

Code: UNFPA/1/1

Committee: United Nations Population Fund

Topic: Comprehensive Sexuality Education

1 *The United Nations Population Fund,*
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3 *Concerned* by the global lack of Comprehensive Sexual Education (CSE) and access to reproductive health services
4 for all ages,
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6 *Understanding* that Member States have the autonomy to determine what topics regarding sexual education are
7 appropriate for various ages,
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9 *Welcoming* all gender identities and marginalized communities to contribute to holistic CSE advancements,
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11 *Emphasizing* our commitment to the Sustainable Development Goals (SDGs) within the 2030 Agenda for
12 Sustainable Development (2015), particularly SDGs 3 (good health and well-being), 4 (quality education), and 5
13 (gender equality),
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15 *Respecting* Member States' national sovereignty and cultural and religious group's traditional values that may act as
16 a barrier to the eventual implementation of progressive CSE programs,
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18 *Taking note of* studies which demonstrate how the benefits of access to contraceptives on reproductive health
19 outweigh the costs,
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21 *Recognizing* the positive, empowering impact of Sexual and Reproductive Health (SRH) education on the long-term
22 economic opportunities for individuals, especially young women, and the promotion of sustainable populations in
23 the future,
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25 *Concerned* by the lack of adequate transportation available to educators accessing rural areas, especially within
26 nomadic communities, which exacerbates the education and sexual and reproductive health gap between urban and
27 rural populations,
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29 *Applauding* the UNICEF Rural and Remote Education Initiative and Education for Rural People Initiative (ERP)
30 which provides resources and funding for transportation networks,
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32 *Deeply concerned* by the alarming rate of unplanned pregnancies, the spread of the Human Immunodeficiency Virus
33 (HIV), Acquired Immunodeficiency Syndrome (AIDS) and other Sexually Transmitted Diseases and Infections
34 (STDs/STIs),
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36 *Noting* the contributions of the World Health Organization (WHO), United Nations for Youth (UNYA), and Joint
37 United Nations Programme on HIV/AIDS (UNAIDS) in mitigating the HIV and AIDS proliferation through
38 advocacy and scientific research,
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40 *Commending* the United Nations Research Institute for Social Development (UNRISD), and Committee on
41 Economic, Social, and Cultural Rights (ECOSOC) in demographic data collection and analysis,
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43 *Reaffirming* the allocation of funding provided by the General Assembly Fifth Committee (GA5), United Nations
44 Entity for Gender Equality and the Empowerment of Women (UN Women), UN Development Program (UNDP),
45 and ECOSOC in pursuit of gender equality and CSE,
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47 *Acknowledging* the precepts set forth in International Technical Guidance on Sexuality Education (ITGSE) and the
48 Operational Guidance for Comprehensive Sexuality Education towards Comprehensive Sexuality Education for
49 providing a quality baseline for CSE globally,
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51 *Taking note* of the United Nations Children Fund (UNICEF) and United Nations Population Fund (UNFPA) for the
52 collaboration and creation of Maternal, Newborn, and Child Health Support Project (PASMNI), providing female
53 hygienic products internationally,
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55 *Highlighting* pre-existing programs created by the UNFPA and various Member States such as Safeguard Young
56 People Program (SYP) which allow CSE to reach the largest possible audience while addressing multi-generational
57 differences and combating social stigmas,
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- 59 1. *Urges* Member States to implement programs similar to the UNICEF Rural and Remote Education Initiative to
60 broaden the transportation network with shuttles, trains, and other local transportation methods to support
61 qualified local healthcare workers, youth, community leaders, and educators which are:
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 - 63 a. Actively eliminating the sexual and reproductive health gap between urban and rural populations
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 - 65 b. Working in a joint program with Education for Rural People Initiative to overcome the rural versus urban
66 gap in sexuality education;
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 - 68 c. Concentrating information in market and religious centers in order to best reach nomadic populations
69 who traditionally do not have access to CSE;
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 - 71 d. Suggesting that Member States consider the allocation of funding through GA5;
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- 74 2. *Calls* for further studies and research such as those conducted by WHO, UN Youth, and collaborative reports by
75 multiple UN branches which are published for UNAIDS which pertain to HIV and STIs, and Member States
76 wishing to promote the expansion of these programs can:
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 - 78 a. Increase funding and partnerships with UNAIDS and its 11 partner UN organizations to expand and
79 support the response to HIV/AIDS;
 - 80 b. Volunteer health experts or information that could contribute to studies conducted by UN entities;
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 - 82 c. Set a focus on eradicating the HIV epidemic by 2030 in line with SDGs;
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 - 84 d. Present the aforementioned research by these bodies to demonstrate the correlation between better access
85 to CSE and decreased STI rates;
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- 88 3. *Encourages* the deliberate and effective implementation of age-appropriate sexuality education programs in
89 primary and secondary schools regardless of gender or location by:
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 - 91 a. Allowing individual Member States to determine what is defined as age-appropriate education;
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 - 93 b. Building sexuality education curriculum in accordance with the ITGSE to include the topics of human
94 development, relationships, reproductive healthcare, mental health, gender and sexual identity, sexual
95 safety, protective skills, and STDs/STIs;
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 - 97 c. Ensuring that the youth population is equipped educationally by offering demonstrations and discussions
98 to make well informed choices about reproductive process thereby minimizing unplanned pregnancies,
99 abortions, and the spread of illnesses such as HIV/AIDS as per the discretion of Member States;
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- 101 4. *Suggests* that Member States expand infrastructure and education for women and girls that allow access to:
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 - 103 a. Family planning to curb the maternal and infant mortality rates across the international community;
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 - 105 b. Reproductive healthcare products such as contraceptives, menstrual products, and medication;

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- c. Training, education and workshops regarding reproductive healthcare about the short term and long term effects of female genital mutilation/cutting (FGM/C) through rehabilitation, prevention and education for youth;
 5. *Advises* Member States to bridge the intergenerational gap between seniors, adults, and youth regarding CSE by combating social stigma through:
 - a. Facilitating intergenerational communication and compatibility through adult sexual education programs, including but not limited to, reproductive health, gender identity, and the use of contraceptives, in favor of awareness and support for continued education and dialogue through cooperation with ECOSOC;
 - b. Following the model set by the Safeguard Young People Program which implements CSE program education packages in lower income countries;
 6. *Suggests* Member States tailor the implementation of the nine essential core principles of CSE as outlined in the UNFPA Operational Guidance for Comprehensive Sexuality Education (2014) by promoting dialogue between multilevel governmental education and public health departments and the UNFPA to advocate for sexual and reproductive rights within the cultural and religious contexts of individual Member States;
 7. *Invites* fellow Member States to enact comprehensive studies that highlight national demographics and assess the need for investment in reproductive health, ultimately showing the benefit of enacting CSE through cooperation with national health services, ECOSOC, UNRISD, and UNICEF to conduct these studies within local populations;
 8. *Promotes* continued collaboration between UNFPA and UNICEF on projects such as PASMNI, which supplies SRH materials, creates more accessibility to reproductive health materials, educates upon sanitation, and encourages widespread CSE;
 9. *Encouraging* Member States to include marginalized communities and various gender identities in the conversation surrounding CSE by providing specific intercultural communication training to educators within intragovernmental and private sector bodies supported by UNAIDS.