

Following is an email written by me to the Family Planning Association of Sri Lanka on 7 December of 2020. I'm publishing this because believing that it will help to other activists working on sex ed in Sri Lanka besides the FPA.

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When I inquired about making the [FAQ \(on STI s\)](#) on your site available in native languages, your facebook page informed me that you are now working on with government on something related to sex education. So I thought it will be helpful for your attempt making more culturally acceptable, if pointed out few things to consider when making curriculum changes and textbook revisions. In fact recommendations in this email will serve as a basic minimum package of sex ed in Sri Lankan context.

Since the previous attempt of *හතේ අපේ පොත* met some opposition, it would be better to look at why it happened that way despite the book designed with your cooperation is being a very innocent book. First I should say that we should not be discouraged by this opposition which represent the attitude of a handful.

Godamunna's study on '[SriLankan Parents attitude on Sexual and Reproductive Health Issuesof students](#)' which conducted as a qualitative study using 71 parents from Kurunegala district shows that among the parents of Sri Lanka have a great support for SRH education though their rational for sex ed is from abstinence approach. They have a great trust on school textbooks, teachers and doctors. So we shouldn't generalize that opposition as the majority opinion. Even if it were we can convince many of them by helping to them get rid of misconceptions, by holding public seminars for parents involving the religious figures too.

Being a Separate Book It Got More Attention

In the overview of 'A Reference Guide for Sexuality Education in Europe' (also called as SAFE report), they provide some of enhancing and hindering factors on success of sexuality education based on European experiences. One of them is that 'Positive effects of Negative Publicity'. In countries like Portugal not giving so much publicity has been positively affected the process.

So I think providing it as a separate textbook as the major reason. That attracted more attention. The content of the book was about puberty and reproductive health, and was only 27 pages (if extracted just the to the information it may only amount to 4/5 pages) so they may have been added by expanding the chapter on puberty currently in grade 8 health textbook and putting it to the grade 7/6 health textbook. I think if you/gov provided that knowledge within the framework of existing school textbooks, it wouldn't have make such a controversy.

Improve Existing Textbooks Adding Little Chunks of New Information in Textbook Revisions

So it may be wiser to develop existing textbooks by adding little chunks of new information (in textbook revisions) to relevant passages in existing textbooks, rather than giving a whole new book or adding new chapters or new pages. Even if you put explicit information that may not be noticed by many if it has been added as few sentences. But if you've put it as a new chapter or as a few pages it will get attention of the public including extremists. For example current science textbook of grade 7 include reproductive anatomy. But it does not mention how intercourse happen. (Since it's science textbook we can't talk about it in that textbook. So first you have to include same passages into the health textbook of grade 7) You can put it in a textbook revision as just after that passages, limiting to a sentence which says 'penis will be inserted into the vagina.' in a next textbook revision you can improve the sentence 'penis will become hard when aroused and when making love it will be inserted into the vagina and then semen will be ejected from penis.' In this way you can go to any extent as you need. Since the process is smooth it won't get noticed.

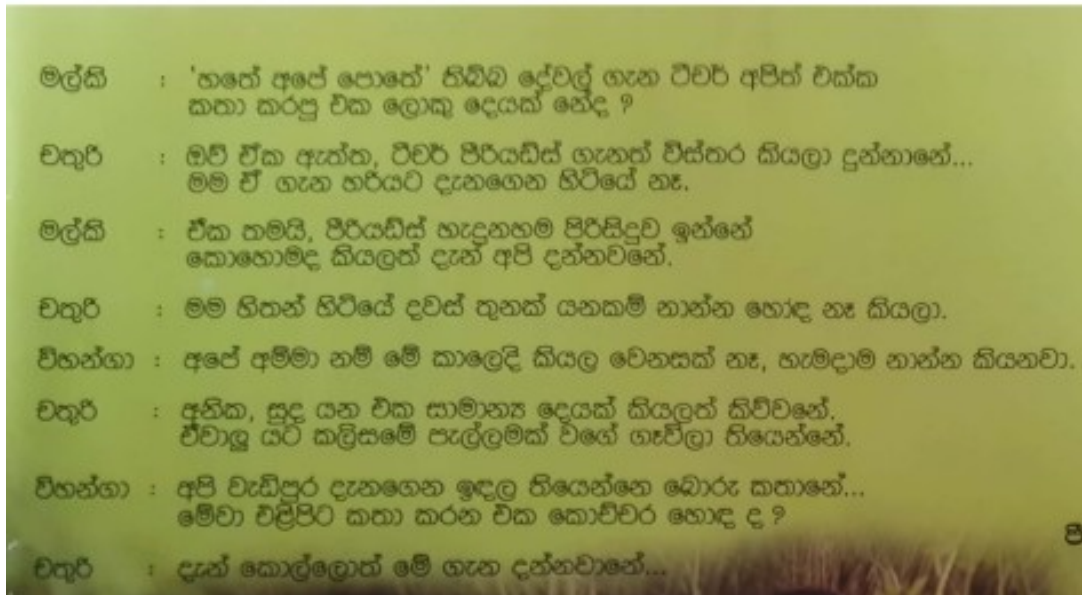
In my view it should be included that about puberty, bodily changes, reproductive anatomy, menstruation, intercourse and pregnancy to the health textbook of grade 6. this is the youngest age we can introduce these topics in current textbook framework. That information won't be able taught in grade 5 since there's no textbooks and teachers maybe reluctant to talk. And adding them before age 12 will fulfill the requirement that children must know about puberty before it happens as WHO says.

But you had to do it gradually. For example you can add lessons on every system of human body including reproductive systems as the first step. (as I remember grade 6 health textbook include lessons on all the systems of human body except the reproductive systems) you can include a brief description on puberty in a next revision and improve it in next three revisions. To accelerate the process you can ask the government to do textbook revisions on relevant books in every year instead of for every 5 years or you can improve the existing lesson bit more when doing a new edition.

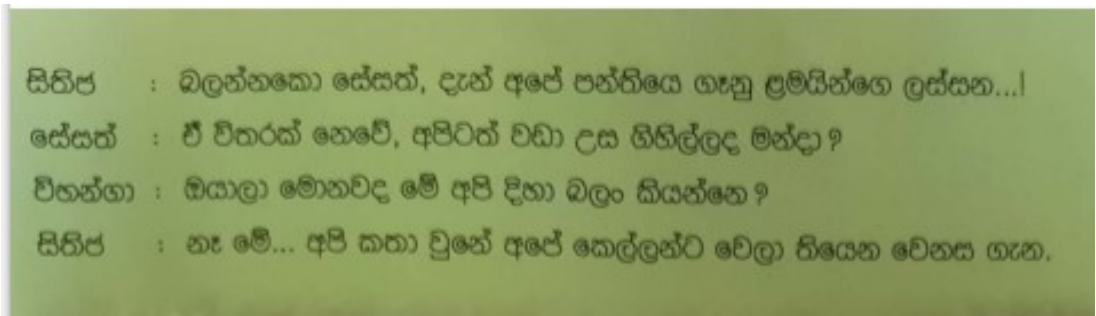
Frank Dialogues of 'භවේ අපේ පොත' Maybe another Reason for Opposition

If we get into the topic of 'භවේ අපේ පොත' again though the content of that book is not unsuitable for that age in any way, (students must have known about puberty before they attain it as WHO say) some dialogues of the book is not culturally appropriate as it seems for me.

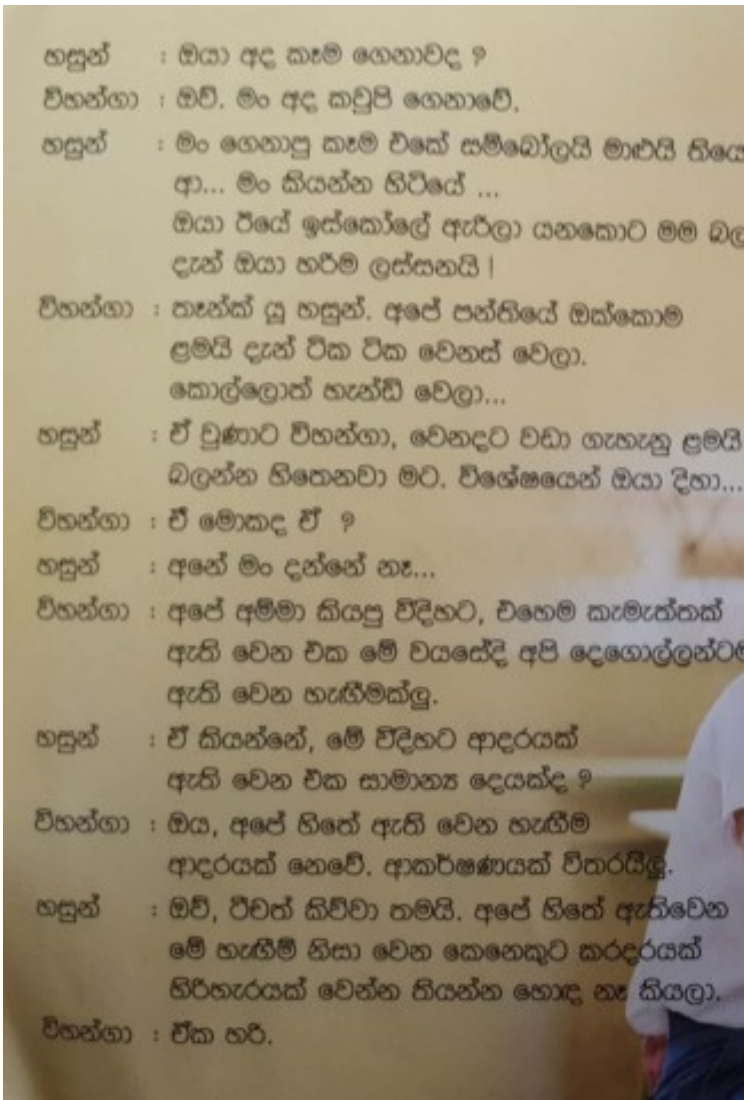
For example, I found following discussion;



what is more unacceptable is that the words ‘දැන් කොල්ලොත් මේ ගැන දන්නවනේ’ This expression is not something necessary for give knowledge required. It has included just for give a certain entertainment for student readers. But involvement of student characters of a school textbook in such a funny remarks related to sexuality will only create the outrage among the public. There are all the possibilities to design that dialogue effectively without children encouraging for such discussions. Children of Sri Lanka watching porn a lot too. So should we put a discussion like one at the end of [this video](#) into textbooks too, to be realistic or to be familiar? No. so same is true for this innocent attempt. There are many such examples in the book.



So it may be wiser to put facts of that dialogue to a female teacher’s mouth who is teaching in a girls school. You can get inspired from the discussion at the pages 25-7 of [Islam textbook of grade 9](#). Or you can include that facts without using a dialogue format as the plain information which textbook provides them. And you should not use speaking Sinhala.



It can be argued that above kind of discussions and frank language will make an open minded attitude towards sexuality. But it is not something to be begin with school. Especially from a reproductive health lessons of grade 7 students.

Sexuality Education for 14 years olds and beyond

Since the students of ages 14 and 15 are in another state of development, puberty related information won't sufficient for them. To them we should provide information more centered on relationships, sexual behavior, pleasure, social norms etc rather than on biology. For example we can include about Intercourse and Pregnancy (more descriptive – according to WHO matrix sexuality education will visit same topics more broadly in late) STIs and Safe sex, role of clitoris, myths on hymen, masturbation. And where to turn when they have a problem (1333, Sumithrayo, 076 66 67 67 67). I think there won't any opposition since this is a mature age. Most adults will approve sex ed when it comes to more adult stages.

But however to face to the accusation that such education will increase early/premarital sex we have to teach it in an abstinence-plus (so called CSE)

approach, teaching about safe sex while emphasizing on marriage and family and discouraging to have sex. In fact we don't need to explicitly denounce youth sexuality for this purpose. It can be easily done by:

- developing refusal skills
- informing about age of consent
- discussing about how cultural norms can be affected sexuality
- advising to think if this will be accepted by my parents if they are puzzled to have or not to have sex, as the best way to decide it

We have to teach these topics in health textbooks of grade 9, for in grade 10 and 11 it's an alternative subject instead of being compulsory. But if we can get into these subjects to age 15 (grade 10) by adding new subject called 'family life education' then it will be more acceptable.

As the students of that age (both in here and abroad) have often said education should be more focused on practical skills and relationships rather than on biology. (TSTO say that Australian students have said so and SAFE report say it too on European countries) But we can't get into sex positions, foreplay and stimulation, sexual problems etc at the 1st step. We have to use gradual method described earlier. For example in the 1st revision you can just describe sexual intercourse and in a later revision you can add diagrams to it. In a 1st edition you can tell only about intercourse and in a later revision you can tell about oral sex too.

Perhaps it maybe wiser to teach sensitive information on sexual behavior via a seminar by health care providers instead of adding them into textbooks. In school we too had few such seminars, But since it was held in including all the classes of respective age we had no option to talk privately and more intimately. And since the teachers were present in the seminar hall we felt less secure to ask more questions though we can send anonymous questions to the question box. So if such seminars held it is better if they can be held it as medium sized groups (about 20-50) in a special private room without allowing any others to be present there. And there must be a turn for every student to talk privately and as his/her problem demands he/she should has the facility to meet the health care provider anytime.

Establish a Youth Clinic or School Nurse

Best way to do this is to appoint a trained school nurse for every school and/or held a youth clinic at school. [Chaturika's study on school counseling services](#) say that school counseling service of Sri Lanka have been greatly ineffective and major reason is that students have no trust on them because their negative attitudes on youth sexuality. It's because counsellors are from teachers. So if you can replace them from an outside health-care providers and with special rooms to talk with them privately it alone will solve the most part of the problem. In Australia a doctor visits schools for every 3 months. In Bangladesh they held a youth clinic for every month. Since

parents have more trust on doctors as [Godamunna's study](#) shows, and since students have told that they can't attend busy health care services in hospitals as shown by [BMC research](#), this will be a working solution. Need not to say that it should be designed in a way so that students have unrestricted access for it and being it non-judgmental and youth friendly. And in a way that students privacy is being protected. And to know whether it's useful and know students suggestions to modify it you can make a way to give their anonymous feedbacks on the counselor/school nurse and on the service by providing a feedback form to them and by directly collecting sealed forms by a representative of you. (as they are doing in some universities and private education institutions)

How to Incorporate Relationships, Gender and Values into SRE

Most advocates emphasis on teaching biological/medical aspects and sexual issues when talking about sexuality education of late teens. But the part most important is that gender issues. Values and attitudes related to gender equality, gender roles, stereotypes, forms of sexism, sexual harassment, respect, mutuality, consent. These are the vital topics to create a more respectful society. But in our school curriculum the only occasion I saw an attempt for such education was the lessons 'women' (pp 139-146) & 'love and marriage' (pp 147-154) of the previous General English textbook (which were the first edition in 2001 and the 12th in 2013). Unfortunately now these topics have been removed from the new textbook. In fact these are not topics should only be a privilege of students who passed GCE (AL) and come from backgrounds who know English.

So it's better to ask the teams designing 'citizenship education textbooks' of gov and teams designing 'Sinhala Language', 'Tamil Language', 'Sinhala Literature' and 'Tamil Literature' textbooks to incorporate these topics in these textbooks. Sexuality education is not being taught as a standalone subject/separate subject it's an interdisciplinary subject which involves many subjects like religion, aesthetics, health, science, citizenship education, language etc. Adding above topics related to gender equality won't meet any opposition. So in that process you can use value based activities to shape their attitudes and frank discussions on topics. (see '[youngmen as equal partners](#)' by RFSU and activities in past General English textbook.)

When talking about love and romance you have to be bit careful, for it won't match and won't culturally acceptable talking about these issues as in an English textbook when it comes to Sinhala/Tamil textbooks. Language is linked with culture. But there's a great solution for this - finding references to these topics from the sources which Sinhala/Tamil culture respect. For example we can add classical Sinhala songs (සුභාවිත ගීත) where talks about love, break up, (criticize) purity as enrichments in Sinhala/Tamil language or literature textbooks. We can find some references from our ancient literature and contemporary literature too. In modern Sinhala literature there are many instances where prominent authors have touched these subjects. You can

ask to add such short stories, poems and novels to Sinhala/Tamil language textbooks. We can use them as teaching moments as the same way Bina Agarwal's 'Sita Speak' poem has been used in General English (previous) textbook.

And it's a timely need to teach about 'how to stay safe in Internet' and behave respectfully when using social media. This can be easily done for now ICT have become a compulsory subject from grades 8 etc. (maybe from 6/7).

As an additional attempt you can conduct workshops on gender issues in schools.

Designing history lessons on Europe in a way that Free Love movements and scientific researches on sexuality, sexual revolutions, and focusing more on renaissance and modern paintings, may make an open attitude towards sexuality.

To Curb the Oppositions

Since we now know that an opposition can be come from Parents or from the religious leaders, it's better to make the awareness among the public on the matter. Here are three things you can do:

1. To face any opposition from Sangha we have to make our own ally, who is supporting our cause by responding to any negative statement by another Sangha on curriculum changes we are going to done. If a group of prominent monks supports us this will reduce the gravity which have those oppose the sex ed and people will think twice. I'm pretty sure that there are many prominent monks who will think moderately. So if you can meet them (as the politicians do) before implementing these recommendations and present your plans and value of it and ask support for it it's better.
2. Further we can put special messages, addressing parents, by a monk as a preface in textbooks (if you are going to incorporate sex ed to current textbooks, this won't be needed. But if you are designing special book like 'හතේ අපේ පොත' or a special book on family studies for 14+ as I recommended this is a must.) to curb any opposition from them, words of Sangha (whether they are correct or not) have a great authority among the people. (It's better to add messages from clergies of other religions too)
3. And it will be better to held a special parents meetings in each schools (This suggestion is something suggested by Kirby D. and was cited in UNESCO ITG vol 1, as I remember and as WHO says certain link with informal role with parents and formal role of school, as can be seen in Estonia too may also be helpful.), involving both a gov doctor and an educated religious leader, both informing the public on the value of sex ed, and how to give it for each age groups and with a Q and A session for them to clear out problems they have when dealing with it. This will give two positive impacts besides enabling

parents to talk sex with their children. It will make students more comfortable and safe since they know that their parents have been advised to not to look as a bad behavior on their sexuality and sex ed needs. And it may make parents tolerant regarding government's sex ed programs.

If the social distance measures and fear of COVID is an obstacle, we can do an educational video/recorded discussion/speech to educate parents on sex ed. And It maybe wiser to get opinions from a group of parents to decide the content of the seminar.

- Sachintha Madushan