

# Position Paper Regarding the Comprehensive Sexuality Education (CSE) of Young People in Switzerland

*accepted by the Delegates' Assembly of the swimsa on Date in City.  
The original version of this document was composed in German.*

## 1. Introduction

Sexual and reproductive health and rights (SRHR) constitute a cornerstone of healthcare. A holistic sexuality education is essential for personal development as well as health prevention in this field. Comprehensive Sexuality Education (CSE) is an approach towards a timely and age-appropriate sex education based on the guidelines set by the Federal Centre for Health Education (BZgA), the International Planned Parenthood Federation and the World Health Organization (WHO) Regional Office for Europe. Its goal is to provide unbiased and scientifically accurate information regarding different aspects of sexuality. (1) At present, the sexuality education of young people<sup>1</sup> is solely regulated through the educational mandates of the educational institutions. In Switzerland, guidelines regarding sexuality education may differ among various regions. Their quality varies from one educational institution to another.

A comprehensive sexuality education is based on the idea of a continuous process; CSE is not a one-time event that begins and ends in the classroom. A substantiated sexuality education in school provides the opportunity of reaching as many people as possible. This requires the coordination of many factors, as well as educators, in order to ensure a high degree of quality.

This is exactly where the involvement of the various associate members of the swimsa is key. This position paper provides a basis for this involvement and illustrates the swimsa's position regarding "Comprehensive Sexuality Education (CSE) of Young People in Switzerland".

## 2. Current situation

The swimsa acknowledges that CSE plays an important role in upholding SRHR as well as realizing gender equality. CSE is important for the healthy overall development of children and adolescents and it should be ensured by a diverse range of sexuality educators in order to fulfill CSE's integral contribution to healthcare. Despite this importance, to this day CSE has not been accessible to everyone in Switzerland.

---

<sup>1</sup>in diesem Positionspapier beziehen wir uns auf die WHO Definition junger Menschen= 10-24 Jahre. (2)

Sexuality education is regulated locally by the educational institutions and far from all of them adhere to executing it according to the principles of CSE. The cognitive, emotional, physical, as well as social aspects of sexuality are oftentimes lacking, and young people are insufficiently empowered to engage with their sexuality and relationships in a self-determined, respectful, fulfilling, healthy, safe and responsible way. Comprehensive Sexuality Education cannot simply be checked off by teachers via a one-time lesson block. It is a process that takes place during, but also after completion of compulsory education and is reliant on a multitude of key figures such as teachers, parents, physicians, education professionals, young people among each other and counselors. The swimsa hereby acknowledges the need for change and lays down the following principal demands:

### **The swimsa demands, that**

1. ... CSE is accessible to all people as a fundamental right.
2. ... Sexuality education in the whole of Switzerland is carried out according to the comprehensive approach (Type 3) and conforms to the high quality standards of the accepted guidelines and the scientific findings.
3. ... CSE must be provided by a diverse range of sexuality educators.
4. ... CSE must be part of the curriculum in educational institutions.
5. ... CSE will be integrated in extracurricular organizations (especially in healthcare) and after completion of compulsory education, as it is a process that does not end with school graduation.

## **3. Call to Action**

### **The swimsa acknowledges that...**

1. ... CSE plays a big part in upholding sexual and reproductive rights as well as gender equality.
2. ... CSE is important for a healthy overall development of children and adolescents and is therefore an integral part of the promotion of health in general.
3. ... CSE serves an important purpose in the prevention of Sexually Transmitted Infections, sexual violence, trans-, homo- and bi-phobia, gender-specific violence and unwanted pregnancies.
4. ... Sexuality education should go beyond the mere providing of information and prevention of possible negative effects of being sexually active.
5. ... Extracurricular sexuality education alone is not sufficient, as out-of-school sources oftentimes lack the necessary knowledge.

6. ... Sexuality education must be age-appropriate and allow a gradual development of certain topics, and should therefore not constitute a one-time event.

### **The swimsa demands...**

*...of the educational institutions, especially the medical faculties, that...*

1. ... a comprehensive approach regarding SRHR and CSE is integrated and implemented in the formation and training of healthcare professions, and that the trainees' role and responsibilities as key figures of sexuality education is imparted to them through the curriculum.
2. ... all necessary resources are provided, including evidence-based formation and training of teachers as well as external trainers (healthcare staff, educational professionals and young adults trained in sexuality education, and employees of counseling centers, amongst others).
3. ... methods of sexuality education are continually researched, evaluated and improved as to their effectiveness and conformity with the needs of young people and that the needs of the different levels of education and age groups are more strongly taken into account.

*...of the hospitals and service providers in healthcare, that...*

1. ... they cooperate actively and interdisciplinarily with key figures of sexuality education, in order to guarantee an exchange of information so that sexuality is considered in a comprehensive way according to CSE.
2. ... medical staff participate in regular courses regarding CSE-topics in order to provide clinical care devoid of judgment and reflecting the comprehensive approach towards SRHR.

*.. of the federal government and the cantons, that...*

1. ... the legal basis for the promotion of compulsory, evidence-based, age-appropriate, culturally sensitive and comprehensive sexuality education is substantiated in formal and informal educational facilities from a young age; for example by making CSE a compulsory school subject in both elementary and secondary schools, with clear minimal standards and learning objectives.
2. ... sexuality education in every canton of Switzerland complies with the standards of CSE according to international guidelines, is evidence-based and performed at a high standard.
3. ... educational institutions have the duty to hire external specialists, professionals in sexuality education and trained young adults for CSE classes and to provide the necessary resources such as time, rooms, and funding.
4. ... sufficient resources and funding are provided for the continuous training of key figures, including, but not limited to, instructors and medical service providers. This to ensure an evidence-based CSE of high quality.

5. ... Pro-abstinence programs (Type 1) may no longer be carried out in Switzerland, as they do not have positive effects on sexual behavior or reducing risks, while extended strategies (Type 2) exhibit the desired effects.

*.. of the members of the swimsa and all the other learners and students in healthcare, that...*

1. ... they are cognizant of their role as key figures of CSE and that they enquire and further educate themselves accordingly.
2. ... they acknowledge, support, actively engage in as well as promote and develop the current projects in SRHR.
3. ... they encourage, promote and implement new projects in SRHR. They should be evidence-based, sex-positive, human-rights based, empowering, age-appropriate, and follow local, national and international CSE guidelines.

### **The swimsa advocates for...**

1. ... a CSE that is accessible to everyone and adapts to individual backgrounds and needs such as age, gender, cultural background and physical or mental capabilities.
2. ... young people being supported in the forging of their sexual identities through CSE and that their sexual self-determination is made a focal point.
3. ... sexuality education being performed by various key figures of sexuality education according to CSE standards and with a nationwide, comprehensive, multidimensional and interdisciplinary approach.
4. ... the compliance with the goals for sexuality education set by the WHO Regional Office for Europe and the BZgA.
5. ... the extensive acknowledgement of the work performed by the swimsa through CSE projects and that they are supported and promoted both conceptually and financially.

## **4. Main Text**

### **What is Comprehensive Sexuality Education (CSE)?**

Comprehensive Sexuality Education is a timely and age-appropriate approach to sexual education that is based on the guidelines set by the Federal Centre for Health Education (BZgA), the International Planned Parenthood Federation and the World Health Organization (WHO) Regional Office for Europe. Its goal is to provide unbiased and scientifically accurate information regarding different aspects of sexuality.(1)

### **What does «comprehensive» entail?**

The «Comprehensive» component, «ganzheitlich» in German, points to the fact that this approach to sexual education encompasses all the cognitive, emotional, physical as well as social aspects of sexuality. Besides the anatomy and biological functions of the reproductive organs, topics such as puberty, Sexually Transmitted Infections (STIs), Contraception, healthy sexuality, gender diversity, sexual orientation and gender identity and discrimination based on those, relationships, consent, pornography, legal basis, sexting, abortions, media and gender roles are covered. The comprehensive approach does not reduce the idea of sexuality to the act of sexual intercourse and its negative effects. (1)

“Comprehensive” further means that sexuality education must be age-appropriate, and therefore the depth of detail must be adapted to the needs and interests of the respective age groups. This means that a gradual development of certain topics is necessary, and that sexuality education should not be a one-time event. (1)

### **Three categories of programs for sexuality education**

Sexuality education programs can be organized in three categories. (1)

- Type 1 are programs that intend for the abstention from sexual intercourse (“Pro-abstinence programs”)
- Programs of Type 2 see abstinence as a viable option, but still discuss contraception and protected sexual intercourse (“extended sexual education”)
- Type 3 programs include elements of Type 2, but go beyond those and put them in a broader context with the coming-of-age and personal as well as sexual development (comprehensive sexuality education, CSE).

A study from the United States shows that Pro-abstinence programs (Type 1) have no positive effects on sexual behaviour and reducing risks, while extended strategies (Type “) exhibit the desired effects.

### **What is CSE’s goal?**

By conveying knowledge, competences and values, CSE wants to empower and encourage young people to engage with their sexuality in a self-determined, respectful, fulfilling, healthy, safe and responsible way. CSE wants young people to be aware of and stand up for their sexual rights.

### **Who imparts CSE?**

Sexuality education is a multidisciplinary task and should occur through various entities and from various perspectives, in order to allow for a comprehensive educational concept. For example, extracurricular sexuality education solely provided by parents is not sufficient because out-of-school sources oftentimes lack the necessary knowledge. (1)

Key figures in sexuality education consist of teachers, parents, physicians, educational professionals, young people amongst each other and counseling centers, all complementing each other. (3)

### **Why CSE?**

The access to CSE is acknowledged by the swimsa as a fundamental right for children, adolescents and adults and plays a central role in implementing and attaining SRHR. Thus, CSE is embedded in parts of the “Universal Declaration on Human Rights” as the “protection of health, well-being and dignity” and can also be found in the sexual and reproductive rights defined by the WHO, in the UN’s Conventions on the Rights of the Child, as well as being acknowledged as a human right in declarations by NGOs such as the IPPF (International Planned Parenthood Federation) and WAS (World Association for Sexual Health)(1,4,5,6,7).

Furthermore, CSE is essential for the success of many “sustainable development goals” of the 2030 “Agenda for Sustainable Development”, goals like „Good Health and Wellbeing“, „Quality Education“, „Gender Equality“, to only name a few.(8)

CSE is important to allow for a healthy development of children and adolescents and is therefore an integral part of the promotion of health in general. A substantiated and extensive knowledge about sexuality is the foundation for self-determined decisions regarding one’s own body and contributed to the empowerment of children, adolescents and adults.

CSE serves an important scientifically proven purpose to the prevention of Sexually Transmitted Infections (STIs), sexual violence, Trans-/Homo-/Bi-phobia, gender-based violence and unwanted pregnancies. (9,10) In addition, CSE plays a key role in achieving gender equality. (10)

CSE allows for the experiencing of sexuality as a significant aspect of health and well-being by considering various dimensions of sexuality and advocates for a healthy sexual life free from stigma, shame and discrimination.(11) It has been proven scientifically that sexuality is not limited to biology, but encompasses several dimensions such as psychology, culture, morality, spirituality, as well as social, cognitive, affective, and sensorial issues.(12) Thus, CSE goes beyond the mere conveying of information and the prevention of possible negative effects of being sexually active.(12)

### **Sexuality education in Switzerland**

Every child and adolescent in Switzerland has a right to sexuality education. As was established above, sexuality education forms the basis for promoting sexual health. It begins at home and continues in school for preventive and educational purposes. Furthermore, it takes place everywhere children and adolescents live and meet with each other. (9)

At a national level, there is no specific strategy for sexual health or sexuality education. There is only the program “HIV and other sexually transmitted infections” (in German NPHS). The goal of this program is to reduce the number of new infections and to



reduce the long-term damages of STIs. A notable example of this program is the “LOVE LIFE” campaign.(13)

The federal government supports development-oriented sexuality education; its implementation however lies with the cantons and is elaborated in every cantonal curriculum. German-speaking Switzerland uses the “Lehrplan 21”, the French-speaking part the “Cadre de référence” and in Ticino they use the “L’educazione sessuale a scuola: raccomandazioni operative”. The implementation of sexuality education cannot be discussed for Switzerland as a whole, being that there is no nationwide model.(13)

Interviews have shown that in many parts of Switzerland, sexuality education performed by teachers is still oriented towards a Type 2 program (closer to biology and science) than a Type 3 program. The promotion of emotional and comprehensive competences is usually provided via external specialists. The financing of such specialists varies considerably and is funded through cantons, communes or with school resources. (13) In the Romandie, sexuality education is implemented with the help of a “modèle de coopération”. This cooperation model is based on the biological aspects of sexuality education being imparted by the teachers, with added support by external specialists. This external support is obligatory. This model is well-established, proven and undisputed.(13)

In the German-speaking part of Switzerland, sexuality education is defined in the “Lehrplan 21”. It does not feature a specific subject regarding sexual education. The topic is covered in the department of Nature, Human and Society (in German, NMG). Sexuality education is thus not part of testing and the amount and quality of sexuality education received by young people strongly depends on the teachers’ commitment. Additional support by external specialists varies from one school to another and changes depending on financial resources. (13)

In Ticino, the approach is more teacher-based, while the task force (GLES) supports the schools in an advisory function. External specialists may be used if needed – however, teachers remain in the classroom during those classes. (13)

### **Principles of Comprehensive Sexuality Education (CSE)**

CSE should be accessible to every person. It should acknowledge the individual backgrounds of different target groups and adapt to their needs, i.e. regarding their age, gender, cultural background and physical or mental disabilities.(3)

A sex-positive approach acknowledges that all people are sexual beings with sexual rights, independent of age, gender, religion, sexual orientation, HIV-status or physical and mental capabilities. The contents of CSE reiterate the right to self-determination, the appreciation of diversity and the equality of all genders.(3)

A sex-positive approach promotes the development of sexual competences and the associated ability to take autonomous and independent decisions regarding relationships and/ or sexual activities without guilt or feelings of shame.(11)

Accordingly, CSE should be performed in total compliance with Type 3, which acknowledges a greater link between coming-of-age and personal as well as sexual development and does not simply strive for abstinence (Type 1) or contraception and protected sexual intercourse (Type 2).(1)

CSE should guarantee that every young person understands their right to and their control over their own sexuality and their sexual well-being. (3)

Sexuality education should follow methods that were examined for quality. The basis for this should be the newest scientific findings, both on a content and pedagogical level. (3)

The methods used should allow for the interaction of learners among each other and with educators, as well as be adapted to the age, the knowledge as well as the emotional, social and physical development of young people.(3)

CSE should take place in a open environment devoid of judgment, that allows learners to ask and discuss questions about sexuality and sexual health without fear. The learners' privacy must be respected at all times and the confidentiality of personal information must be ensured.(3)

Sexuality education is a multidisciplinary task and should occur through various entities and from various perspectives, in order to allow for a comprehensive educational concept.(3)



## 5. Works Cited

1. WHO-Regionalbüro für Europa. "BZgA (2011) Standards für die Sexualaufklärung in Europa." Rahmenkonzept für politische Entscheidungsträger, Bildungseinrichtungen, Gesundheitsbehörden, Expertinnen und Experten. BZgA, Köln (2019).
2. <https://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-definition.pdf>, Zugriff am 26.09.20
3. bvmd, Positionspapier: "Sexualaufklärung junger Menschen in Deutschland", Freiburg (2018)
4. UN General Assembly. "Universal declaration of human rights." UN General Assembly 302.2 (1948).
5. <https://www.kinderrechtskonvention.info/uebereinkommen-ueber-die-rechte-des-kindes-370/>, Zugriff am 23.4.2020
6. International Planned Parenthood Federation. "Sexuelle Rechte: Eine IPPF-Erklärung." United Kingdom, London (2009)
7. World Association for Sexual Health. "Declaration of sexual rights." (2014).
8. <https://www.un.org/sustainabledevelopment/sustainable-development-goals/>, Zugriff am 26.09.2020
9. <https://www.bag.admin.ch/sexualaufklaerung>, Zugriff am 23.04.2020
10. <https://www.ippfen.org/resource/sexuality-education-and-sustainable-development-opportunities-eu-development-cooperation>, Zugriff am 23.4.2020
11. IFMSA, "Policy Document on Comprehensive Sexuality Education", General Assembly March Meeting, Slovenia (2019)
12. Prüfung der Grundlagen zur Sexualaufklärung. Bericht des Bundesrats in Erfüllung des Postulates 14.4115 Regazzi vom 10. Dezember 2014. Bern, Februar 2018.
13. Expertenbericht Sexualaufklärung. Sexualaufklärung in der Schweiz mit Bezug zu internationalen Leitpapieren und ausgewählten Vergleichsländern. Bern, (2017).