

Girls, women and sexuality education – the link to achieving the MDGs

Human rights obligations and global political commitments

- The Convention on the Rights of the Child (CRC) provides that all children and young people have the right to access information aimed at the promotion of their mental and physical health (article 17), and that states have the obligation to develop preventive health care, guidance for parents and family planning education and services (article 24). They have the right to education that will help them develop their personality, talents and mental and physical abilities (article 29).
- The Convention on the Elimination of the Discrimination against Women (CEDAW) provides that states parties eliminate any stereotyped concept of the roles of men and women at all levels and all forms of education, including revising text books and school programmes (article 10 (c)).
- The 1994 Cairo International Conference on Population and Development (ICPD) *Programme of Action*, under the objective to achieve universal access to quality education, underlines that gender sensitive education about population issues, including reproductive choices and responsibilities and sexually transmitted diseases, must begin in primary school and continue through all levels of formal and non-formal education to be effective (paras. 11.5 and 11.9). ICPD also outlines that "full attention should be given to the promotion of mutually respectful and equitable gender relations and particularly to meeting the educational and service needs of adolescents to enable them to deal in a positive and responsible way with their sexuality", taking into account the rights of the child to access to information, privacy, confidentiality, respect and informed consent, and in line with the rights recognized in the Convention on the Rights of the Child, and in conformity with the Convention on the Elimination of All Forms of Discrimination against Women.
- The Beijing Declaration and Platform of Action of the UN Fourth World Conference on Women in 1995 addresses many of the same adolescent sexual and reproductive issues as the ICPD and the CRC, as illustrated by the commitment to "ensure equal access to and equal treatment of women and men in education and health care and enhance women's sexual and reproductive health as well as education".

Approximately 16 million adolescent girls aged 15-19 give birth annually - accounting for more than 10 per cent of all births worldwide. In developing countries, complications of pregnancy and childbirth are the leading causes of death within this age-group. It is therefore not surprising that human rights bodies regularly underline the need for education in the area of sexuality and reproductive health.

While the right to education is usually associated with access of children to schools and primary education, there are many other important components to this right, including access to quality content.

With respect to the content of education, in its General Comment No. 3 on HIV/AIDS and the rights of the child, the Committee on the Rights of the Child explains that in compliance with “the rights to health and information [...] children should have the right to access adequate information related to HIV/AIDS prevention and care”, including “through formal channels (e.g. through educational opportunities [...])”. It also refers to the provision of “life skills” education within schools, including on sexuality, underlining that “States parties must ensure that children have the ability to acquire the knowledge and skills to protect themselves and others as they begin to express their sexuality”. In its General Comment No. 4 on Adolescent health and development, the Committee, referring to the right to education, underlines the need to “initiate and support measures, attitudes and activities that promote healthy behaviour by including relevant topics in school curricula” and also that “(i)t is the obligation of States parties to ensure that all adolescent girls and boys, both in and out of school, are provided with and not denied, accurate and appropriate information”, including related to sexual behaviours.

Both the Committee on the Rights of the Child and the Committee on the Elimination of Discrimination against Women have expressed concern in cases where reproductive health and sexuality education is not part of the official curriculum of primary and secondary education.

Millennium Development Goal 2 related to universal primary education mainly focuses on access to education, but equipping young people, and particularly women and girls, with the knowledge and life-skills related to their sexual and reproductive health can greatly contribute towards achieving a wider range of goals: MDG 3 (achieving gender equality and empowering women), MDG 5 (reducing maternal mortality and morbidity) and MDG 6 (combating HIV/AIDS).

Effective sexuality education can provide young people with age appropriate, culturally relevant and scientifically correct information. It includes structured opportunities for young people to explore their attitudes and values, and to practice the skills they need to be able to make informed decisions about their sexual lives. The World Health Organization and other UN actors agree that it is critical that sexuality education be started early, particularly in developing countries, because girls in the first classes of secondary school face the greatest risk of the consequences of sexual activity, and beginning sexuality education in primary school also reaches students who are unable to attend secondary school.

“Notably in my own continent, Africa, with the development of the Maputo Protocol, Governments have committed themselves to a robust roadmap intended to reduce maternal deaths and disabilities directly. Among other things, the Protocol addresses unsafe abortion, strengthening sexual and reproductive health commodity security, with an emphasis on family planning and emergency obstetric care and referral, as well as the provision of sex education.”

Ms. Navanethem Pillay, United Nations High Commissioner for Human Rights
Opening Statement to the Human Rights Council on June 2010: “A Rights-based approach to address maternal mortality and morbidity”