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Statement submitted by International Planned Parenthood Federation, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 30 and 31 of Economic and Social Council resolution 1996/31.

* E/2011/100.

Statement*

The International Planned Parenthood Federation welcomes the focus of the 2011 Annual Ministerial Review. A new agenda of investment in education, especially secondary education, could be the catalyst for achieving the Millennium Development Goals and sustainable social and economic development.

International Planned Parenthood Federation recognizes that education is crucial for the empowerment and the sexual and reproductive health and rights of young people, especially young women and girls. Although there are increasing numbers of girls attending school, only 40 per cent of the estimated 104 million school-age children are female. A survey of governments' reports on human rights treaties showed that early marriage, pregnancy and unpaid work including caregiving were the greatest obstacles to girls' education. An important indicator for progress towards gender equity and empowerment of girls is the ratio of females to males in secondary education as successful enrolment and completion are linked with higher age at marriage for girls, lower fertility and mortality rates, improved maternal care and reduced vulnerability to HIV and AIDS.

Working through 153 Member Associations in 174 countries International Planned Parenthood Federation is committed to promote a comprehensive approach to sexuality education that focuses on specific attitudes and behaviours that promote and respect human rights, gender equality, and sexual well-being. International Planned Parenthood Federation is committed to reaching the most vulnerable and underserved groups with information and services. In doing so, it supports the Report of the United Nations Special Rapporteur on the right to education (2010), in which the topic of the right to sexual education is introduced, placing it in the context of the patriarchy that still exists in many parts of the world.

Education is fundamental to development and poverty reduction. Investing in human potential advances many development goals, from health and gender equity to civic engagement and innovation. The fact that many young women and girls do not complete secondary school has a direct effect on their economic independence and, in many settings, their ability to negotiate safer sex. Educated women have more options than those without, and education equates to more control over their lives. Educated women usually have their first sexual experience later, their first child later and fewer children who as a result are often healthier and better educated. Increasing women's economic opportunities — and control of assets — are a path out of poverty. Each year of secondary schooling increases girls' future wages by 10 to 20 per cent. Globally, most married adolescent girls will not complete secondary education as many leave school early to help support their families. Girls under the age of 16 make up more than 90 per cent of the global domestic work force. Often unskilled and uneducated, many resort to unsafe or exploitative work. Poverty puts girls at a distinct disadvantage in terms of education. In the poorest households, approximately twice as many girls of secondary-school age are out of school compared to their wealthier peers. These girls are less likely to be engaged in income-generating employment, their children are less likely to be healthy, educated or well-nourished and they, and their children, are more likely to die.

* The present statement is being issued without formal editing.

Evidence suggests that girls not in formal education have their first sexual experience and first child early and are more likely to be poor and forced into early marriage, or coerced into sex. They are more likely to leave school early, to have little or no knowledge of sexuality, reproduction or HIV. They are, therefore, more likely to be vulnerable to HIV, to fistula and uterine prolapse, to not have access to contraception or health services, and to have more children close together. Clearly, there is a strong link between Goal 5, especially target 5b, and Goal 4.

Out of 130 million out-of-school young people, 70 per cent are girls. In 19 African countries, the secondary school completion rate for adolescent girls is below 5 per cent. Globally 45 per cent of those newly infected with HIV are young people with girls comprising 60 per cent of the 5.5 million young people living with HIV. Seventy per cent of adolescents in sub-Saharan Africa and South Asia have an unmet need for family planning; complications related to childbirth and pregnancy, including unsafe abortion, are the most common cause of death for adolescent girls.

International Planned Parenthood Federation believes that comprehensive sexuality education involving human rights, HIV prevention, gender equality, sexuality and active citizenship is a crucial part of formal and informal education and that universal access to comprehensive sexuality education is an essential component of any successful strategy for promoting sexual and reproductive health and rights, gender equity and development. International Planned Parenthood Federation believes that comprehensive sexuality education should not be focused solely on health outcomes but should give young people life and critical thinking skills to become active, positive citizens in their communities and nations. The lack of comprehensive sexuality education is reflected in the number of young people (15-24) without comprehensive knowledge of HIV and AIDS. In developing countries worldwide, only 31 per cent of young men and 19 per cent of young women have correct knowledge. In sub-Saharan Africa only 30 per cent of young men and 24 per cent of young women have correct knowledge on HIV.

Comprehensive sexuality education raises individual and community awareness and knowledge of sexual and reproductive health and rights issues. When provided from the primary school level, comprehensive sexuality education informs children and young people about their health and helps them to take control of it at an early age. Equipped with knowledge about how to avoid unwanted pregnancy and sexually transmitted infections including HIV and AIDS, for example, young people can make informed decisions regarding their sexual lives. As per the Committee on the Rights of the Child General Comment 3, paragraph 16, “children should have the right to access adequate information related to HIV/AIDS prevention and care, through formal channels (e.g. through educational opportunities and child-targeted media) as well as informal channels (e.g. those targeting street children, institutionalized children or children living in difficult circumstances)”.

Advancing comprehensive sexuality education is central to addressing obstacles related to young women’s advancement worldwide and, therefore, to reaching the internationally agreed development goals around gender equality. Comprehensive sexuality education provides knowledge and contributes to reducing gender stereotypes and violence against women. It is vital that young men and women hear these messages from a young age and call into question societal norms and practices that are detrimental or discriminatory.

Comprehensive sexuality education also contributes to sustainable development by encouraging young people to be active, positive citizens. Teaching tolerance and learning about diversity can help to foment generations of young people committed to eradicating discrimination, violence, inequality and oppression. Further, providing women with the information about contraception and the benefits of delaying or spacing births can have far-reaching social and economic benefits for them and their families and communities. Comprehensive sexuality education also contributes to ensuring that all young people know their rights and their potential to contribute to development.

Currently, young people are not given the information they need to make informed decisions about their health and well-being in many areas of their lives, particularly sexual and reproductive health. The Committee on Economic, Social and Cultural Rights General Comment 14, paragraph 34, notes that States should refrain from limiting access to contraceptives and other means of maintaining sexual and reproductive health, from censoring, withholding or intentionally misrepresenting health-related information, including sexual education and information, as well as from preventing people's participation in health-related matters. In addition, the Committee on the Rights of the Child General Comment 3, paragraph 16, notes that effective HIV/AIDS prevention requires States to refrain from censoring, withholding or intentionally misrepresenting health-related information, including sexual education and information, and that, consistent with their obligations to ensure the right to life, survival and development of the child.

The lack of information necessary to make informed decisions about the health and well-being of young people has had a major detrimental impact: 111 million new cases of curable sexually transmitted infections occur each year among young people; 4.4 million young women between the ages of 15-19 seek an abortion each year, the majority of which are unsafe; 10 per cent of births worldwide are to adolescent women; every five minutes a young person commits suicide, often due to emotional and social problems related to sexual and reproductive health (e.g. unwanted or unintended pregnancy, sexual violence, etc.). International Planned Parenthood Federation recommends that to implement the goals relating to education and gender equality, it is necessary to ensure that comprehensive sexuality education is included in both formal and informal settings. Formal education settings provide an ideal opportunity to reach young people. However, many young people — particularly young women — leave this setting at a young age. Therefore, any national comprehensive sexuality education programme should prioritize outreach to out-of-school and other marginalized groups of young people.

Finally, sexual and reproductive health services must be available so that young people are able to act upon those decisions. These services should be provided in a youth-friendly manner, with respect for young clients' privacy and a commitment to confidentiality.

Recommendations: Clearly, the approach to education for girls should be joined up. To achieve the internationally agreed development goals, Member States must:

- Ensure that Goals 2 and 3 — universal access to primary education, including comprehensive sexuality education — and gender equality and empowerment are afforded the funding and political priority they deserve.

- Develop effective strategies to ensure comprehensive sexuality education is part of formal and non-formal education programmes. This should be central to any new development framework that follows the ending of the current internationally agreed development goals in 2015. This will require the meaningful engagement of civil society and leadership by young people. In addition, it will require the prioritization in policies and funding by governments.
- Ensure adequate financial resources to implement effective comprehensive sexuality education programmes and interventions to improve the health and well-being of all young people. Ensure that the provision of sexuality education is used as an indicator of the success of educational curricula.
- Meet the educational and service needs of adolescents, by providing access to comprehensive sexuality education and sexual and reproductive health services.
- Reform laws that discriminate against young people (especially young women and girls) or impede their ability to exercise their rights. It is necessary to enhance the monitoring of States' compliance with international human rights obligations in the area of sexual and reproductive health.
- Finally, it is incumbent upon States to do all that they can and to take the proactive steps necessary to achieve sexual and reproductive health and rights and gender equality and the empowerment of young people. Without such progress, the internationally agreed development goals including the Millennium Development Goals will not be achieved.
