There is no such definition of CSE in Nepalese context. However, Nepal government have tried to implement International Planned Parenthood Federation’s (IPPF) modality due to some works done by different Civil Society Organization (CSO)s. Though we lack CSE curriculum, certain component of CSE based on IPPF modality such as Gender, SRH and HIV and AIDS, some portion of diversity is included in EHP book of both public and private institution ranging from class 6-10. Basically, the book covers puberty, definition of sexuality, concept and importance of SRH, anatomy and physiology of male and female reproductive system, family planning methods, abortion, STIs, menstruation and adolescent friendly health services are also mentioned where students get information on SRH services. The information in curriculum is minimal which also lacks the information about the available, services and service sites. This has resulted in underutilization of government designated adolescent friendly health services and safe abortion sites. Besides that, the information and the languages used are inappropriate. For instance, “AIDS” is termed as a disease.

The curriculum is revised once in 5 years, which means that the information is not much updated. Due to this, the curriculum has limited information about the trending myths regarding young people’s sex and sexuality. Moreover, this is one of the reasons for the curriculum not being age-appropriate. The government has not been able to address out of school students on educating them. They are deprived from all kind of sexuality education and information.

Curriculum Development Centre (CDC) has been leading government agency to design and implement EPH curricula. Family Planning Association of Nepal has been working in CSE training manual design so they even have followed the guidelines given by IPPF. UNESCO has also designed similar guidelines regarding the sexuality education in Nepal. UNFPA is underway, to design CSE specific guidelines for Nepal. These agencies have their own prioritized and working districts so they have implemented on some districts but are not able to reach all districts of Nepal. Youth organization like YUWA are working in CSE for young people through advocacy and peer-to-peer education approach at grass root level and advocating at policy making level for age appropriate and right based CSE curriculum. INGOs like Y-PEER are also working in SRHR and CSE in Nepal for young people and youth. IPPF, ARROW and UN agencies are donor organization supporting technically and financially to CSOs and youth NGOs of Nepal.
“CSE should enable young people to get accurate and adequate information on SRHR, develop life skills and critical thinking, nurture positive attitude and values.”

SECTION 3

Comprehensive Sexuality Education According to International Standards and Where Does the Country Stand

Comprehensive sexuality has mostly been driven by 7 elements as stated by IPPF and further elaborated by ARROW and 9 elements as stated by UNFPA. The 7 elements include Gender, SRH, Sexual rights and sexual citizenship, pleasure, violence, Diversity and relationships. With no second opinion, we all believe CSE curriculum to be based on premise that sexuality is fundamental aspect of human life with several dimensions and cannot be understood without reference to gender and diversity. Moreover, CSE should enable young people to get accurate and adequate information on SRHR, develop life skills and critical thinking, nurture positive attitude and values. This has been clearly elaborated “The essence of an innovative programme for young people in South Asia: A position paper on CSE.” Unfortunately, Nepal do not have CSE curriculum and the components of CSE do not meet international standards as of IPPF, ARROW and/or UNFPA. The curriculum of Nepal explains the interrelationship between health, population and environment education. It helps in brining positive change in behavior for proper problem management and finding solutions regarding population, health and environment. In which, in the context of health, limited information is incorporated to address the relations and its status between health, population and environment education.

CSE definition and understanding include 7 elements mentioned below as described in the above publication in the context of Nepal:

- Gender Equality: Definition of gender equality with its stereotypes is well explained. Gender discrimination is addressed with changing norms and values in society among others.

- Human Rights: The concept of human rights is not mentioned in the curriculum only few topics of SRH is addressed but again in a health context rather than a rights approach.

- Sexual and Reproductive Health and HIV: HIV and AIDS is included in a disease section in the curriculum with more information on its causes, treatments and precautions. But the language that explains HIV and AIDS is completely inappropriate. Similarly, there is some information about the infections and diseases with its signs, symptoms, preventive measures with no information regarding the service accessibility and its availability. With all these in mind, the sexual and reproductive health is again underlined. It includes anatomy of reproductive organs, reproductive process, family planning methods, STIs and HIV, abortion but fails to address concept of virginity, abstinence, faithfulness, proper use of condom and other family planning devices and adequate information on adolescent friendly health services.

- Sexual rights and sexual citizenship: The curriculum has failed to address about sexual rights and sexual citizenship.

- Pleasure: Pleasure is completely missing in the curriculum.

- Violence: Violence is slightly mentioned in the curriculum but non-consensual sex or violence linked with sexuality is not addressed.

- Diversity: The diversity focuses more in cultural aspect, socio economic aspect, and demographic aspect and nonetheless HIV status and care and support they need. Nepal being community of multi ethnic, linguistic, and cultural minorities with freedom of religion choice; values, norms, cultural sensitivity are highly prioritized and perception of people towards SRHR is still not as broad as it should be and thus such perception has lead in inadequacy of CSE component in EPH curriculum of Nepal.
Relationships: Marriage, love and affections are few topics that are seen in the curriculum. However, dealing with relationship, healthy and unhealthy relationship, trust issues and friendship are still lacking that are so important for the young people to deal with during their growing age.

SECTION 4
Recommendations to Your Governments

To the government:

1. Government should design age appropriate and right based CSE curriculum only after frequent consultation with stakeholders such as adolescent and young people, youth, CSOs, NGOs working in SRHR with special focus to CSE, child psychologist, parents, teachers and other.

2. The curriculum should base on premise of sexuality as fundamental aspect of human life, gender and diversity. CSE curriculum should be designed on life skill approach where students can transform theoretical information into practice and can lead to change in behaviour towards safe sexual and reproductive life.

3. The curriculum should include adequate information on all element of CSE and not just focusing on SRH.

4. CSE should be mentioned as an intervention and strategies of National Adolescent Health and Developmental Strategy. The education policy of Nepal should specify CSE as an approach in policy and program.

5. Sexuality education should not be limited to young people in school. CSE can be very successful among out-of-school young people by disseminating information through local health facilities, adolescent friendly health service sites, radio, television, internet, mobile phones, text messaging and setting up hotlines.

6. Train and monitor the teachers and provide them resources on CSE and other relevant issues.

7. We recommend CDC to develop CSE monitoring framework to monitor and supervise effective and qualitative delivery of sexuality education.

8. Mobilization of child clubs and informal groups can be an asset in order to provide information and knowledge to the school going young people and out-of-school young people.

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Organization’s Profile
LOOM
Founded in 2010, and registered at the Social Welfare Council as a Non Profit, LOOM is a feminist space that interconnects with multi generations of women through weaving our stories, threading our dreams, and gearing towards the change we aspire. For us, LOOM is a weave of feminist struggle that facilitate individuals, organisations and groups of women of all ages, diverse identities and backgrounds to amplify (in their own unique forms) their rights, address their concerns and ensure that their participation imposes structural and fundamental change in the socio-economic transformation of their community.

LOOM adopts a multi-generational approach entwined with intersectional analysis to build local feminist activism by recognising and strengthening initiatives of women in diverse capacities through interlinking generations of feminists, advocating for bodily politics and bodily freedom, and transforming leadership of women at contentious space of both private and public.

YUWA
YUWA is youth led youth run organization established in 2009. The initial focus was to develop leadership skills of the involved youths or to get trained as a youth activist and advocate for change, thus resulting into a wide and diverse array of knowledge, skills and experience in this sector. It led to the realization of the seriousness of youth issues and the need to act, which, finally took shape of YUWA. YUWA envisions youth as indispensable change agents and valued partners in decision making at all levels. YUWA’s mission is to empower youth and strengthen their involvement at all level of decision making. YUWA provides common platform for young generation and encourages meaningful participation of young people from planning process to implementation.

Since its establishment YUWA has been working with young people and youth and Sexual and Reproductive health and rights thematic area particularly focusing to young people and youth. Reaching out young minds (a day HIV and AIDS workshop), HIV Micro project, Khulla Akash (discussion program on SRHR issues), Radio program, Peer to peer
education on Comprehensive sexuality education to adolescent, different formal and informal orientation program on sexual orientation and Gender identity are being conducted targeting young people and youths. YUWA has been working from grass root advocacy (campaigns, street drama, blogathoon, orientation program, Peer education, competitions, petitions) to policy level of advocacy (Issue brief, policy brief, EPH curriculum white paper, conferences, high level meeting with line agencies and policy makers meet) and has been able to come up with visible and impactful changes in the field of SRHR.

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