

## Module 2: Evidence based approaches to sexuality education for adolescents - Adolescent health and development with a particular focus on sexual and reproductive health - Assignment

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### **Barriers to improve Sexuality Education in Sudan**

1. Individuals, families and communities feel shy to talk about sexuality in the presence of young people.
2. Some religious leaders prohibit others talking to young people about sexuality issues.
3. At a country level, international and UN agencies have no clear activities relevant to sexuality education.
4. The national RH program at Ministry of Health does not include sexuality education in its policy or strategy.
5. The educational curricula at school and university levels, including nursing and medical schools, only include the anatomy and physiology of genital organs, but not sexuality education.

### **Suggestions on overcoming the above mentioned barriers**

Putting in mind Sudan is a conservative Islamic, multi-cultural and multi-ethnic country, we need cautiously to develop a diverse, comprehensive approach to sexuality education.

Parents and communities need to be informed about the necessity on talking to their children about safe sexual behavior. They should be informed about the benefits on talking and the risks, if avoid talking on sexuality issues to young people.

To help parents and others we have to equip them with the knowledge and skills they need to talk openly and frankly about sexuality to their children.

All population segments have to believe that every young person has special sexual and reproductive needs and rights to get the right information and services.

We need to conduct community awareness sessions on the implications of unprotected and unsafe sexual relationships among young people married or unmarried. At a community level, religious leaders should be our key-targeted group and to emphasize that Islam basically is calling for safe sexual behavior, using different tools to achieve that.

Professional societies like Sudanese Ob/Gyn Society can collaborate with others, including young people, to develop sexuality education program, and implement it at different levels. The civil societies can persuade the ministries of health and education to revise the current curricula at schools and universities levels to include age-appropriate topics of sexuality education.

Teachers have to be well trained to provide appropriate relevant information and to help young people to make the right and informed- choice about their sexual behavior and attitudes.

International NGOs and UN Agencies e.g. UNFPA and UNICEF at a country level have to include sexuality education into their country Action Plan, since sexuality education is a vital factor in implementing MDGs.

## **Assignment documents**

1. [IPPF. From evidence to action: Advocating for comprehensive sexuality education. London: IPPF; 2009.](#)
2. [UNESCO. International Technical Guidance on Sexuality Education. Volume I. The rationale for sexuality education. Paris: UNESCO; 2009.](#)
3. [UNESCO. International Technical Guidance on Sexuality Education. Volume II. Topics and learning objectives. Paris: UNESCO; 2009.](#)
4. [UNESCO. Levers of Success. Case studies of national sexuality education programmes. Paris: UNESCO; 2010.](#)