



Influence of Religion on Comprehensive Sexuality Education

Introduction and Background to the Issue

Comprehensive sexuality education (CSE) is a “rights-based and gender focused approach” that aims to provide “scientifically accurate information about human development, anatomy and reproductive health”. This specially caters to the youth, whether in school or out of school, and spans over several years of personal development providing step by step (age appropriate) sexual education throughout the development years. It encompasses counselling young people on personal sexual and reproductive growth, while looking to instil positive and gender sensitive values in terms of sexual and reproductive health. Curricula imparting CSE incorporates discussions on gender equality, human rights, sexual violence and discrimination, as well as family life, peer relationships, culture and gender roles (UNFPA, 2014).

The Asia-Pacific region is home to 60% of the global population of 1.8 billion young people between ages 10-24 years (UNFPA, 2017). CSE is essential to equip this burgeoning population to make responsible decisions with regards to their mental and physical health, which boost their self-esteem and ensure overall well-being. Evaluation studies on the impact of CSE invariably indicate improved understanding of

gender equality, reduction in unintended pregnancies and sexually transmitted diseases and infections (STD/STIs) and positive behaviour change amongst the youth. Studies also indicate that CSE enhances the likelihood of equality in intimate relationships, and delays sexual debut amongst couples (Haberland, 2010). This translates into lowered HIV transmission rates by way of safer sex practices and reduction in interpersonal violence.

Despite its many benefits, the integration of CSE in education curricula has met with resistance and criticisms from different quarters, mainly on the basis of socio-cultural and religious values. Evidence suggests that sex education within CSE is a taboo subject due to discomfort with the subject and restricted spaces for discourse, while it is widely held that sex education leads to curiosity about sex and promotes early initiation of sexual activity amongst children, despite evidence to the contrary (UNESCO, 2009).

Interlinkages between Religious Fundamentalism and Comprehensive Sexuality Education

“I specifically say girls should not wear “legging” and the tops should cover till the end of one's hand [below the knee without any cut/slit.] In prayers we share the dress code (.) I feel that adolescents should not get contraceptives and abortion services.”

[Interview with a Christian pastor, India]

“The Qur'an and the life of the Prophet Muhammad are open books for us. We've got all the answers to our questions in these books. So I think we have to go back to the Qur'an and the Hadith, take what's in there and give it to our students.”

[Interview with a Male Teacher, Madrassah Education, Bangladesh]

Findings from both India and Bangladesh confirm that there is much resistance to CSE causing a challenge to its development and implementation, respectively. The views articulated by different discussants in interviews, group discussions and findings from material reviewed indicate that religion and culture play a significant role in setting the parameters for sexuality and agency, which is advanced within CSE. Girls' sexuality itself appears to trigger anxiety and fear generally as it is assumed to promote pre-marital sex, lead to promiscuity, and resultantly brings “dishonour” upon one's family.

This resistance seems to stem from cultural beliefs and social norms that are infused with religious narratives along with a rigid sense of ethno-national identity (particularly in India). Combined, these effectively barricade decision-making and restrict access to sexual and reproductive health and rights information amongst girls and women, and undermine overall human rights.

In Bangladesh, extremist religious ideologies have been on the rise whilst strict Islamic interpretation is being pushed by Muslim leaders to influence decisions and policies. While secularism is enshrined as a fundamental principle of the constitution, governance institutions reaffirm that Islam is the state's official religion (Bergman, 2016).

In India, resistance to the adoption of CSE in national education curriculum stems from the “Hindutva” ideology (Danguilan, 2008) rather than particular religious text or scripture. “Hindutva ideology” promotes the idea that Hindus have moral superiority over all other religions, and thus are entrusted with the protection and promotion of Indian culture and traditions. Indian right-wing groups promote this ideology and oppose modernity, which is seen a threat to 'Hinduness'.

Case study of Bangladesh

In 2012, the Bangladesh Ministry of Education revised the curriculum and developed textbooks for both school and university students, in line with the National Education Policy. This policy incorporated the principles set forth in the

United Nations Convention on the Rights of the Child (UNCRC), which includes sexual and reproductive health information. Accordingly, the National Curriculum and Textbook Board (NCTB) included sexual and reproductive health information in the textbook on physical education and health, which previously dealt only with physical education.

There are ten religio-political parties in Bangladesh (Barkat, 2011), each of which have splinter student wings operating from different universities. Thus, religious parties enjoy room to influence the both policy and implementation of CSE, and services and information related to sexual and reproductive health rights (Naripokkho, 2016). Religio-political groups that enjoy access to government policy-setting forums advocate that all answers are to be found in the Quran, and those that are not found in the Quran have been left out for good reason, thus rejecting the need to introduce supplementary teaching material for the youth. Both Madrasahs¹ and parents have been reluctant to discuss sexuality with students; while in the Madrasahs resistance comes from religious beliefs and values, parents' views are influenced by social norms, fear of sexual activity, and misinformation regarding the content and intended impact of CSE. Further, teachers are often not equipped with required skills to impart sensitive information and carry their own individual biases and beliefs.

After the revised curriculum was rolled out, the Bangladesh Madrasah Education Board edited

the content to filter out information they deemed inappropriate, omitting topics related to gender and human rights while editing information on sexual harassment (Naripokkho, 2016). The edits brought forward patriarchal notions that if girls behaved in a certain manner, such as dressing modestly, not being without a “guardian”, ignoring unwanted touch and not reacting to harassment, then they would be safe. Similarly, the chapters on sex and sexual relationships were edited from a religious perspective, and focused mainly on the behaviour of women, while emphasising abstinence, moral behaviour, and religious obligations (Naripokkho, 2016). Discussions on safe sex options, respect and equality between couples and especially for women were omitted.

According to Naripokkho, religious educators as well as parents were unwelcoming of the new curriculum. They opined that knowledge about sex would result in sexual activity and sexual relationships, which were against their religious and cultural beliefs. They argued that this information did not fit into their existing lifestyles and therefore, was 'unnecessary'. According to the NCTB officials, the Ministry of Education received an appeal from parents for the removal of the chapter on “Puberty and Reproductive Health” from the textbook “Physical Education and Health”. Sit-ins were organised, notifications were sent to the Minister mentioning that this kind of information was not required by students until they reached the legal age of majority.²

¹ Madrasahs are Islamic seminaries and educational institutions.

² 21 years for boys and 18 years for girls.

Case Study of India

In India, the states of Uttar Pradesh, Gujarat, Madhya Pradesh, Maharashtra, Karnataka, Kerala, Rajasthan, Jammu and Kashmir, Chhattisgarh, Jharkhand, Orissa and Goa have vocally rejected and obstructed sex education sessions in schools. CSE is rejected on the basis of corrupting young minds and being anti religion and culture (Rajalakshmi 2007). Earlier in 2006, there was heavy opposition from conservative and religious fundamentalist groups on the content of the Adolescence Education Programme (AEP), a program introduced in the Central Board of School Education (CSBE) (Dasgupta 2008 and TARSHI 2008), leading to a ban on the programme in many states. In 2009 as a result, a committee was constituted to discuss the matter and after much debate with multi-party members, it was decided that the AEP content should be amended. Thus, its implementation was stalled until revision. The amendment process however, led to the exclusion of important information regarding sexuality and clearly indicated where sexual education stood in the eyes of the Parliament (RUWSEC, 2016).

Information and discussions related to sex and sexuality are taboo in Indian society much like Bangladesh, especially where it involves unmarried youth. Policies and law related to sexual and reproductive health education are not adopted by legislature and other institutions; however sexuality education for

students has been ongoing on a voluntary basis, through the HIV/AIDS prevention lobby (Gupta et al 2012).

Recent national policies such as the Reproductive, Maternal, Neonatal, Child Health+Adolescents (RMNCH+A) (MoHFW, 2013), Adolescent Reproductive and Sexual Health (ARSH) (MoHFW 2014), Reproductive and Child Health Policy – RCH 2 2005–2010 (MoHFW 2011), the National AIDS Control Policy 1996–2006 (NACO 2007), and the National Youth Policy 2003 & 2014 (Ministry of Youth Affairs and Sports 2014) mention the need to impart important SRH knowledge to the youth. Though these policies award recognition to SRH, their content is arguably still limited, and give no concrete policy direction or acknowledgement of the rights of the youth.

Contrary to the findings from Bangladesh, however, parents in the Indian Tamil Nadu state were generally in favour of topics that discussed gender, violence, sexually transmitted diseases (including HIV/AIDs). Ninety-seven percent of all parents interviewed favoured CSE to be taught at schools or colleges. Significant to note here is that respondents that identified themselves as 'religious' were more open and accepting of sexuality education as opposed to those that who did not identify themselves as religious. Respondents' age played a role in the attitudes towards CSE, with younger parents more open to sexuality education as opposed to older parents. Furthermore, socio-economic class, education, caste, and land ownership

were factors that affected attitudes towards CSE.³ What was opposed by parents, however, included discussions on sexuality, sexual relations, conception and contraception, similar to the position held by national officials. Majority of the parents interviewed by RUWSEC felt abstinence should be promoted. Counter-intuitively, almost all parents asserted that CSE was an important part of schooling and education, irrespective of what religious beliefs they held (RUWSEC, 2016).

Generally, while the civil environment in India seems to be open and ready to incorporate CSE in education for school going children, it is the strong state opposition that has impeded the implementation of sexual education. Party members opposing CSE have links to religious groups and/or right-wing nationalist groups and have been supporting attacks on young people, especially women that dare to express their sexuality, marry of their own choice, or go against gender/cultural norms (RUWSEC, 2016).

Conclusion

Religion and cultural beliefs are critical impediments to the adoption of Comprehensive Sexuality Education (CSE) in national policies and curricula, particularly in the Asia-Pacific region. Political and social resistance, particularly in Muslim communities, coalesce with religious teachings and values to the denial of information that helps develop a healthy sense of self, well-being and respect for others.

The Indian research on CSE concludes that resistance mainly emanates from policy makers and key political figures, founded on socio-cultural narratives, but has little if any basis in religious scripture. In contrast, the Bangladesh report finds that resistance comes from within the community, especially religious educators teaching at the Madrassahs and youth groups of religio-political parties. However, in both countries, religio-cultural barriers are the root cause to the failure of governments to adopt CSE at a national level.

Control of female sexuality and body is the cornerstone of patriarchy which is directly contravened by CSE content, leading to resistance towards its adoption. It is clear from the evidence presented in the researches patriarchal control is perpetrated through the propagation of social norms and acceptable modes of behaviour. Even parents that are more receptive to CSE, carry reservations about topics around sexuality and sex, which reduces the probability of gaining their full support for implementation. Given the common discursive threads found across actors in different countries that oppose CSE, it is imperative to strategise around, develop and popularise counter-narratives that promote effective delivery of information to young people, in keeping with their human rights.

Recommendations

- Advocacy for the adoption of comprehensive

³ According to the report, statistical differences were found amongst respondents of different castes, landowning status, education, and level of religiosity.

sexuality education must follow a multi-pronged strategy, including but not limited to:

- Campaigns must be designed in a way that demonstrates CSE benefits not just to youth but society at large. Studies from different countries such as Finland could be used to promote evidence-based advocacy to prove CSE lowers pregnancy rates, sexual debuts, and promotes healthy relationships and gender equality.
- Successful programs in religious countries could be studied and replicated in countries where resistance stems from the society.
- Misconceptions about the content and the distrust of the impact of CSE must be addressed through strong campaigns and awareness raising seminars particularly targeting parents and other family members, using appropriate terminology and language to discuss sensitive issues.
- Counter-narratives need to be developed and popularised in order to promote a rights-based approach to SRHR, and acceptance of CSE curricula.
- One way to counter political resistance is through value clarification. Civil society organisations should focus on sensitisation and value clarification trainings targeted towards policy makers to address the misconception surrounding CSE content and impact. During the clarification process, civil society should emphasise the need for CSE.
- State officials should be reminded of international commitments regarding adolescents and youth. Responsibility for the domestication and implementation of pro-youth and pro-adolescents legislation and policies should be laid squarely on the state, alongside strengthening of participatory accountability mechanisms.
- Governments should create youth friendly spaces for out-of-school youth to ensure access to comprehensive sexuality education, irrespective of age or marital status.
- CSE curriculum developed should utilise appropriate language to reduce resistance and opposition. Focus should be on the incorporation of rights-based, gender sensitive information alongside the essential components proposed by the UNFPA.
 - Pedagogy teaching strategies must be applied with teachers and students, to maximise uptake of content.
 - Comfort levels of educators, especially teachers, should be enhanced through value clarification; continual refresher trainings and dialogues should be undertaken to explore any persistent handicap, including discomfort, in delivering the content.
- Transnational alliance and networking should be actively pursued by civil society organisations, including the media, academia, grassroots leaders and champions, human and social rights activists, etc., to counter the increasing trend of fundamentalist discourses and movements in the region and around the world.

References:

Bergman, David. "As Bangladesh court reaffirms Islam as state religion, secularism hangs on to a contradiction." *Scroll.in*. January 3, 2017. <https://scroll.in/article/805988/as-bangladesh-court-reaffirms-islam-as-state-religion-secularism-hangs-on-to-a-contradiction> (accessed March 14, 2017).

Choudhry, Salah Uddin Shoaib. "The Rise of Islamist Extremism in Bangladesh." January 26, 2012.

Danguilan, Marilen. "Keeping the Faith: Overcoming Religious Fundamentalisms." *Arrow For Change* (Asian-Pacific Resource and Research Centre for Women (ARROW)) 14, no. 1 & 2 (2008): 1-3.

Dasgupta, Jashodhara. "Religious Fundamentalisms in India: The Impact of Hindu Fundamentalisms on Sexual and Reproductive Health and Rights." In *Surfacing: Selected Papers on Religious Fundamentalisms and Their Impact on Women's Sexual and Reproductive Health and Rights*, by Asian-Pacific Resource and Research Centre for Women (ARROW), 21-38. Kuala Lumpur, 2008.

Gupta, Mona, K. Ramani, and Werner Soors. "Adolescent Health in India: Still at Crossroads." *Advances in Applied Sociology* 2, no. 4 (2012): 320-324.

Haberland, Nicole, and Deborah Rogow. "Sexuality and relationships education: Toward a social studies approach." *Sex Education: Sexuality Society Learning*, 2005: 333-344.

Haberland, Nicole, and Deborah Rogow. "Sexuality Education: Emerging Trends in Evidence and Practice." *Society for Adolescent Health and Medicine*, 2015: S15-S21.

Prakash, Rajalaxmi Ram, N. Srilakshmi, and P. Balusubramania. *Religious Fundamentalism and Comprehensive Sexuality Education (CSE) in South India*. Rural Women's Social Education Centre (RUWSEC), Asian-Pacific Resource and Research Centre for Women (ARROW), 2016.

Sabina, Nazme. *Religious Extremism and Comprehensive Sexual and Reproductive Health and Rights in Secondary and Higher Secondary Education in Bangladesh*. Naripokho, Asian-Pacific Resource and Research Centre for Women (ARROW), 2016.

UNESCO. *International technical guidance on sexuality education: an evidence-informed approach for schools, teachers and health educators*. Paris: UNESCO, 2009.

UNESCO. *International technical guidance on sexuality education: an evidence-informed approach for schools, teachers and health educators*. Paris: UNESCO, 2015.

UNFPA. "Adolescents & youth." *UNFPA Asia and the Pacific*. 2017. <http://asiapacific.unfpa.org/en/node/15202> (accessed March 14, 2017).

UNFPA. *UNFPA Operational Guidance for Comprehensive Sexuality Education*. New York: UNFPA, 2014.



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Shirkat Gah - Women's Resource Centre (SG) was initiated as a small voluntary women's collective in Pakistan in 1975, and has evolved into a leading women's rights organisation that operates out of offices in Karachi, Peshawar, Lahore, and four field stations across all four provinces. SG's core strategies in its work with grassroots organisations in more than 20 districts, include research to generate evidence for capacity building and advocacy in the areas of sexual and reproductive health and rights (SRHR); personal status rights and laws; a gendered perspective in sustainable development and promotion of peace, with violence against women traversing the four focus areas. Nationally, SG has contributed significantly to the overall policy and legal framework and works with elected representatives and government functionaries to bolster an environment conducive for women to claim rights and to facilitate accountability. SG also engages regularly with international development organisations and agencies both for setting norms and standards as well as ensuring accountability on Pakistan's international obligations.

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