Sexuality education in Thailand: how far do we need to go?

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Thailand and Its Youth. Thailand is a developing country in a stage of rapid economic, social and cultural change. Consumerism, materialism and mass media play a crucial role in reshaping norms and values. Adolescent sexual behaviours have changed quickly, and while adolescents tend to have sex at an earlier age, condom use is low, with 85% of males not using condoms and females relying on post-intercourse (emergency) contraception. (1) Adolescents who have already had sex include both those outside the educational system and those in schools, with a mean age of first sex at approximately 16 years. (2,3) Nonconsensual sex is common among female teenagers at their sexual debut, as is frequent change of sexual partners among male teenagers. (4) The number of new HIV cases among youth has also been steadily increasing, especially among young women who lack access to sexuality education and sexual and reproductive health services. (5) The above data speaks of the urgent need for a comprehensive, rights-based sexuality education that is available across-the-board in Thailand.

Sexuality Education in Thailand. In Thailand, the first national policy on sexuality education in schools was announced in 1938, although sex education was not taught in schools until 1978. It was taught in only those schools that were receptive and that were ready to integrate sex education with other subjects, such as health education and sociology. Called "Life and Family Studies," its content consisted of issues related to the reproductive system and personal hygiene. (6)

Over the years, sexuality education has been revised and gradually accepted as a problem-solving tool for adolescent sexual and reproductive health issues. This has been a consequence of educational reform following the National Education Act B.E. 2542, increasing awareness of problems related to adolescents' sexual practices and the emergence of women's, sexuality and queer movements. In addition, ongoing campaigns for sexuality education by women's and AIDS organisations along with financial aid and technical support from international organisations, especially the Global Fund to Fight AIDS, Tuberculosis and Malaria, have also boosted the acceptance of sexuality education. These factors have led to the revision of the curricula and have expanded cooperation between government organisations (GOs) and non-government organisations (NGOs).

The most remarkable new approach in sexuality education curricula has been the Teenpath Project developed by the Program for Appropriate Technology in Health (PATH), an international non-government organisation based in Bangkok. PATH has succeeded in institutionalising sexuality education curricula into schools since 2003. (7) An enlarged content curriculum of sex education was proposed by PATH following the Sexuality Information and Education Council of the United States (SIECUS)'s concept of six dimensions (i.e., human development, relationships, personal skills, sexual behaviour, sexual health and society and culture). This curriculum also provides young people with crucial health information with respect to sexually transmitted infections (STIs), HIV/AIDS and unplanned pregnancies, in order to make young people be keenly aware of potential risks of unhealthy, unsafe and unprotected sexual activities.
PATH also proposed new methods for teaching sexuality education. Formerly, sexuality education was taught via lectures. Now, it involves a student-centred learning process, changing students' attitudes and raising consciousness related to positive sexuality, sexual health and rights in the form of games, group activities and case study analysis.

Remaining Gaps. Despite the above successes, the situation is still far from perfect. Although Thailand has adopted a national policy on comprehensive sexuality education, several problems related to implementation remain.

Due to lack of political "will for mandatory sexuality education in schools with a rights-based approach, there is no clear policy commitment at the Ministry and school levels. Thus, comprehensive sex education has not yet been taught in all schools nationwide. The numbers of schools teaching the new sexuality education curriculum and the new approach are a mere drop in the bucket. Although sexuality education is taught at various levels (from the primary school to universities), only 4% of all schools have adopted the sexuality education curriculum under the PATH project. Sexuality education is taught in 0.44%, 11.74%, 60%, 5.4% and 25% of elementary schools, middle schools, high schools, vocational schools and teaching colleges, respectively. (8) Meanwhile, the curricula of the Office of the Basic Education Commission (OBEC), which are composed of sex education curricula from various agencies and include comprehensive content covering all six dimensions of sexuality education, have been initiated in only 21 out of 76 provinces in Thailand, as pilot projects. (9)

Furthermore, sexuality education has never been established as a subject in its own right, except in vocational colleges, where statistics show that the rate of sex among vocational students is the highest compared to other adolescents of the same age, thus putting vocational students in a "higher risk" category.

Moreover, in practice, most sexuality education still lacks a focus on sexual and reproductive rights, in both content and pedagogy. They focus almost exclusively on controlling adolescent sexual behaviour or, at best, promoting safer sex to prevent unplanned pregnancy, abortion and STIs occurring among youngsters. None focuses on the sexual rights of adolescents. Issues that relate to the understanding of desire, pleasure and love and other positive aspects of sexuality are often overlooked. This reflects the mainstream perspective of Thai society that sex does not need to be taught and that sex is a distasteful and obscene matter. Issues regarding gender, sexual diversity, sexual fluidity and homosexuality are often neglected by teachers, including the sexual rights of LGBTI (lesbian, gay, bisexual, transgender, intersex) people. Teaching content and methods may even be discriminatory, particularly those adopting an abstinence-only approach, which regard homosexuality as abnormality. There is also gender bias in teaching, with teachers still emphasising that girls protect themselves from sexual attention, pregnancy and diseases, while giving little attention to the sexual responsibilities of men.

Additionally, the attitudinal adjustment process for teachers participating in the new approach to sexuality curricula is not always successful. Traditional sexual attitudes, socialisation and individual experiences prevent some teachers from opening their minds to the new curricula or to novel teaching approaches. (10) Some teachers avoid teaching sexuality education, teach it the traditional way without listening to their students' opinions, or teach it without supplementary activities.

Beyond sexuality education in schools, a huge gap remains in reaching "vulnerable" groups such as adolescents who are labourers, refugees or displaced, with disabilities, in orphanages, in prisons, in rehabilitation centres, living with HIV and others.

Recommendations. To address the gaps mentioned above, the Thai government should strongly enforce a policy that mandates standard, comprehensive sexuality education for students in all schools. The government also needs to ensure
that sexuality education is a continuous learning process and that the subject is taught separately from other subjects, with content suitable for youth in different age groups. As well, teachers must increase their focus on teaching sexual rights, gender and sexual diversity and empower students to develop critical thinking skills. Strong teacher training programmes that "will make teachers' conservative attitudes more sensitive and respectful of adolescents' sexual rights is also needed. Comprehensive sexuality education for vulnerable groups of young people as mentioned above needs to be implemented. Finally, we need to ensure the participation from all stakeholders, especially policy makers, parents, teachers, communities and students in supporting a standard, comprehensive sexuality education agenda that addresses the understanding and acceptance of gender and sexual diversity, including respect for women's and LGBT's human rights.

Endnotes


(2) Raks Thai Foundation. (Forthcoming). The Study of Societal and Individual Factors that Affect Condom Use among The Youth in Trat and Phatalung Provinces. Thailand: Raks Thai Foundation. [In Thai.]

(3) Youth Team (under a project which facilitates youth participation in solving national reproductive health problems and HIV/AIDS in Thailand, in assessing the national situation and setting a framework of assistance for UN bodies). [n.d.] Evaluative Report on the Reproductive Health and HIV/AIDS Situation in Thailand. Mimeograph. [In Thai.]


