Forum: The United Nations Entity for Gender Equality and the Empowerment of Women (UN Women)

Issue # 7-01: Measures to promote and implement effective sex education in issues relating to human sexuality.

Written by: Junhyoek Kim, Jezabel Lopez, Maria Clara Quihillalt

Chairs: María Clara Quihillalt and Jezabel Lopez

Introduction

Having correct knowledge of sexual education is critical in an individual's life. It helps individuals prevent unplanned pregnancies and protect themselves from any diseases and infections that may come along. According to the sexuality information and education council of the United States, sex education should include age-appropriate, medically accurate information on a broad set of topics related to sexuality, including human development. However, the reality is that many educational systems around the world are leaving issues like sexual orientation and contraception unaddressed. In other words, much of the current sex education systems are being ambiguous rather than comprehensive, giving young individuals no other choice to learn in different ways, such as from parents, peers, media, and pop culture, which might be misleading and incomplete. It must be recognized that such current educational systems have grave consequences, and it is in direct violation of their human rights to be informed. Therefore in this session, we address the value of sex education and different ways we

could improve the current educational model.

Definition of Key Terms

Sex Education:

An education of issues that relate to human sexuality and often targets younger audiences. This may include safe sex, birth control, age of consent, reproductive health, and others.

Human Sexuality:

The way in which people express themselves sexually, usually concerning human reproductive systems.

Social Hygiene Movement:

The attempt to further control STD's and STI's, prostitution, and vice

Sexually Transmitted Infection (STI):

An infection that has been spread into a man or woman through intercourse. There can be many types such as chlamydia, gonorrhea, and syphilis.

Sexually Transmitted Disease (STD):

A sexually transmitted infection that has developed into a disease that is disrupting the normal function of the body. STDs such as gonorrhea and chlamydia can develop into a pelvic inflammatory disease (PID) which then makes it an STD. Similarly, if a woman with another type of infection, such as HPV, develops cervical cancer from it, it is now a

disease.

Human Immunodeficiency Virus (HIV):

A virus, most commonly transmitted through unprotected intercourse, that attacks the cells in the human body that help fight diseases. Having this virus makes the person more vulnerable to infections and diseases. If left untreated it becomes known as AIDS.

Acquired Immunodeficiency Syndrome (AIDS):

The late stage of HIV which is caused when the immune system of the body had been weakened and damaged by the virus. Along with HIV, this can be deadly.

General Overview

Further Defining Sex Education

According to the United Nations Youth and Comprehensive Sexuality Education, sexual education provides young people with the knowledge, skills, and efficacy to make informed decisions about their sexuality and lifestyle. It is the education to formal programs of instruction on a wide range of issues relating to human sexuality, which includes emotional relations and responsibilities, human sexual anatomy, sexual activity, sexual reproduction, sexual intercourse, age of consent, reproductive health, reproductive rights, safe sex, birth control, and sexual abstinence. Firm international commitments exist, mainly from human rights, health, and youth empowerment perspectives, to promote comprehensive sexuality education. Common avenues for sex education are parents or caregivers, school programs, and public health

campaigns.

Sex education may likewise be depicted as "sexuality education", which implies that it incorporates knowledge about all aspects of sexuality, including information about family arranging, reproduction (fertilization, conception, and development of the embryo and fetus, through labor), in addition to information about all aspects of one's sexuality including self-perception, sexual orientation, sexual pleasure, values, dynamic, communication, dating, relationships, sexually transmitted diseases (STIs) and how to evade them, and conception prevention techniques.

John J. Burt was an author who wrote many books about sexual education, such as "Education for Sexuality: Concepts and Programs for Teaching." He defined sex education as the study of beings' characteristics: a male and female that made up a person's personality. He said that sex education stands for protection, presentation extension, improvement, and family development based on accepted ethical ideas.

Marc Leepson is an American journalist, historian, and author who defined sex education as instruction in various physiological, psychological, and sociological aspects of sexual response and reproduction.

History of Sex Education

For an extended period, adolescents were not given any information on sexual matters, discussing these issues being considered taboo. Experience shows that adolescents are curious about some or all the aspects of their sexuality, its nature in general, and wish to experience their sexuality. Such instructions were traditionally the responsibility of a child's parents and given just before a child's marriage. Most of the information on

sexual matters is obtained informally from friends and the media, in which much of this information is of doubtful value.

Much of such information is usually known to be deficient, especially during the period following puberty, when the curiosity about sexual matters is the most acute. This deficiency became increasingly evident by the increasing incidence of teenage pregnancies, especially in Western countries after the 1960s. As part of each country's efforts to reduce such pregnancies, sex education programs were instituted, initially over strong opposition from parent and religious groups.

However, the progressive education movement of the late 19th century led to the introduction of "social hygiene" in North American school curricula and the advent of school-based sex education. Despite early inroads of school-based sex education, most of the information on sexual matters in the mid-20th century was obtained informally from friends and the media. Much of this information was deficient or of dubious value, especially during the period following puberty, when curiosity about sexual matters was the most acute. This deficiency was heightened by the increasing incidence of teenage pregnancies, particularly in Western countries after the 1960s. As part of each country's efforts to reduce such pregnancies, sex education programs were initially introduced, initially over strong opposition from parent and religious groups.

Access to Sex Education

Sexual education is taught informally when someone receives information from a conversation with a parent, friend, religious leader, or media. Information may also be delivered through sex self-help authors, magazine advice columnists, sex columnists, or sex education websites. Most teenagers would learn through television or social media,

perceiving the action of talking to their families about sexual matters as complicated.

A study from a randomized trial by the Journal of Adolescent Health using culturally sensitive media messages to reduce HIV associated sexual behavior in high-risk African American adolescents has shown that mass media interventions; for example, the use of teaching sexual education through commercials shown on television, or ads on social media, have proven useful and decreased the amount of unprotected sex.

UNESCO has noted that sexuality education can be delivered through a range of programming

modalities, including family life education (FLE), population education, sex and relationships

education, sexual and reproductive health education and life skills education, or through dedicated sexuality education programs.

Formal sex education happens when schools or health care providers offer sexual education. In some junior high schools or high schools, it is taught as a full course as part of the curriculum or only one unit within general biology, health, home economics, or physical education. Some schools do not offer sexual education since, in several countries, it remains a controversial issue. Particularly in the United States of America, issues including LGBT sex education and topics dealing with human sexual behavior -safe sex practices, masturbation, premarital sex, and sexual ethics- have proven to be limited and biased. Also, religious countries such as Iran, where their Muslim beliefs do not approve nor allow sex education in schools, adolescents are scavenging through limited information.

In contrast, however, many countries do not find sex education a controversial topic and allow it in schools, such as in European countries, and these countries tend to have

the lowest teen pregnancy rates. Among others, Italy, Germany, and Switzerland had fewer than fourteen births per thousand babies born. Other countries such as Sweden, France, the Netherlands, Denmark, and Belgium (all of which reported between 5 and 6 teen births per thousand people) have such a low rate of teen pregnancies due to the generally progressive sexual approach education. They educate children in schools, putting less emphasis on the dangers of sex and more emphasis on teaching sex as a regular, healthy, positive act.

Impacts of Sexual Education

The outbreak of AIDS gave a new sense of urgency to sex education in many countries. Sex education is observed by most scientists as a vital public health strategy in many African countries where HIV/AIDS is at epidemic levels. International organizations, such as "Planned Parenthood" believe that sex education programs have global benefits, such as controlling the risk of overpopulation and the advancement of women's rights such as reproductive rights. The use of mass media campaigns has resulted in high levels of "awareness" coupled with essentially superficial knowledge of HIV transmission.

Cochrane Database of Systematic Reviews shows that a combination of comprehensive sex education and access to birth control appears to lower the risk of unintended pregnancies among teenagers significantly. A meta-analysis that compared comprehensive sex education programs with abstinence-only programs found that those interventions were unlikely to significantly delay the initiation of sexual intercourse among adolescents and abstinence-only did not reduce the likelihood of pregnancy but rather increased it. Educational interventions significantly increased

reported condom use at last sex in adolescents compared to controls who did not receive the intervention. Information about condoms and contraception can lead to reductions in the risky behaviors reported by young people as well as reductions in unintended pregnancies and STIs. According to the United Nations Population Fund, by emphasizing rights and gender issues, sexual education programs help reduce gender-based violence and bullying, promote safe schools, empower young people to advocate for their own rights, and advance gender equality. The UNPF organization recommends comprehensive sexuality education, as it enables young people to make informed decisions about their sexuality.

United Nation's Response regarding Sex Education

United Nations (UN) treaty monitoring bodies have suggested that sexual and reproductive health (SRH) education ought to be a compulsory part of learning for young people. The Committee on the Elimination of Discrimination against Women (CEDAW) approaches member states to provide obligatory sexual education in a deliberate and systematic manner through all educational establishments. The Committee on the Rights of the Child (CRC) has similarly suggested that member states include sexual education in the official programs of primary and secondary education.

According to the United Nations Youth and Comprehensive Sexuality Education prepared by the United Nations Educational, Scientific and Cultural Organization (UNESCO) and the United Nations Population Fund (UNFPA), to accomplish Universal Access for knowledge and to contribute to improving sexual and reproductive health (including HIV outcomes) for the young we need to:

- Spot gender and human rights at the core of sexuality education.

- Accomplish fundamentally higher coverage-reaching a critical amount of young people, and guaranteeing that we are reaching teenagers and youth both all through school settings.
- Create comprehensive and complete school-based programs from primary through secondary.
- Address vulnerabilities and fight avoidance
- Promote local proprietorship and cultural significance
- Adopt a positive life-cycle approach to sexuality

Major Parties Involved and Their Views

United States

According to the World Bank, the United States has one of the highest adolescent fertility rates among other industrial countries, reaching 30 pregnancies per 1,000 women between ages 15-19. Many scholars view this as being a drawback from the current educational system in the United States regarding sex. Unlike, many European countries, which tend to show a low adolescent fertility rate, Sex education in the U.S. tends to veer towards a more repressive and cautionary teaching curriculum. Many states only rely only on abstinence-only curriculums which prevent students from being fully informed about pregnancies and sex diseases.

Iran

Like many Islamic countries, most oppositions in this country are based on the assumption that knowledge is harmful. Most Muslim parents see the word "sex" as dirty and unholy, therefore they seem to feel uncomfortable discussing such topics with their

children. Such circumstances leave no other options for teenagers to learn sex from their educational systems, but this as well is incomplete. Most educational systems in Iran do not cover mortality associated with sex, sexual dysfunctions and deviations, and the institution of marriage. It must be acknowledged that Iran has reached around 41 pregnancies per 1,000 women aged between 15-19, according to the World Bank. Therefore, it must be questioned if knowledge is harmful as much researches are done in this area has concluded that ignorance and unresolved curiosity, therefore not knowledge, is harmful.

Germany

Germany has been highly acknowledged for starting teaching sex to children at an exceptionally young age, starting at 5. The government of Germany has made such teachings mandatory since 1992, and even though most adults are in support of education in this area, the fact that it's now mandatory has brought some controversy. In this controversy, religion and personal beliefs play a key role. For example, Baptists in Germany strongly believe in the latter, and therefore has asked the European Human Rights court several times to be able to keep their children at home on the days when sex was being taught. Therefore while some believe that education in sex is the obligation and responsibility of the government some believe that it should align with the religion and beliefs of their personal homes.

India

In India, as many South Asian countries, sex is not discussed much. Conversations about sex in homes are rare, and not many educational bodies go over it, and even if they do, they are condemned by parents and policymakers. Much of the education in this

topic is focused on the moral lessons which accompany this area instead of the more practical sides, such as reproductive health issues, and contraceptives. Most of these educations are progressed with the assumption that intercourse is a vulgar act, and can only be accepted after marriage. One is taught that their worth is highly dependent on their virginity, and therefore sexism kicks in when such intercourse happens: women are highly judged whether they are virgins or not. According to the United Nations, 28.7 percent of women in India gives birth to their first child at the age of 15. It must be acknowledged that even though such limited sex educational systems might not be the direct cause of such numbers, this approach does restrict people from understanding their sexuality and gender.

Timeline of Events

Date	Description of event					
19th Century	The progressive education movement led to the introduction of "social					
	hygiene" in North American school curricula and the advent of					
	school-based sex education.					
	The Social Purity movement prompted a more extensive campaign					
1870s	focused on the moral regeneration of British society, which incorporated					
10/03	the conviction that it was fundamental for parents, rather than schools,					
	to give youngsters healthy and moral information about sex.					
	The bird and bees by Geddes and Thomson's The Evolution of Sex was a					
1890	significant work in giving methods of discussing "sexual intimacy" by					
	referring to "the birds and the bees". It moved toward the subject of					

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	sexual reproduction through forms of life remote from people, including				
	single adaptable cells (amoebas), plants, insects and animals before				
	proceeding onward to individuals.				
	Most of the information on sexual matters was obtained informally from				
	friends and the media. Much of this information was deficient or of				
20th Century	dubious value, especially during the period following puberty, when				
	curiosity about sexual matters was the most acute.				
1918	The Chamberlain-Kahn Act mandates soldier education on syphilis and				
1710	gonorrhea				
	The U.S. Department of Labor's Children Bureau releases a report				
1919	suggesting sex education during school could have better-protected				
	soldiers from STIs.				
1920s	Sex education is introduced in high schools in the United States.				
1930s-1940s	Human sexuality courses appear in colleges in the US.				
1040	Increasing incidence of teenage pregnancies, particularly in Western				
1960	countries.				
1964	The Sexuality Information and Education Council of the US (SIECUS) was				
1704	founded.				
10/02/10702	Sex education becomes a political issue in the United States; parents				
1960s-1970s	start protesting for sexual education in schools.				
1980s	HIV/AIDS crisis strengthens sex-ed advocates' case.				
1001	Adolescent Family Life Act funds "chastity" and abstinence-only				
1981	education				
1996	The Welfare Reform Act adds a provision that gives tens of millions of				

		dollars to abstinence-only programs					
2	2001	HIV/AIDS outbreak in African countries at epidemic levels					
		The Content of Federally Funded Abstinence-Only Education Programs					
2	2004	(The Waxman Report) is released and shows such programs contain					
		inaccurate and misleading information.					
	The Government Account Office (GAO) releases a report sho						
2	2006	most abstinence-only programs were not reviewed for scientific					
accuracy before funding and implementation.							
		UNAIDS/WHO evaluation finds 13 abstinence-only programs for HIV					
2	2007	prevention are ineffective					

UN involvement, Relevant Resolutions, Treaties and Events

The United Nations has taken several steps throughout the past years to further improve the effectiveness of the sexual education that people receive. The UN treaty monitoring bodies have advocated that sexual and reproductive health (SRH) be an obligatory component in the learning of a young child. The UNESCO has similarly advocated for sexual education for younger generations by implementing the comprehensive sex education (CSE) instruction method as the curriculum. The Committee on the Elimination of Discrimination against Women (CEDAW), which mostly tackles gender inequality, has determined that sexual and reproductive health is a part of women's rights. The CEDAW has approached member states to make it obligatory for them to arrange a sexual education for women. Similarly, UNFPA has worked with governments to implement sexual education in schools and community-based facilities.

- On September 13th of 2006, the Human Rights Council (HRC) announced the Special Rapporteur on the rights of everyone to the enjoyment of the highest attainable standard of physical and mental health (A/16/338). The Special Rapporteur was made to reinforce and support the rights that women have to reproductive health care facilities, goods, and services (including education). To further support women, it was included that these services, goods, and facilities must be accessible, both physically and economically, accessible in adequate numbers, of good quality, and accessible without discrimination.
- To encourage the implementation of sexual education, UNESCO has created the foundation named the Life and Love campaign. The comprehensive sexuality education (CSE) is the foundation of this campaign. Its main purpose is to highlight the benefits that the CSE has on young people. In doing so, one of the central objectives is to make a positive impact on safer sexual behavior. Along with highlighting the benefits of CSE, the Life and Love campaign also interviews families all over the world with the purpose to inform themselves about the things that people wish to know about sexual education.
- The 16th article of CEDAW allows women "to have access to the information, education, and means to enable them to exercise these rights." This article has provided women the right to sexual education that they might have missed at a younger age or simply were not allowed by parents. It also enables them the power to exercise their rights if they wish to obtain a proper sexual education.

• From the Committee's General Recommendation 24, the CEDAW suggests that states are arranged for the "prevention of unwanted pregnancies through family planning and sexual education". Similar to their 16th article mentioned before, the CEDAW suggests to states to implement sexual education as it prevents unwanted pregnancies along with many other problems such as STDs.

General Assembly of the United Nations Annual Meeting to review the progress on ending AIDS

H.E. Mrs. María Fernanda Espinosa Garcés, President of the 73rd Session of the UN General Assembly made a statement at an annual meeting to focus on the commitment to fight HIV/AIDS. The international community has established and followed up on ambitious goals, including the Sustainable Development Agenda which included the promise to eradicate the epidemic by 2030. She stated everything they have achieved in the past years and what still needs to be discussed. For example, she mentioned achievements made in the response of HIV/AIDS in the last decades, under the sound leadership of UNAIDS. These notable achievements have marked a critical difference in the lives of millions of millions of men, women, and children.

However, the progress is uneven across all countries and regions and many may be unable to achieve the 2020 goals established in the Political Declaration of 2016, which would also have an impact on compliance with the Sustainable Development Goals. María Fernanda Espinosa Garcés states that in order to win the battle against AIDS, they must empower all people and communities so they can protect themselves from HIV and mitigate the impact on those who contract it. This involves guaranteeing

gender equality and the empowerment of women and girls, providing integral sexual education to women, girls, and young people on sexual and reproductive health services, eliminating gender-based violence, and the regulatory and structural barriers that prevent access to HIV-related services. She mentions how they cannot put an end to the AIDS epidemic if these people continue to be stigmatized, discriminated, and neglected.

Evaluation of Previous Attempts to Resolve the Issue

As seen through UN involvement, there have been a number of different measures that have been tried to implement sex education. There have been various treaties and articles referencing this issue. Although these are good approaches to the issue, most of these measures only have promoted the use of sexual education as well as encouraging it. They are lacking the implementation of sexual education as well as different ways to reach out to people other than the state leaders. The UN has tried to approach this issue by raising awareness within the states. By not promoting these solutions accordingly, they have failed to draw the attention of the people who need education the most. consequently, many women are unaware they have a way to attain the education they want. By also lacking the sufficient implementation for sexual education overall, it is leaving many young people uneducated.

Other attempts to solve this issue, such as the campaign created by UNESCO, has been highly effective in providing awareness and helping other people. Events such as these are efficient when it comes to raising awareness, however not as much when it comes to taking action. Measures such as these have slightly brought to the people the knowledge about their rights to sexual education. By bringing together many people

that aspire to have sexual education, it further encourages other people to strive for it as well. These campaigns help people become knowledgeable which leads them to a healthier sexual life.

Sexual Education within legal and policy frameworks

There is a range of views on what should be included in sex education and what the term includes. However, there has also been a strong international commitment to promoting the provision of comprehensive sexuality education (CSE) among teenagers. These include the Convention on the Rights of the Child (CRC), the International Covenant on Economic (ICE), Social and Cultural Rights (SCR), the Committee on the Elimination of Discrimination against Women (CEDAW), and the Convention on the Rights of Persons with Disabilities (CRPD).

The international agreements over the past decades such as the International Conference on Population and Development (ICPD) in 1994, the Fourth World Conference on Women in 1995, and the World Summit on Children in 2002 have broadened the extent of the Convention on the Rights of the Child (CRC), by affirming the right of all children and teenagers to receive sexual and reproductive health (SRH) information, education and services in accordance with their specific needs.

These policy commitments have also been featured in different local and high-level reports from documents, including 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, including the Conference on Population and Development (CPD) 2012 Resolution on Adolescents

and Youth in New York.

Possible Solutions

As discussed previously, the current educational system regarding sex is flawed in various parts of the world. Not surprisingly, this is in direct violation of the students' rights to be well-informed for the knowledge that will serve a vital role in the remainder of their life spans. Then what could be done to solve this issue? To start from, current educational systems are misleading in the way that students are being excluded from the learning process, only relying on adults. However, as many studies in other areas have, a recent review has confirmed that peer-led sex education has been more successful at improving student's knowledge and attitude towards sexual health. Therefore finding a way to enhance a two-way teaching method in which students are fully involved in the learning process, instead of a one-way, might be essential to improve the current educational systems we are addressing. Also, as mentioned previously, many parents worldwide are being left out of their children's education on sex for various reasons. These reasons might range from simple reasons such as feeling uncomfortable talking about sex with their children to complex reasons such as not understanding their roles in their children's education, believing that it is the responsibility of the educational bodies. No matter what the reason is, it must be recognized that it is of real importance for parents to take place in the learning of their children, especially when it comes to sex. Therefore, improving awareness on the paramount role that parents must take, enhancing a training system, might help solve the current issues on sex education that the world is facing nowadays. Also, the perception that sex is "dirty," which makes teenagers feel uncomfortable and scared to talk about sex with their peers, parents openly, and other members in society, must be corrected to solve this issue truly.

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Appendix

I. A detailed timeline with records, data, and information about the history and origins of sex education.

https://sexedconference.com/the-history-of-sex-education/

https://www.open.edu/openlearn/body-mind/health/health-studies/brief-history-

sex-education

- II. According to the Sexuality Information and Education Council of the United States (SIECUS), the Sexuality Information and Education Council of the United States, "93% of adults they surveyed support sexuality education in high school and 84% support it in junior high school. In fact, 88% of parents of junior high school students and 80% of parents of secondary school students believe that sex education in school makes it easier for them to talk to their adolescents about sex. Also, 92% of adolescents report that they want both to talk to their parents about sex and to have comprehensive in-school sex education. Furthermore, a "study, conducted by Mathematica Policy Research on behalf of the U.S. Department of Health and Human Services, found that abstinence only until marriage programs are ineffective."
- III. Page 7 from the Ministry of Education from the Government's lead advisor on the New Zealand education system states what different sex education professionals defined

file:///Users/admin/Downloads/Jeanette%20De%20La%20Mare%20(1).pdf



- V. Information about major parties:

 https://en.wikipedia.org/wiki/Sex_education#cite_ref-21
- VI. History of Sex Education by Origin of Everything:
 - https://www.youtube.com/watch?v=gTmGzaUPmxQ
- VII. Statement by H.E. Mrs. María Fernanda Espinosa Garcés, President of the 73rd Session of the UN General Assembly.



Educational interventions (cluster RCTs)

Patient or population: Male and female adolescents aged 10 years to 19 years

Setting: All settings

Intervention: Educational interventions

Comparison: No additional activity/intervention to existing conventional population-wide activities

Outcomes	Anticipated absolute effects* (95% CI)		Relative	Nº of	Quality of the
	Risk with No intervention/Standard curriculum	Risk with Educational intervention	effect (95% CI)	participants (studies)	evidence (GRADE)
Use of birth control methods (condom	Study population		RR 1.18 1431		⊕⊕⊕⊝
use at last sex) follow up: range 5 months to 24 months	261 per 1000	308 per 1000 (277 to 345)	(1.06 to (2	(2 RCTs)	MODERATE 1
	Moderate				
	534 per 1000	630 per 1000 (566 to 704)			
Initiation of sexual intercourse (mixed gender) follow up: range 12 months to 24 months	Study population				⊕⊕⊖⊖ LOW ¹²
	227 per 1000	215 per 1000 (161 to 288)	- (0.71 to (2 RCTs) 1.27)	LOW	

^{*}The risk in the intervention group (and its 95% confidence interval) is based on the assumed risk in the comparison group and the relative effect of the intervention (and its 95% CI).

CI: Confidence interval; RR: Risk ratio; OR: Odds ratio;

GRADE Working Group grades of evidence

High quality: We are very confident that the true effect lies close to that of the estimate of the effect

Moderate quality: We are moderately confident in the effect estimate: the true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different

Low quality: Our confidence in the effect estimate is limited: the true effect may be substantially different from the estimate of the effect

Very low quality: We have very little confidence in the effect estimate: the true effect is likely to be substantially different from the estimate of effect

IX. BBC News stories from different people about their sex education experiences:

https://www.bbc.com/news/topics/cdmkxk9qz9vt/sex-education

I.

VIII.