



**Position Statement Title: Comprehensive
Sexuality Education for Children & Youth**

Prepared by SERC's Policy and Advocacy Committee

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Overview

Sexuality Education Resource Centre Manitoba Inc. (SERC) is a leader in sexual health education, grounded in principles of consent, bodily autonomy, and equitable access to sexual and reproductive health services. Comprehensive sexuality education for youth and children is a fundamental and core component of our work.

What is CSE?

Comprehensive Sexuality Education (CSE) approaches human sexuality and reproductive health holistically, recognizing the cognitive, emotional, physical, and social aspects of sexuality and accounting for the interrelated aspects of sexuality and other parts of our lives (see UNESCO, 2018). Sexual health is not an absence of disease, dysfunction, or illness. As defined by the World Health Organization (WHO), sexual health is an overall state of well-being relating to sexuality and includes pleasurable and safe sexual experiences (WHO, 2016). Globally, sexuality education methods are moving away from a primary focus on avoiding adverse sexual health outcomes to emphasize the importance of wellness, pleasure, and choice.

This shift comes out of a recognition of the complexity of risk factors and the need to support healthy sexual development among children and youth proactively. For example, learning how to use a condom effectively or that abstinence is the best method of preventing unwanted pregnancy does little to answer questions that young people have about their real-life experiences growing up. It also does not address the complex and dynamic messages they receive about how to feel, act, look, and behave.

As emphasized by UNFPA guidelines, by receiving CSE, children and youth learn accurate information, explore and nurture positive values and attitudes, and develop critical life skills (UNFPA, 2014). According to the same document, CSE programs and curricula must be guided by six core principles: "Respect for human rights and diversity, with sexuality education, affirmed as a right"; "Critical thinking skills, promotion of young people's participation in decision-making, and strengthening of their capacities for citizenship"; "Fostering of norms and attitudes that promote gender equality and inclusion"; "Addressing vulnerabilities and exclusion"; "Local ownership and cultural relevance"; "A positive life-cycle approach to sexuality" (UNFPA, 2014, p. 7).

Why should we care about it?

In the past decades, the scientific community has widely measured and demonstrated different benefits of sexuality education for children and youth. Many studies focus on the reduction of risks of unwanted pregnancy or sexually transmitted and blood-borne infections (STBBIs). For example, a research paper published in 2015 indicated that the uptake of behaviours or attitudes that mitigate those risks tends to increase among children and youth participants of most education interventions focused on sexual risk reduction. The article emphasizes that interventions addressing gender and power proved more effective than interventions not addressing these topics (Haberland & Rogow, 2015).

When it comes to CSE, the outcomes go beyond that. Some impacts can be life-changing for children and youth. A literature review that studied interventions in the United States within the last three decades found evidence that supports CSE covering a range of topics beginning in elementary school (Goldfarb & Lieberman, 2020). Leaving aside outcomes focused on the prevention of infections and unwanted pregnancy, the research identified outcomes among youth receiving CSE in four areas:

- **Appreciation of sexual diversity** includes outcomes such as reduced homophobic attitudes, bullying and/or harassment, increased safety for students often targeted by those attitudes, expanded understanding of gender/gender norms, increased knowledge, awareness, or appreciation of gender equity and/or sexual rights, increased awareness of discrimination and oppression based on gender and sexual orientation.
- **Dating and intimate partner violence prevention** include outcomes such as increased knowledge, improved skills to reduce dating violence and partner violence, reduced incidence of dating violence and partner violence, reduction incidence of victim blaming approaches, increased awareness of laws and support services, and increased bystander intentions and behaviours.
- **Healthy relationships** include outcomes such as increased knowledge related to healthy relationships, improved communication skills, and increased intentions to discuss relationships/sex within relationships with parents and/or service providers.
- **Child sexual abuse prevention** includes outcomes such as increased knowledge and/or skills to identify unsafe situations and improved skills and/or behaviors related to disclosure in situations of abuse.

In addition, identified outcomes connected to social-emotional learning included increased empathy and/or respect for others, improved skills to manage feelings, and improved self-image, including body image. Finally, evidence supports CSE outcomes connected to media literacy, such as increased media deconstruction skills that improve the capacity to identify and understand images and messages that influence and inform behavior (Goldfarb & Lieberman, 2020).

When is it relevant, and when does it matter?

The Right to CSE

Comprehensive Sexual Education is more than a practice and framework; it is a right. In Canada, all people have the right to health care, and CSE is proven to be an essential component of preventative health care to promote positive health outcomes and prevent adverse public health outcomes. In addition, CSE is a right according to international human rights treaties, such as the *International Covenant on Economic, Social and Cultural Rights*, the *Convention on the Elimination of Discrimination Against Women (CEDAW)*, and the *Convention on the Rights of the Child*. CSE as a right means that governments are required to uphold all people's rights to health, well-being, and equality, which leads to the responsibility of governments to ensure the delivery of unbiased, scientifically accurate CSE. Beyond this, CSE is also recognized by United Nations institutions like the World Health Organization, UNESCO, UNAIDS, and the United Nations Population Fund (UNFPA).

The role of comprehensive sexuality education (CSE) in young people's lives extends beyond skill and attitude development; it saves lives. Comprehensive sexuality education addresses and prevents the root causes of negative health outcomes by changing lives in tangible and vital ways. Comprehensive sexuality education provides people with the correct information to better take care of their bodies, which results in fewer STBBIs that can have lifelong implications, fewer unwanted pregnancies (Haberland & Rogow, 2015), and a decline in reproductive coercion rates¹. In addition to addressing health outcomes, CSE addresses social, emotional, and mental health outcomes, including the prevention of intimate partner violence and sexual violence (Lundgren & Amin, 2015), preventing cervical and/or anal cancers, or detecting them earlier (Shepherd et al., 2000), and less sexual health related issues caused by ignoring symptoms because of shame or fear (Barth et al., 2002).

The creation of safer learning environments for all people while “[shaping] a culture of equality for women and girls, trans people, non-binary people, and anyone who does not identify as heterosexual and cisgender” (Action Canada, 2020, p. 7), while also increasing school safety for 2SLGBTQI+ students (Baams et al., 2017) is another benefit of CSE. Every person has a right to receive relevant and accurate health information to make and act on important decisions about their health and their lives. This information needs to be accessible when people are ready to learn, depending on age, maturity, and capacities (Lansdowne, 2005).

Barriers to CSE

A common barrier to the delivery of CSE in schools and elsewhere is the assumption that it may encourage young people to be more sexually active; this worry has driven much of the pushback against CSE while also upholding sexuality-related stigma. There is no evidence to support this assumption; instead, research has found that CSE (in or out of schools) does not increase sexual activity, sexual risk-taking behaviour, or STBBI/ HIV rates (Haberland & Rogow, 2015). In fact, comprehensive sexuality education leads to improved knowledge and attitudes around sexuality, including increased knowledge of rights within a sexual relationship, increased communication with parents and caregivers about sex and relationships², and greater effectiveness when managing situations that involve risk (Goldfarb & Lieberman, 2020).

Why CSE in Publicly Funded Schools?

Research from UNESCO (2018) states that the best way to ensure equal access to high-quality information on sexual and reproductive health and rights is to include it in a written school-based curriculum that guides educators. In addition to curriculum, Canada's obligation is to ensure that CSE is delivered everywhere it is needed. To ensure this, CSE needs to be available throughout people's lives, including where they live, to access accurate and comprehensive sexual health information.

CSE in publicly funded schools requires a strong and present role for parents and caregivers; the role of parents and caregivers cannot be understated. Understanding what children and youth are learning in schools enables educators and families to work together to ensure CSE has the support it needs within and outside of school. The landscape of sexual and reproductive health is rapidly changing, and teachers within a publicly funded school system are supported to stay up to date on the trends and the resource landscape to support children and youth as they grow. Publicly funding CSE is necessary. However, access to CSE needs to be promoted beyond schools, acknowledging that youth will access this education from communities, peers, and families.

SERC's Commitments:

- Create and maintain a comprehensive and accessible youth sexual health curriculum resource area for service providers, parents/caregivers, and youth.
- Advocate for delivering comprehensive sexuality education in all schools throughout the province of Manitoba.
- Support educators with delivering comprehensive sexuality education through professional development and training opportunities.
- Continue to provide CSE sessions, outreach, and consultations to youth in schools and in communities.
- Continue to work with communities to deliver CSE throughout Manitoba, including Northern Manitoba.

Calls to Action:

- Consult and collaborate with SERC during curriculum revisions for K-12 (Provincial Government, School Divisions).
- Increase support of CSE in schools and alternative settings:
 - Support educators to receive professional development and external support to provide CSE in schools and alternative settings.
 - Including CSE as a topic of discussion in school parent advisory committees.
 - Ensuring CSE is required and not optional in schools.
 - Expanding CSE in alternative programs.
 - Provide sustainable funding to CSE in schools and alternative settings.
- Ensure CSE delivery models include an anti-oppressive lens and framework.
- Increase support for parents and caregivers to provide and/or support CSE.

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¹ Reproductive coercion is a form of intimate partner violence used to maintain power, control, and domination over a partner. Examples include: explicit attempts to impregnate a partner against their will, controlling the outcomes of a pregnancy (e.g., forcing an abortion or preventing a person from accessing an abortion), coercing a partner to have unprotected sex, and interfering with contraceptive methods (Miller, Levenson & Silverman, 2010).

² Constantine et al. (2015). Short-term effects of a rights-based sexuality education curriculum for high-school students: a cluster-randomized trial. *BMC Public Health*. 15: 293. Available at: <https://www.ncbi.nlm.nih.gov/pubmed/25886554>.