EXECUTIVE SUMMARY

Study for the FEMM committee



Comprehensive sexuality education: why is it important?¹

ABSTRACT

This study, commissioned by the European Parliament's Policy Department for Citizens' Rights and Constitutional Affairs at the request of the FEMM Committee, examines the importance of sexuality education as an integral part of sexual and reproductive health and rights of children and young people in the EU. The study presents evidence for the effectiveness of sexuality education and its importance to achieve gender equality, to prevent gender-based violence and to improve health and well-being of young people. It provides an overview of the legal and policy frameworks and describes commitments made by the EU and EU Member States regarding sexuality education. Further, it examines the status of sexuality education in the EU and barriers to its successful implementation. The study concludes with recommendations for the EU institutions and Member States aimed at structurally improving the situation of sexuality education in the EU.

Aim

This study examines sexuality education as an integral part of sexual and reproductive health (SRH) and rights of children and young people in the EU. The study has five main objectives: 1) to present the evidence for the effectiveness of sexuality education; 2) to provide an overview of the legal and policy frameworks regarding sexuality education; 3) to examine the status of sexuality education in the EU; 4) to provide an overview of barriers and challenges related to providing sexuality education in the EU; 5) to present recommendations for improving the implementation of sexuality education in the EU.

Main findings

Based on previous systematic review studies, this report finds **substantial evidence for the effectiveness of sexuality education** on several domains, including increasing knowledge and improving attitudes related to sexual and reproductive health and promoting safe sex practices (including condom use, number of sexual partners and initiation of first sex). There is increasing evidence on the positive effect of sexuality education on gender equitable attitudes, respect for sexual diversity and gender-equitable relationships. Finally, there is evidence for the effectiveness of sexuality education in reducing sexual and gender-based violence. There is limited evidence of the effectiveness of sexuality education on the reduction of the incidence of human immunodeficiency virus (HIV) and sexually transmitted infections (STIs). At the same time, several knowledge gaps and research needs remain, including limited insights into how sexuality education works to achieve its aims and the need for adapted evaluation designs for sexuality education that include clear indicators to measure the outcomes and impact of sexuality education.

Further, at the international level, there is **overwhelming commitment to sexuality education**. Over a period of more than three decades, since adoption of the UN Convention on the Rights of the Child (1989), there has

Full study in English: http://www.europarl.europa.eu/RegData/etudes/STUD/2022/719998/IPOL_STU(2022)719998_EN.pdf



been consistent and continuous commitment to sexuality education at the highest political levels. Two rationales underly the support of sexuality education: sexuality education is embedded in the right of children and youth to access adequate information essential for their health and development, and sexuality education is considered an essential tool to prevent poor health outcomes including violence and abuse and HIV infection. Further, in a number of international policies and commitments sexuality education is emphasized as a key strategy to achieve several human rights, including the right to education, to health, to be free from violence and coercion and the right to gender equality.

Even though the scientific evidence and the political commitment are strong, the actual **implementation of sexuality education in EU Member States is less convincing**. While the majority of EU Member States have mandatory sexuality education, there is a vast diversity in how this is being put in practice. This variety exists in terms of content and delivery methods. The biological aspect, such as anatomy and reproduction, is strongly represented in European sexuality education curricula. Meanwhile, fewer Member States focus on topics related to gender, sexual diversity, sexuality and online media. Also, sexuality education in many countries is not sufficiently inclusive of gender and sexual diversity, as well as representation of specific groups such as young people living with disabilities.

Sexuality education is almost always integrated into one compulsory subject, e.g., biology, or into a few core or elective subjects, e.g., religious and ethical studies, citizenship education, and broader health education classes. Little information is available about the frequency and total hours of teaching sexuality education, especially when it is the part of elective classes and left to the decision of teachers. Only in a handful of countries, sexuality education starts from an early age. Curricula content is often more elaborate for older age groups. In most countries, teachers are not adequately trained to deliver sexuality education, which influences the number of topics discussed, as well as the way these topics are addressed. Although regular monitoring and evaluation of sexuality education is necessary to track the progress and ensure its quality implementation, it is rarely done across EU Member States or these efforts are occasional, mostly being research studies or non-governmental organizations (NGOs) initiatives.

Many societies still hold erroneous beliefs about the effects of teaching young people about sexuality and relationships. These misconceptions are often fueled and spread by organized **opposition**. As a result, provision of sexuality education is often not based on evidence but becomes a politicized issue and remains a topic of debate in many EU Member States. Such debates and opposition obstruct an effective development and implementation of sexuality education in many EU countries. **Implementation barriers** include insufficient training, guidance and support for teachers to deliver sexuality education, lack of access to appropriate curricula and training resources covering a comprehensive range of key topics and underprioritized funding to support effective delivery.

Recommendations

This study identifies key areas in which the EU and its institutions can support the creation of an enabling environment for sexuality education in its Member States, firstly by affirming that the right to education includes the right to sexuality education and that sexuality education contributes to the achievement of gender equality, the prevention of gender-based violence and the improvement of health and well-being of young people.

Further, EU institutions can fund research and monitoring systems on sexuality education, organize the exchange of best practices among Member States, monitor opposition against sexuality education, and politically and financially support organisations that take action against opposition and advocate for and implement sexuality education.

Finally, the report also presents a series of recommendations for Member States. These include the translating the international commitments to sexuality education into operational action plans with an implementation and monitoring strategy and adequate budgets, communicating and working with stakeholders (including

young people and parents), ensuring inclusiveness of sexuality education, and monitoring the sexual and reproductive health and wellbeing of young people.

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 ${\bf External\ Authors:\ Kristien\ MICHIELSEN,\ Mi.O\ Consulting}$

Olena IVANOVA Division of Infectious Diseases and Tropical Medicine, Medical Centre of the University of Munich (LMU), Germany

Research Administrator responsible: Ina Sokolska Editorial assistant: Ewelina MIAZGA

Contact: poldep-citizens@europarl.europa.eu

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