



Say It Isn't Sex: The Politics of Sex Education in the Philippines

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Abstract

This article raises the issue of the urgent need to articulate a relevant policy framework in order to begin approaching the issue of establishing Sex Education policy in the Philippines. It highlights some important changes within the last decade, among others, emerging articulation of sexual and reproductive rights frameworks in the context of human rights discourse. Given this context, the paper also reviews past and present Philippine initiatives and programs related to Sex Education, particularly under the Population Education program and makes some key recommendations for future policy directions.

Keywords: International Conference on Population and Development sex education, population education, reproductive rights.

Introduction

For decades now, the public debate about the issue of Sex Education in the Philippines has been stuck in the same place. It certainly has not helped that proponents and critics have constantly been portrayed as being on either side of the abstinence versus contraception debacle.

For years, the Catholic hierarchy, which remains the sole albeit loud opposition that stands against the adoption of Sex Education Programs in schools has

maintained that matters of Sex Education are a concern that should be left to the parents.

The Catholic Bishop Conference of the Philippines (CBCP) through Dr. Angelita Aguirre, head of Human Life International, an attached organization of the CBCP's Episcopal Commission on Family and Life, denounced the plan of the education department to teach high school students on the proper uses of contraceptives such as condoms and pills.

In her letter to the Department of Education, she also said to that "if teenagers should be taught sex education, their parents should be the one to teach them."¹

Unfortunately, articulating the issue this way has always tended to narrowly focus the policy question as far as Sex Education is concerned: Do schools have any business teaching Sex Education?

Literally, the way the issue is framed reveals how "sex," as something very much traditionally regarded as confined to the realm of the "private," is being brought out into the public sphere, that is into the realm of state programs and policy, and how the conservative Catholic hierarchy remains opposed to such change.

Positions on Sex Education Policy and their Ideological Bases

Interestingly, the Catholic Church's position literally banning the teaching of Sex Education in schools has remained fairly consistent, tracing its origins from a Pre-Vatican II enunciation of Pope Pius XI in his encyclical *On the Christian Education of Youth* way back in December 31, 1929:

"65. Another very grave danger is that naturalism which nowadays invades the field of education in that most delicate matter of purity of morals. Far too common is the error of those who with dangerous assurance and under an ugly term propagate a so-called sex education, falsely imagining they can forearm youths against the dangers of sensuality by means purely natural, such as a foolhardy initiation and precautionary instruction for all indiscriminately, even in public; and, worse still, by exposing them at an early age to the occasions, in order to

accustom them, so it is argued, and as it were to harden them against such dangers.”²

On the other hand, relatively recent developments in human rights discourse in the past decade have led to radical changes around traditional notions of states and citizenship and in this case, basic notions of rights and rights claiming.

Of particular historical import is the International Conference on Population and Development (ICPD) Program of Action in 1994. In many countries including the Philippines, pre-ICPD policies in relation to population took on the usual population control frame, emphasizing a direct state mandate to reduce birthrates:

“SEC.10 It shall be the responsibility of the State to achieve and maintain population levels most conducive to the national welfare. (Article XV, 1973 Constitution)”

In fact the earliest attempt to address sex education policy in the Philippines in 1972 was precisely under the Population Education Program (PEP), created by the Department of Education Culture and Sports (DECS) Department Order No. 19.

The core areas of PEP were demography, determinants of population change, consequences of population change, human sexuality, reproduction and planning for the future. The United Nations Population Fund (UNFPA) funded it as the First Country Project.

Population Education was taught in all three levels of formal and informal education subsystems. For elementary and high school it was integrated in Social Studies, Home Economics, Science, Health and Mathematics. In the tertiary level it was either a requisite or elective course. By 1974, a Population Education Program Unit was created under the Office of the Secretary of DECS.

UNFPA's second country project which began in 1980 was initially aimed again at the population education requirements of secondary and non-formal education but was later changed and redirected to support regional institutions (a total of 8 were set up outside the National Capital Region or NCR) to work on population education.

A review of past course materials developed in the Population Education Program(PEP) shows a bias for demography and biology as the main subject areas,

characteristic of a pre-ICPD framework influenced by the Malthusian formula directly attributing dwindling resources to a “population explosion.” The PEP unit of the DECS was eventually transferred to the Bureau of Secondary Education in 1988.

Sex, State and the ICPD: The Emergence of Rights-based Frameworks

With the advent of ICPD adoption at Cairo, feminists like Sonia Correa noted that among others, the ICPD ushered in the revision of the neo-Malthusian paradigm, which hitherto influenced demographic target oriented platforms for most states. Still, in some countries, outright Draconian measures not excluding forced sterilization were fairly common.

“The link between reproductive health and rights, through a perspective that encompasses the premise of equitable development and human rights, led to an agreement among women’s health activists in January 1994, at a meeting in Rio de Janeiro, to achieve a consensus on how to approach the ICPD in Cairo. This meeting was the grounding for the efforts at ICPD to revise the neo-Malthusian paradigm which for 30 years had prevailed in the population field. Two conceptual elements were crucial to this effort: the premise of the indivisibility of human rights and the notion of an “enabling environment” for exercising those rights (economic, social and political conditions).”³

These developments alongside State commitments made on a range of areas such as women’s rights, equality and non-discrimination, right down to the rights of children, have had a huge impact on how states are being challenged to perform their mandates around erstwhile available programs and services, which includes articulated policies on Sex Education.

In articulating “reproductive health,” and particularly, “adolescent reproductive health,” matters of sex, in relation to the right to life, health and the quality of life were all heralded as the new articulation of state mandates vis a vis population, signaling a shift from “population control” centered policies in the past. States are not only obliged to protect and promote “rights,” but are duty bound to provide the enabling conditions for their exercise.

“Reproductive health is a state of complete physical, mental and social well being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and its functions and processes. Reproductive health therefore implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so... Sexual health aims to enhance life and personal relations and not merely counseling and care related to reproduction and sexually transmitted diseases.”⁴

Yet even before the ICPD in 1994, the adoption of a new Constitution under the Aquino administration, which was installed via the popular uprising in EDSA in 1986, the Philippines had already purportedly abandoned the state policy embodying demographic centered targets.

In the seventies, program effectiveness was measured largely (and exclusively) by virtue of the number of ligations performed, intra uterine devices (IUDs) inserted or contraceptives distributed.

Meanwhile, even as the ICPD reworked notions about the population and development mandate of states in the context of addressing human rights, the Beijing Platform for Action which was adopted the following year (1995), essentially underscored the marked disadvantage of women and girls in terms of the political, social, economic and how often they lacked even personal autonomy in the family and the community.

By adopting an analysis of gendered power relations, the Beijing Platform articulated no less than an agenda of women's empowerment:

“The objective of the Platform for Action, which is in full conformity with the purposes and principles of the Charter of the United Nations and international law, is the empowerment of all women. The full realization of all human rights and fundamental freedoms of all women is essential for the empowerment of women. While the significance of national and regional particularities and various historical, cultural and religious backgrounds must be borne in mind, it is the duty of States, regardless of their political, economic and cultural systems, to promote and protect all human rights and fundamental freedoms. The implementation of this Platform, including through national laws and the formulation of strategies, policies,

programmes and development priorities, is the sovereign responsibility of each State, in conformity with all human rights and fundamental freedoms, and the significance of and full respect for various religious and ethical values, cultural backgrounds and philosophical convictions of individuals and their communities should contribute to the full enjoyment by women of their human rights in order to achieve equality, development and peace.”

With the transition to “democratic rule” under Corazon Aquino, government, church and other civic groups have increasingly come to influence the content of later day “population education” in the school curriculum.

In 1987, the DECS issued a department bulletin entitled Information Campaign on Acquired Immune Deficiency Syndrome (AIDS), which included prevention messages and suggested strategies in integrating AIDS prevention concepts into the curricular and co-curricular activities in secondary and tertiary levels. Yet even Human Immunodeficiency Virus (HIV) AIDS education and information campaigns were often marred by Catholic Church opposition to the mere mention of condoms, leading to abstinence only messages which steered clear of any references to condoms.

By 1997 the existing population education curriculum, Core Messages and Key Concepts of Population Education, was jointly revised by the UNFPA and DECS, supposedly taking into account the developments in the ICPD and the Beijing Declaration among others. The effort purportedly signaled the adoption of the “population and development” themes of the conventions, moving away from the “population control” framework of the 70s. This time, strategic focus was directed towards values education by discussing Responsible Parenthood, Family Planning, Reproductive Health, as well as Gender, following the adoption of both the ICPD and the Beijing Platform of Action

On the other hand the same materials on what continued to be called “Population Education,” produced with UNFPA assistance by 1997 were still replete with articles reinforcing the gender stereotypes as well as a host of other traditional restrictions on sexuality and sexual behavior.

The following excerpt from a key reading appears in an article by Ceferino Zaide, Jr. discussing the Filipino family:

“In a survey conducted in Manila in 1965, the average size of a household was 6.4 members. In a typical barrio in the province of Laguna, the average number of children was four (4). In some Filipino families where extra family members are included, the husband’s family predominates. This trend of having husband’s relatives indicate the type of authority in the family.”

The same author continues in the article (which is the first resource in the compilation):

”The petty details of housekeeping and finances are left to the mother. The father is usually excused from menial household tasks such as dishwashing, yard sweeping or house cleaning. The more strenuous jobs are allotted to him, such as planting, wood chopping, pounding palay or repairing the house.”

“Families are positioned as emerging from a sequence of events or stages: friendship, courtship, dating, intimacy, engagement, commitment, and marriage. Virginity, chastity, being single, and religious vocation are discussed and supported at different points in the formation of families.”⁵

Responsible sex is positioned exclusively as monogamy within marriage, and virginity before marriage. This reinforces the double standard and again burdens women with a very limited view of sexuality, one focused solely on motherhood.

Furthermore, the same curriculum maintains that the size of the family should be planned and that this can be achieved through “natural” or “artificial” means. It does not discuss any of these artificial means but it mentions that the Catholic Church endorses only one form of contraception and prescribes abstinence outside marriage. It also fails to mention that numerous other Christian sects apart from the Catholic Church, as well as Islam and other religions, do permit and at times even endorse the use of artificial contraception in Family Planning.⁶

In 1999, a DECS Memorandum created the Task Force on Adolescent Health” identifying the risks confronting teenagers such as : “unwanted pregnancies, the increasing prevalence of drug abuse, and HIV/AIDS.” Memorandum No. 228 supposedly created the Task Force to “strengthen the various health-related programs and services that specifically address the physical, social and emotional needs and interests of adolescents.”⁷

By 2000, then DECS Secretary, the late Bro. Andrew Gonzalez, a former Catholic School Administrator, claimed that while the school-based AIDS Educational Project was planned for implementation, *student demonstrations* were held at DECS, denouncing the integration of AIDS prevention in several subject areas before it could take off the ground.⁸ Organized by Catholic schools, the protests echoed the Catholic hierarchy's position and opposition to condom use.

The latest Lesson Guides in 2006 is the latest UNFPA sponsored project to address sex education anew.

Crossing the Sex/Gender Ideological Divide

Yet despite revisions following both the ICPD and the Beijing Platform of Action, the Department of Education's modules and guidelines under population education, have a striking similarity, as far as most dominant notions about sexuality and gender roles go.

To its credit, the current guidelines have been revised to reflect and address issues about sexuality in more "first-hand" settings instead of heavily technical and therefore tortuous, methods of past PEP program modules and guidelines which emphasized demographics. However a lot can still be said about the basic concepts which touch on sex/gender roles and ultimately views about sexuality in the new guidelines, which while mentioning terms such as gender equality, human rights, are definitely not elaborated on.

A review of the current guidelines demonstrates how the impact of "Reproductive Health" paradigms seem to have been limited to a more comprehensive inclusion of topics such as Sexually Transmitted Diseases and HIV/AIDS. Topical assignments and content are still mostly delimited to the heavily biomedical, in terms of information and nary an integration of relevant concepts in rights, gender equality alongside so-called "values" is found in the guides.

On the other hand, "values" education adopted to facilitate much needed "life skills building" approaches, still have a clear tendency to reinforce and accept without much question, dominant notions on sexual morality, and as a consequence, also reinforces dominant sex/gender stereotypes, including sex discrimination,

which unfortunately have barely been addressed in the context of education reforms.

The urgency of addressing gender relations and sex/gender cultural stereotypes in sexuality education is highlighted in part by the results of the 2004 Young Adult Fertility Survey by the University of the Philippines Population Institute (UPPI) which found that:

“Thirty percent of those surveyed said their first sex experience was forced and unplanned, while 42 percent said they wanted or planned the experience. In 1994, 10 percent indicated that their first sex experience was forced or rape.”⁹

UPPI President Dr. Corazon Raymundo noted that : “More disturbingly, the students raised alarm bells because of the increasing incidence of forced sex or rape observed among the youth, particularly among girls and students. Many of them succumb to sex because of drug intake, alcohol intoxication, and “love.”¹⁰

A 2003 Policy Project Report discussed the relationship between gender and power in the Philippine context, noting: “For Filipino women, a double standard exists concerning appropriate sexual comportment prior to and after marriage.”

The report points out that : “Young girls are supposed to control the pace of a relationship prior to marriage. The burden is on the girl to say no, to say how far they can go, [and] to decide what is permissible and what rules apply in a relationship. There is a certain rationale involved in that it is a girl’s responsibility to anticipate and direct the timing of sex. And a lot of premarital sex is close upon or in anticipation of marriage, at least for girls...A girl learns to play the game and juggle the risks. She knows that if she goes all the way and the man doesn’t marry her, her reputation is destroyed or ruined. After marriage, the role of the female changes...[Now] she has to give in to her husband’s sexual preferences whenever he wants them. So in both situations she is disempowered.”¹¹

The same UPPI study where respondents were 15-24 years old, married women with experiences of sexual coercion (rape) prior to marriage, were the same ones who reported experiencing sexual coercion (rape) within marriage.¹²

In the end, the premise of any framework for adopting Sex Education policy cannot be sufficiently stated as that of insuring “sex education” the classroom.

The fact is, the concepts of sex and gender have always been taught in schools. Indeed it is often in school and within the context of formal education that the basics of gender stereotyping and sex discrimination are introduced, reinforced and in turn naturalized among young people.

Indeed, values such as human dignity, respect, women's empowerment, gender equality are certainly not as common as they ought to be, even as they are themselves values associated with Human Rights principles.

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One aspect of gender stereotyping is sex discrimination as well as gendered beliefs about sexual behavior. The same basis which makes it normal for women and girls to be entitled to less than what men have, their work

to be of lesser value and thus their opportunities more limited, also normalizes a double standard in sexual behavior and responsibility.

In fact, despite highlighting the importance of condoms in STD and HIV/AIDS prevention, the rate of condom use among Filipino men remains one of the lowest in the world. Notably, majority or emerging cases of HIV infection in the country are among monogamous women married to overseas workers.¹³

Feminist Marriane Whatley notes: "the elimination of biological determinism should be the goal of Sex Equitable Sex Education."

"Until the biological determinist view is questioned, sexuality education can never be sex equitable, for what flows from this model is a belief in the inevitability and inflexibility of "sex roles"; a double standard as to sex drive, sexual behavior, and sexual responsibility; the equation of sexual activity with heterosexual intercourse."¹⁴

As a pre-requisite to achieving sex-equity, Whatley also calls for the critical review of scientific sexology itself. The idea that science is “value-free” (read: non-sexist) ignores the fact that scientific research is carried out in a given social, cultural and political context.

“Under the pretext of science, objectivity and the acceptance of harm minimization as a valid approach to sex education for all age groups, sex education for the adolescent has tended to be taught with an emphasis on biological function. The result has been to minimize the importance of the total human experience.”¹⁵

Often, purely biomedical models on providing information on sex and sexuality, are passed off as neutral, but more often than not, only leave dominant views and beliefs about sexuality undisturbed.

A growing emphasis of life skills and peer-led approaches based on successful models by many NGOs, have also been noted as important alternatives. A Review of a UNESCO Project Grant to train teachers on HIV/AIDS education made the following recommendation:

“Life skills, sex education (human sexuality, sexual orientations, sexual practices), reproductive health and drug abuse should be addressed in the generic manual. Then, with regards to the adaptation of the generic manual, it will be up to the country through an inter-sectoral working group to decide whether they will keep, adapt, or cut these topics. Learner-centered methodologies transfer knowledge, skills, and attitudes should be taught through concrete learning activities, not separately.”¹⁶”

“By far, the most common criticism of sexual health education at school was that it had little or no relationship to the real choices and pressures around sexual health that affected the young women in question...the concentration upon the biology of human reproduction was consistently criticized for taking no account of the context in which sexual behavior takes place nor the personal and social consequences of such behavior.”(Thomson & Scott: 1991, as cited by the UNAIDS study (1997.) Whatley also encourages helping students to be critical of how the dominant ideologies help construct notions of gender by examining media messages about gender roles and sexuality. This way, students can hope to become careful readers and critics of popular culture.

Thus using a “rights-based” approach does not necessarily mean being neutral or value free, but rather, emphasizing an ability to gain an understanding of the social and historical significance of competing beliefs about sexuality and being able to act responsibly on those beliefs as well as respecting others.

Human Rights as Paradigms of Sexual Ethics

While sexual activity does not necessarily lead to reproduction, the religious and cultural mores related to sexuality with which we have lived have optimized the chances that reproduction will result from sexual activity. (Greenberg & Campbell:1989) In their review of feminist views on the topic, Greenberg and Campbell point to the transformation of woman from sexual being to woman as mother as the defining moment of patriarchy.

On the other hand, many advocates who purport to use the “rights-based” frame of Reproductive Health tend to either present their positions as “neutral,” opting not to deal directly with “sexual values,” or often steer clear of introducing rights-based frameworks as values in themselves.

By and large, the strategies employed in “harm minimization” models of sex education (including those used in PEP) are on one level premised on neutral positions on sexual values. This purportedly “non-judgmental” approach serves after all as literally the “secular” counterpoint to religious and traditional moralist positions denoting negative positions and judgments on any type of sexual activity outside the prescribed heterosexual, marital and at times, procreative norm.

This leads to the question: Does being non-judgmental about sexual experience and sexual orientation actually mean being neutral? Or more specifically, when framing the discussion on “safe sex” and “contraception access,” is it the same as assuming that all teenagers are having sex already or for that matter, that sexual relations between boys and girls are always mutual decisions?

Indeed, according to some psychologists, for young people who are at the developmental age of coming to terms with their own perspectives, positions and notions on human values, this lack of guidance can actually be very confusing:

“A neutral stance in terms of values through, for example, a values clarification teaching strategy may also fail to address developmental needs. This strategy assumes that the adolescent already has set values that only need exploration and clarification. However, this is far from the developmental stage of the adolescent when values are in the process of being formed and integrated, contributing to a stable sense of identity. Values need to be presented to the adolescent in a concrete form, validated and affirmed yet also open to questioning in a safe environment. Here the experience of the teacher needs to be considered. Teachers may have been taught that challenging a student’s expressed values is intrusive, directive or unprofessional (Boxer et al, 1989). Similarly, teachers may feel barred from the expression of their own attitudes and values about sexual issues in the interests of appearing non-judgmental.”¹⁷

“The importance of moral development has been referred to by both Piaget and Kohlberg (cited in Cameron and Rychlak, 1985). Both emphasize that early in life children take a very literal view of what is right and wrong, obeying rules without grasping the fundamental reason for them. Moral growth is thought to develop from exposure to moral reasoning that is moderately higher than the person’s current level. Sensing a cognitive conflict or contradiction, the child is challenged to find a solution and make sense of the moral dilemma. These experiences help build a sense of personal mastery and develop a sense of mature judgment in ethical and moral matters.” By reducing female sexuality to reproduction, women’s sexuality was reduced to the sole purpose and function of producing offspring.

This rings true in our own context. Indeed, the concept of sex as more than procreation or occurring outside of marriage still manages to stir up a host of controversial responses from religious conservatives.

“There is tremendous cultural value placed on virginity prior to marriage and fertility after marriage for Filipino women. With regard to sexual relations, this means that for women, sex is symbolic of serious love relationships so while it can happen prior to marriage, it most certainly should be linked to marriage. Most informants were of the opinion that while premarital sex is increasingly common, for the most part it happens under the aegis of an engagement; at the very least,

from a woman's viewpoint, sex is often assumed to lead to marriage. Equally important in terms of social norms and acceptability is childbearing after marriage. It is of utmost importance to a couple to have a child as soon as possible after marriage, which has ramifications for sexual reproductive health (SRH)."¹⁸

The problem in fact goes far beyond the recognition of female sexual pleasure and desire but rather goes into the very heart of rejecting notions of sex as pleasurable and outside sanctioned procreation as unacceptable and immoral.

A non-government organization (NGO) worker working with HIV-positive women even pointed out that "When working with women who are HIV-positive, the same old assignments of blame and stigma are still more pronounced when they get infected outside of marital sex."¹⁹

Indeed, a central problem identified by many feminists in challenging sex roles in most societies is the notion of sex and sexuality itself.

"Nongenital sex, masturbation, any sex between same sex partners, and even sex during menstruation have been in varying degrees at different times considered "unnatural." Sexual activity that has no chance of leading to reproduction has been and continues to be illegal, "immoral," or somehow "just not right."

Orthodox Judaism's banning of sexual activity during menstruation, Catholicism's definition of contraception, abortion and even masturbation as a sin, and state laws against birth control, abortion and sodomy are examples of how equating sex with reproduction has been a central theme of Western religion, indeed of Western culture since its inception."²⁰

Yet even a seemingly sacrosanct issue such as Vatican policy on condom use is being challenged from within the church's quarters. In the context of the HIV/AIDS crisis, Catholic Bishops all over the world already disagree about condom use and the voice of dissenting Catholics are finally being heard on this especially in relation to HIV/AIDS.

Among others, Bishop Godfried Danneels of Belgium, told a Catholic TV program that if an HIV-positive person insists on having sex, "he has to use a condom. Otherwise he will commit a sin" by risking transmission of a potentially fatal virus.

Cardinal Javier Lozano Barragan of Mexico, told The Associated Press that condoms could sometimes be condoned — such as when a woman cannot refuse her HIV-positive husband's sexual advances — since preserving her life is paramount. "You can defend yourself with any means," he said. [The Associated Press, March 23, 2004]

While the position of the Church against condoms is of course rooted in its procreation and exclusively heterosexual stance on sex based on the 1968 encyclical *Humanae Vitae*, or "Of Human Life," in which Pope Paul VI asserted the inseparable link between the unifying and reproductive dimensions of sexual intercourse for "husband and wife," in recent years, the urgent issue of HIV/AIDS as well as basic reproductive health care has managed to open up debates over Catholic views on condoms, contraception, sexuality, marriage and even the family.

Issues such as the vulnerability of women and girls as victims of violence whether in the context of a lack of decision-making power in spacing births or frequency in sexual relations with their partners, or right down to being the majority of victims in cases of commercial sexual exploitation, are but some of the potentially explosive areas for debates and discussions around ethical and moral principles.

Verily, the adoption of a human rights frame in approaching the issue of sexuality calls for an interrogation of no less than competing worldviews about sexuality, as well as an elaboration of "human rights values." After all, contemporary human rights discourse has squarely put forward cross cutting analysis of various forms of social injustice and inequality, from class, race, ethnicity as well as sex/gender.

Truly, even this first step is one tall order and simply not a matter addressed by the mere adoption of Sex Education Policy that is confined to curriculum changes.

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Beginning the Dialogue: Who Needs Sex Education?

In an article discussing the changing contexts of Sexuality Education, Peter Scales warned how young people are often confused by the mixed messages they encounter about sexuality:

“Society often sends strong and contradictory messages about sexuality to teenagers. Few existing educational strategies, including those based on fear, consider adolescents to be responsible sexual persons or promote healthy sexual development, yet, sex education programs must emphasize decreasing the risk of unprotected intercourse (delay of first intercourse and increasing the number of acts of protected intercourse). Family planning and sexuality specialists need a new definition of adolescent sexual health which can help them better deal with healthy adolescent sexual development.”²¹

Yet this sort of confusion hardly comes surprising when, given the context of the Philippines, we have yet to determine how professionals (i.e. teachers, doctors and health workers) themselves deal with matters sexual.

The only available study was a 1985 research conducted to establish evaluation indicators to be used as a basis in evaluating the integration of the population education program (POPED) of then Ministry of Education, Culture and Sports within the Philippine secondary school curriculum. Questionnaires were used to determine existing knowledge, attitude, practice and skills (KAPS) of 3,136 high school students and 490 teachers, and data was analyzed for significant relationships between KAPS concerning POPED and demographic characteristics, exposure to population information sources, type of school attended, and exposure to POPED. KAPS and teaching method determine KAPS of the student. Data indicated that 93% utilized a lecture-discussion method in teaching POPED. While 81% of teachers had integrated POPED into the curriculum, only 19% of these actually attended training on POPED.²²

Indeed, new baseline data on the knowledge, attitudes and skills of would be educators on sexuality, that is school teachers both in public and private schools needs to be generated in order to assess current teacher training needs.

Notably, in other contexts, the introduction of modern Sex Education courses did not originate solely as a teenager targeted endeavor, but rather stemmed from a more comprehensive examination of the curricula of health professionals.

In the late sixties, medical researchers in the United States found that majority of American physicians were not even trained to deal with patients' sexual and sex-related issues, and that many felt dissatisfied with their lack of preparation. The same study found that despite the incapacity of doctors to deal with sexual matters, both members of society and the medical profession and students themselves shared the expectation of medical assistance in sexual matters.²³

Accordingly, it was noted that, the "actions of medical schools paralleled the increasing public awareness of sexuality issues. It did not take long for both the American Medical Association and the American Psychological Association to formally deal with the reclassification of certain sexual definitions, policies, and treatment. Matters of sexuality, and all topics in that field, moved quickly onto the public agenda."²⁴

Similar (albeit smaller scale) initiatives are currently being led at the level of Obstetricians and Gynecologists in the Philippines, assessing the knowledge base of doctors about reproductive health.²⁵

In fact, as recent as 2002, the Center for Sexuality and Religion in the United States even undertook a study supported by the Ford Foundation to conduct a survey and analysis of sexuality education within the theological and human formation process in seminaries and schools of theology.²⁶

Until wholesale reforms are undertaken at the level of school curriculums for the preparation of health professionals and teaching personnel, as well as key institutions alongside other policy developments however, it is unlikely that dominant notions of "sexuality" heavily influenced by religious dualism can be transcended.

Sex and Religion: Situating the Role of the State

In our own context, policy makers and administrators of programs from schools to public health will have to come to grips with dealing with key ideological and religious differences in matters sexual.

Indeed, at one point, while debates can always continue outside of policy bodies, the state has to ultimately put the issue to rest and adopt rational policies in line with its mandate of human rights, women's equality and health, all of which have ample Constitutional foundation.

Moreover, the most basic differences on beliefs about "sexuality" which have been the focus of the most heated debates (i.e. homosexuality, sex outside of marriage and contraceptive use), will eventually have to be placed in the context of the state dealing with matters of religious difference.

Dealing with "religious differences," not as a polarizing issue of "church/state" separation, but more likely in respect of differences among religious and non-religious (secular) positions, will also more likely move the discussion forward.

"Sex education program task forces often try to appease the small number of extremists which results in an effective and potentially harmful program. The 1st step of such a task force should be to outline operational guidelines about closure of debate and the recognition that unanimity is not required or not necessarily always wanted. Sex educators need to communicate that they too favor moral and ethically based sex education. They also need to convey that youth armed with knowledge about sex tend to delay 1st intercourse and to use contraceptives. Sex educators must morally commit to democratic ideals and allow reflection on controversial issues such as abortion. They need to reflect on why they have not been able to move beyond this moralistic position of the extremists and identify strategies to convey safer sex messages."²⁷

Pointing out that the Catholic position is actually based on a Papal Encyclical, thus also explaining why the hierarchy comes out in opposition to whatever attempts at Sex Education policy and programs by the Department of Education, can in fact begin to clarify discussions by both policymakers and administrators, about the role of the state.

Instead of being caught up in the raging debate about contraceptive or condom use (which even the Catholic church by itself is caught up in), policymakers ought to be more concerned about bringing about the enabling conditions which will facilitate free exercise across all beliefs.

On the whole, even as terms like “reproductive health,” and “sexual health” have been coined and woven into frameworks within human rights discourse, the challenge of addressing how the concept of “Sex” itself has been approached remains relevant not only in context of the current Dep Ed Guidelines, but likewise on the level of forming human rights based frameworks for policy development.

Indeed even among many advocates of reproductive health, sex/gender perspectives are not always integrated and raised as part of the larger human rights frame.

In the end, the debate framing the issue of Sex Education as the competing “domain” of state and parental responsibility is clearly a false one. Adopting rational policy frameworks based on contemporary human rights principles demands that governments also need to support families, communities and parents in empowering their children.

Notes

- 1 Education justifies ‘sex lessons’ Manila Standard, reported by Florante S. Solmerin. http://www.manilastandardtoday.com/?page=politics01_june12_2006.
- 2 DIVINI ILLIUS MAGISTRI ENCYCLICAL OF POPE PIUS XI ON CHRISTIAN EDUCATION TO THE PATRIARCHS, PRIMATES, ARCHBISHOPS, BISHOPS, AND OTHER ORDINARIES IN PEACE AND COMMUNION WITH THE APOSTOLIC SEE AND TO ALL THE FAITHFUL OF THE CATHOLIC WORLD. http://www.vatican.va/holy_father/pius_xi/encyclicals/documents/hf_p-xi_enc_31121929_divini-illius-magistri_en.html.
- 3 Sonia Corrêa, From Reproductive Health to Sexual Rights: Achievements and Future Challenges. <http://www.hsph.harvard.edu/Organizations/healthnet/reprorights/docs/correa.html>.
- 4 ICPD Programme of Action, Paragraph 7.3, United Nations 1994.
- 5 Id. at 2.

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