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Population, education and sustainable development

Statement submitted by C-Fam, Inc., a non-governmental organization in special consultative status with the Economic and Social Council¹

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

¹ The present statement is issued without formal editing.



Statement

Placing education at the center of the fifty-sixth session of the Commission on Population and Development is timely, as the world reckons with the heavy cost of the COVID-19 pandemic—and responses to it—on children’s learning, as well as their broader psychosocial development. Indeed, the pandemic and government’s responses to it have raised many important questions about the priority we place on education and the outcomes we expect from it.

Data from around the world show that the loss of in-person learning was costly to both the educational attainment and mental health of many children, and while options for remote learning helped mitigate those costs for some, the brunt was borne by children in low-income families who lacked reliable access to electricity, connectivity, and the necessary devices.

The effect on children’s well-being and ability to learn caused by COVID-19 policies has not been fully determined, but it is certainly substantial. Whether these policies mitigated greater harm or produced a benefit significant enough to warrant the cost is increasingly doubtful. The reckoning currently underway must not be wasted as we consider the way forward.

In any discussion of education, it is important to emphasize that parents have, according to the Universal Declaration of Human Rights, “a prior right to choose the kind of education that shall be given to their children,” and are themselves the primary educators of their children. Thus, the decision to send their children to a school, whether public or private, religious or secular, is an act of delegation. While teachers and school administrators should be valued for the important work they do, and compensated fairly, it is important that transparency be maintained regarding the curricula and materials being used in the classroom, and parents’ voices must be heard in discussions of the content being taught.

Nowhere is this issue more relevant—and contentious—than in the area of education about sex and gender. While “comprehensive sexuality education,” (or CSE), is strongly promoted by UN agencies, it remains controversial in the General Assembly and does not enjoy global consensus. Strong opposition to “comprehensive sexuality education” exists, from local communities to the halls of the UN.

Why the objection to “comprehensive sexuality education?” First, the claims that it effectively reduces negative outcomes for children and youth are disputable; some studies even find that “comprehensive sexuality education” programs are associated with increased teen pregnancy and risk of sexually transmitted infections. Second, the argument that “comprehensive sexuality education” is presented in an “age-appropriate” way is at odds with the fact that “comprehensive sexuality education” guidelines promoted by UN agencies have promoted instructing young children about masturbation and introducing confusion regarding gender identity. For older children, the message of “comprehensive sexuality education” is that all sexual behaviours—including those associated with increased risk of physical harm and disease transmission—are equally valid, provided that consent is obtained.

The normalization of all forms of consensual sexual behaviour, combined with the widespread availability of pornography, much of which contains violent acts perpetrated against women, has led to increases in dangerous acts such as choking and hitting during otherwise consensual sexual encounters between young people.

There are no lasting benefits to adolescents and young people from an early sexual debut, nor from having numerous sexual partners. Indeed, these things can be very costly to their physical, mental, and emotional wellbeing. Proponents of “comprehensive sexuality education” argue that some—but certainly not all—of those

costs can be mitigated by a panoply of “sexual and reproductive health care services” such as tests for sexually transmitted infections, contraceptives, and so-called “safe” abortion. Not surprisingly, many of the same organizations whose funding relies on the distribution of these services are also proponents, and even authors, of “comprehensive sexuality education” curricula, as it serves as a form of advertising for their offerings. Some of these services, such as abortion, are also controversial and not supported by consensus of UN member states. Nevertheless, some “comprehensive sexuality education” curricula explicitly discuss teaching young people to advocate for the liberalization of abortion laws in their countries, and to act as “peer educators” teaching “comprehensive sexuality education” concepts to their friends and classmates.

The theme of “population, education, and sustainable development” has already been used by some advocates to argue that the use of family planning and contraception by adolescents in school, further promoted by “comprehensive sexuality education,” is essential to ensure women and girls receive a full education, with the additional effect of reducing fertility. This argument has many flaws. First, the leading driver of adolescent pregnancy in the developing world is child marriage, which in turn is often driven by poverty. Additionally, if girls are prevented from attending school because their parents cannot afford to send them, or because it is not a safe environment for them, these issues cannot be addressed with contraceptives.

Again, early sexual behaviour has no benefit, especially for girls, whose bodies face the greater risks from pregnancy and sexually transmitted infections, and contraceptives provide an incomplete solution at best. Widely-used contraceptive methods have significant side effects and risks. In particular, injectable contraceptives such as Depo-Provera have been shown to contribute to bone density loss, especially when taken for long periods of time. For adolescent girls, whose bone density is still developing, the long-term effects of using injectable contraceptives can be particularly severe. To ensure the optimal state of health for adolescent girls, they should be empowered to abstain from early sexual activity and care should be taken that school environments are safe for them to attend, free from the threat of sexual assault, whether by staff or fellow students.

If we acknowledge that a true barrier to girls’ educational attainment is early sexual activity, not simply adolescent pregnancy, then we might envision a comprehensive approach to education that is not centered on sexuality, but contains important values and norms that can be applied to sexuality, such as respect for the lives, well-being, and bodies of others. Such a framework of mutual respect regards consent as the bare minimum, not the sole criterion of what is good and acceptable behaviour.

We know that when girls receive primary and secondary education, with the option of further advanced education, they tend to marry as adults and bear fewer children than those who begin childbearing in adolescence. However, care should be taken to promote women’s and girls’ education as a way to enable them to achieve their own goals and ambitions and lead fulfilling lives. Education should not be promoted as a means to reduce fertility in order to curb population growth or meet climate targets. Likewise, it should not be used to steer women and girls into specific fields of study in order to achieve a vision of gender equality that requires strict parity of the sexes in every career area or sector of society.

Similarly, education for both boys and girls should have the goal of imparting knowledge and skills, including critical thinking skills, that will enable them to ultimately thrive as men and women, both in family life and in work. While the decision of mothers and fathers to delegate certain aspects of their children’s education to schools may provide parents with greater opportunities for work outside

the home, the primary purpose of children's education is not to enable them to be separated from their parents for most of their waking hours.

In many countries, there is an expectation that parents must be employed outside the home, and the decision of many governments to shut down schools during the COVID-19 pandemic forced many parents—especially women—to forfeit that income in order to care for their children. Rather than seeing this solely as a loss for women's equality, we might consider how we might construct policies that allow for children to spend more time with their parents and for parents to have the option to spend more time caring for their children—including schooling them at home, if they desire. Such policy discussions would be in keeping with the Universal Declaration of Human Rights, which reminds us that the family is “entitled to protection by society and the State” in addition to being the “natural and fundamental group unit of society.”

Educational institutions are an important part of every society, but they can only serve society well if they first serve the family, including by working closely with parents to ensure that they are delivering instruction that aligns with the values and expectations of parents and not indoctrinating children with concepts that are as unpopular with parents and communities as they are at the UN General Assembly.
