



United Nations
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HOW TO HOLD CSE DIALOGUES WITH COMMUNITIES

*Advocating in schools and community
for youth friendly services across
Eastern and Southern Africa*



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Introduction

This *Guide to Community Dialogues* describes the process of organising and running a community dialogue around the issues of comprehensive sexuality education (CSE) for children and young people. Community dialogues on CSE are ways of building community support and understanding of the benefits and importance of CSE for children and young people.

There are a number of sensitive issues within communities surrounding the provision of CSE for children and young people. Employing the SAfAIDS community dialogue model creates space for open and honest discussion and dialogue with community groups and leaders, helping CSE practitioners alleviate concerns and provide accurate information about CSE and its value.

The guide also provides useful tips and practical information on overcoming resistance and building support and buy-in for CSE in your community.

How to Use this Guide

This guide should be introduced as part of an orientation meeting or workshop where other pieces of the *Engaging Communities on CSE Toolkit* will be shared. It takes you step-by-step through the SAfAIDS tried and trusted *Community Dialogue Model*. The model may not suit your every need, but there is scope for you to use your own experience as well as local knowledge and context to make the changes you need.

Read Part 1 from start to finish. With colleagues, discuss how the eight steps in the model can fit into your outreach efforts. If there is need to adapt the cycle at this stage because of local protocols, different stakeholders or other localised issues, then this is the time to do so. There are some spare pages for notes on these discussions.

Then read Part 2, this unpacks the model step by step. This section will help you plan your dialogues in more detail. Make notes as you go along.



Part 1: Why Dialogue?

1.1 Conversations for Change

Schools and organisations may face resistance from community leaders and members who believe that providing information to children and young people on sexuality will encourage them to engage in sexual activity. However, the statistics on HIV and early pregnancy suggest otherwise.

There is need for intergenerational dialogue on these issues to respond to gaps in traditional knowledge sharing systems that have arisen due to changes in traditional family and community structures.

Ultimately, communities and community leaders want to see their young people thrive and succeed. Building understanding on the importance of providing scientifically accurate, culturally and age-appropriate, gender sensitive and life skills-based comprehensive sexuality education is vital to helping young people live healthier and more productive lives – which benefits the whole community.

1.2 Working Together for Improved Health and Wellbeing Outcomes for Children and Young People

Engaging different community groups and actors and building broad-based support and understanding of the importance of comprehensive sexuality education for young people ensures that young people have the information they need for good sexual and reproductive health

(SRH) and that they can access the relevant services within a supportive family environment, that encourages learning and without fear.

Engaging communities also ensures messaging and information on sexual and reproductive health, sexuality and gender, is the same from whatever source, reducing the likelihood of confusion. It also reduces myths, misconceptions and misinformation on sexual and reproductive health, relationships and sexuality and encourages intergenerational dialogue.

What is Comprehensive Sexuality Education?

Comprehensive sexuality education provides children and young people with knowledge and skills relating to their healthy development and sexuality. Its goal is to support children and young people to be informed and develop the skills, values and attitudes needed for a full and healthy life, to make responsible choices and decisions as well as to reduce sexual and reproductive health risks such as unintended pregnancy, sexually transmitted infections (STIs) and HIV infection.

What is sexual and reproductive health?

Sexual health means having physical, emotional, mental and social well-being in relation to sexuality, with a positive and respectful approach to sexuality and sexual relationships, and the ability to make responsible, positive, informed and safe sexual choices – including choosing not to have sex. Reproductive health means having a responsible, satisfying and safer sex life, the capability to reproduce and the freedom to decide if, when and how often to do so.

1.3 Introducing the SAfAIDS Community Dialogue Model

Creating opportunities for open and honest discussion and dialogue around comprehensive sexuality education issues amongst community members and leaders is important in building consensus and support for comprehensive sexuality education. Engaging community members and leaders provides space for sharing concerns about comprehensive sexuality education so that these can be discussed and eased.

Some concerns may arise from misinformation about the purpose of CSE and what it involves. Others may be to do with failure to appreciate the gap left by the changes in family structures and the loss of traditional methods of communicating sexuality information to young people giving rise to the need for provision of comprehensive sexuality education by schools and civil society organisations. By sharing accurate information about the aims of comprehensive sexuality education and evidence of its success in improving young people's sexual health and development, the perceptions of comprehensive sexuality education among community members and leaders, can be changed, gaining their understanding and support.

Community dialogues provide an opportunity to raise awareness among community members and leaders on the importance and benefits of comprehensive sexuality education and gain the support of these key groups, while encouraging people including young people to discuss their concerns,) and identify solutions together..

Everyone in the community
– religious, traditional,
community leaders and
others, government

authorities (ministries of education and health), healthcare providers, parents, children, young people, civil society organisations and schoolteachers and heads - is able to share their opinions including those who may be less willing to share their thoughts and concerns (mothers and young people themselves).

dialogue

noun: a conversation between two or more people or groups, especially one directed towards exploration of a particular subject or resolution of a problem

synonyms: conversation, talk, communication, interchange, discourse, argument, discussion, exchange, debate, discourse, interview

verb: take part in a conversation or discussion to resolve a problem

1.4 Steps to Successful Community Dialogue

The SAfAIDS community mobilisation and dialogue model helps to overcome the challenge of unequal voice in the community by engaging key groups to discuss and agree on the issues as separate groups first, before bringing everyone together to dialogue. In the case of comprehensive sexuality education and youth friendly sexual and reproductive health service promotion, key groups may include:

- community leaders and custodians of culture,
- healthcare providers, parents (who may be split into separate groups of mothers and fathers) and
- young people.

After engaging separate groups and building consensus within them on their key issues, broader community dialogues bring together all stakeholders and provide an open and non-confrontational platform for discussion and intergenerational dialogue.

The discussion is moderated by a facilitator who helps guide the discussion and encourages the different groups to actively participate.

What are Youth Friendly Services (YFS)?

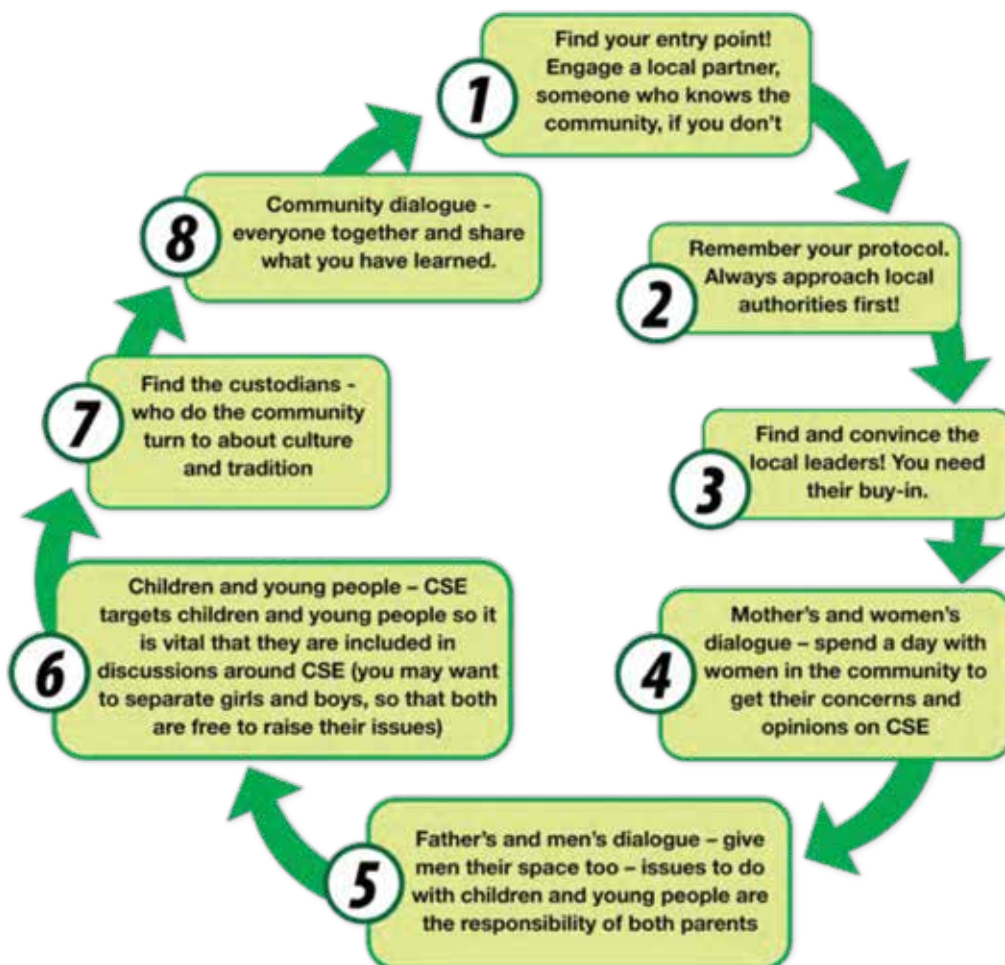
Youth friendly services (YFS) provide health services based on a comprehensive understanding of what young people in any given society or community want and need, and on their diversity and sexual rights. These services include:

Sexual and reproductive health counselling

- Contraceptive counselling and provision (including emergency contraception)
- Abortion services (where legal and when permissible)
- Sexually transmitted infection (including HIV) prevention, testing and counselling services
- Prenatal and post-partum services
- Sexual abuse counselling

Relationship and sexuality counselling

The model below illustrates the various steps in the community dialogue model.



Part 2: Dialogue Steps

2.1 Understanding the Process

Evidence can change everything! Do your homework; find out the issues in the community ahead of sensitisation and dialogue. This is where local community-based organisations can help. It is best to target areas with obvious issues first, or those most in need of an intervention based on clinic or other statistical health information.

Community dialogue involves a number of key stages:

One of the first aspects of any public meeting, including community dialogues, is to sensitise local leaders and then the local community on what comprehensive sexuality information is, what it involves and why it is important.

Remember to have facts and figures at hand. If there are local champions already, for instance, teachers or healthcare providers who are already concerned about the issues of youth sexuality, early pregnancy and HIV, ask them to support you. You may also engage these people as moderators to help you run the individual group discussions.

Start at the top -- meet with community leaders before any activities are planned.

Once this stage is behind you, you (or one of your community champions) will need to act as moderator for each of the community dialogues.

What does it mean to be a moderator?

A moderator is someone who makes sure that a meeting achieves what it sets out to do and keeps to its aims. She or he needs to make sure all voices are heard; and that any discussions that are 'off-topic' are kept in check. This may mean having to gently and firmly bring the discussion back to the key points – in this case, issues and concerns around youth sexual and reproductive health and comprehensive sexuality education.

Moderator: Someone who tries to get a group of people to reach an agreement

The moderator will also have to keep a record of issues that the group has agreed on and that need to be taken to the next level of discussion, to ensure that no issues are forgotten. Then in the next level of discussion, the moderator will 'table' the issues for the group by creating an agenda of items to be discussed. Remember the aim is to reach consensus – not to allow arguments over opposite opinions to take over.

Step one:

- Engage the key groups in discussion separately: women, men, young people. Each of these groups is also engaged separately, as girls and boys, leaders, etc. as necessary. This provides each group with an opportunity to discuss their concerns without being influenced by community dynamics and social inequalities.

Engage key groups separately

Key issues are agreed with each group; by reaching a consensus on the key issues that each group faces, members gain confidence knowing that there is 'safety in numbers'. In other words, it is not just them as an individual who is speaking out, when it comes to the wider community discussion.

- Agree the key issues with each group by reaching a consensus on their major challenges and record the issues.

Consensus: a generally accepted opinion or decision among a group of people.

Step two:

Bring all the groups together to discuss as one in a community discussion forum. Because each group has already reached consensus on the issues, they are more confident to communicate the issues in the wider group.

- Since comprehensive sexuality education targets children and young people, it is important that their voices are heard. The moderator should make special efforts to encourage young people to speak up and promote intergenerational dialogue. The moderators who engaged the separate groups can also help by communicating the key issues discussed by each group on their behalf.

Open dialogue or discussion is encouraged but the moderator must ensure that the dialogue is equal; that confrontation is avoided; and that everyone who wants to has an opportunity to speak. In running a community dialogue, it is important to assume the role of facilitator rather than expert. Bring in other experts (e.g. from ministries and schools) to highlight the importance of comprehensive sexuality education so that you remain neutral.

Top Tips

Encouraging intergenerational dialogue (between different generations) can be difficult. You can improve intergenerational dialogue by:

- Agreeing on, and enforcing, dialogue rules such as that everyone should have a chance to speak, no interrupting, etc.
- Setting clear objectives – your aim is to increase access to SRH information and services for improved health of young people. Keeping focused on this will help everyone to focus on discussions about how this can be achieved.
- Keep discussions balanced – encourage input from a balanced number of older and younger participants.

Step three:

Next steps and action points are developed based on the group's recommendations and consensus.

Negotiating sensitive issues

A number of sensitive issues are likely to arise when considering youth sexual and reproductive health. These include: puberty; menstruation; talking about sex and relationships with young people; access to contraception; and sexuality.

Community members and leaders may be reluctant to consider or discuss the potential harm associated with traditional practices, when considering traditional practices and social norms that expose young people to risk, such as early marriage, intergenerational relationships – where a young person is involved in a relationship with an adult, gender inequality and child pledging.

2.2 Top Tips for Effective Engagement

Be Informed: Presenting evidence -- facts and statistics about the benefits of comprehensive sexuality education will help address misconceptions and gain buy-in and support.

It may also be useful to highlight national strategies, policies and guidelines on youth sexual and reproductive health, as this shows wide recognition of its importance.

- Listen: community members and leaders may resist discussion of youth sexual and reproductive health information and service access because they are concerned. Ask them to share their worries; listen and respond to them. These worries are often based on misinformation, such as believing that talking to young people about sex will encourage them to have sex. You can show evidence that disproves this.
- Try to find relevant local examples to highlight how improved comprehensive sexuality education can lead to:
 - Delayed first sex for young people
 - Increased use of safer sex methods, including use of condoms and contraceptives amongst sexually active youth
 - Reduced frequency of sexual partners and reduced risk taking during sex in sexually active young people.
- Be positive: Use positive stories and case studies, rather than scare tactics, to gain support.
- Clearly state your objectives and what outcomes you expect to achieve; reduced teen pregnancies; increased access to SRH information and services by young people; and improved SRH of young people in the community. This helps your audience can see the 'end result' in a positive light.
- Stay calm: Raising your voice or becoming frustrated will increase resistance and stop people listening to you. Stay calm, collected and focused at all times.
- Have a good understanding of the cultural context and customs will help you to address concerns that people may have about the loss of some aspects of tradition and culture. Remind them that culture is constantly changing in response to new influences and realities – if you can, identify some cultural practices that have changed in the community.
- Focus on risks: Highlight the risk factors associated with young people not being informed about and having access to sexual and reproductive health services and the risks associated with certain behaviours, rather than 'blaming' culture or customs.
- Choose your words carefully: While it may not be possible to avoid discussion of sensitive issues, being tactful and sensitive about how you raise them will help to prevent additional resistance.

- Adapt your language and content to your audience. If you are talking to people with low literacy levels, avoid using technical terms. If you are talking to a community elder, show respect in the way that you talk and follow customary rules for discussion or you risk implying disregard of cultural norms, which will weaken your position when trying to raise issues around potentially harmful cultural practices with regard to youth sexual and reproductive health.

Include expert voices: It may be useful to bring in experts on the issues – people who are respected in the communities and in the field of comprehensive sexuality education such as representatives from the Ministry of Health or Ministry of Education, health professionals or education experts

Encourage participation: There is a strong focus within CSE comprehensive sexuality education programmes to ensure that they are culturally and context specific and appropriate. Highlight this and explain that, with active participation from community leaders and members, comprehensive sexuality education practitioners are better able to ensure that comprehensive sexuality education is applicable, relevant and appropriate to the specific situations faced by children and young people in the community. Also make sure that community members and leaders understand that the CSE curriculum content has been developed to be age appropriate.

Follow up: Discussion and dialogue with community members and leaders should be part of a wider campaign to promote comprehensive sexuality education CSE for children and young people. You may consider distributing IEC materials or engaging media personnel to highlight the importance of comprehensive sexuality education in the media to support and reinforce your community sensitisation efforts.

Make sure that community members and leaders understand that the CSE curriculum content has been developed to be age appropriate.

Encouraging intergenerational dialogue (between different generations) can be difficult due to cultural norms regarding superiority. You can improve intergenerational dialogue by:

- Agreeing on, and enforcing, dialogue rules such as that everyone should have a chance to speak, no interrupting, etc.
- Setting clear objectives – in the case of comprehensive sexuality education, the objective is to increase access to SRH sexual and reproductive health information and services for improved health of young people.. Keeping Staying focused on the objective will help everyone to focus on discussions around how this can be achieved
- Keep discussions balanced – encourage input from a balanced number of older and younger participants.



SAfAIDS Community Dialogue Process for Comprehensive Sexuality Education

<p>Entry Point – The first step is to engage a partner already involved in the target community (If you are not already working within it), who knows the key stakeholders and has a good understanding of the local structures. It is important that your partner is fully appraised of what needs to be done and shares your vision.</p>	<p>2. Protocol - Local leaders Initiate discussion with local community leaders in order to sensitise them on the issues involved, and what you plan to discuss. It is essential that traditional and political leaders, custodians of culture and other opinion leaders in the community are engaged, because of their influence in their community.</p>
<p>3. Buy-in of Opinion Leaders – Opinion leaders are those individuals to whom communities tend to turn, listen to or watch, when issues arise. Once buy-in has been obtained from the local and opinion leaders, they, together with the partner, return to the community and the community dialogues can begin.</p>	<p>4. Women’s Dialogue – It is important to discuss with women separately because they are unlikely to feel free to discuss any sensitive issues regarding sexuality in the company of men. Someone familiar with the issues being discussed should facilitate the discussion. The women should be encouraged to discuss any issues relevant to CSE or cultural practices that impact on the SRH of children and young people. Key issues are recorded and brought forward for discussion with the other community members. Distribute parents ‘Know More’ IEC materials and Talking to Children materials.</p>
<p>5. Men’s Dialogue – The men are discussed with separately to identify their issues. Again, an appropriate facilitator should be used. The issues raised are also recorded and shared for discussion with the other community members. Distribute parents ‘Know More’ and Talking to Children IEC materials.</p>	<p>6. Youth Dialogues – Separate dialogues need to be held for girls and boys. Again, use an appropriate facilitator who can encourage young people to express their needs – especially regarding access to youth-friendly health services. Issues are recorded for discussion with the other community members. Distribute ‘Talking to Parents’ IEC materials</p>
<p>7. Local Leaders Dialogue – A similar meeting is held with local leaders and custodians of culture, facilitated by an appropriate person; their views are recorded for discussion with the other community members. This is followed by a process called mind mapping in which they are asked to identify any cultural practices within their communities that have a direct bearing on CSE and on young people’s ability to access their SRHR. Distribute ‘Leaders Know More’ IEC materials.</p>	<p>8. Community Dialogue – This is the opportunity for important intergenerational dialogue to begin. The issues raised by the women, men and youth will be brought before the community for discussion, to determine if the three groups share the same concerns and possible solutions. The community then comes up with a priority list of issues that need to be addressed to ensure the provision of CSE and access to youth friendly services for children and young people, in a culturally appropriate and locally relevant way.</p>

2.3 Topics to talk about

There are some common, sensitive areas around comprehensive sexuality education and youth friendly services that are more likely to meet with resistance. It is useful to consider these sensitive areas in advance so that you can prepare for potential areas of disagreement and be ready to defend the importance of the CSE curriculum content.

Communities tend to more readily appreciate the need for comprehensive sexuality education amongst the older age groups and have most concerns with regard to comprehensive sexuality education for younger children. Whilst broad areas of potential controversy have been listed below, as practitioners advocating for strengthened comprehensive sexuality education, it is important to be able to distinguish the content for each age group and communicate this to communities. This will help lessen concerns related to the age of children receiving sexuality information and accessing youth friendly services.

The six broad topics in comprehensive sexuality education are:

1. Relationships
2. Values, attitudes and skills
3. Culture, society and human rights
4. Human development
5. Sexual behaviour
6. Sexual and reproductive health.

The table below shows examples of some key areas of resistance in each topic and gives approaches for addressing this resistance.



2.3.1 Relationships

Some potential areas of resistance to aspects of CSE curriculum content	Strategies for overcoming resistance
<p>The influence of society and social norms on gender dimensions within the family which can lead to gender inequalities and negative consequences, particularly for women and girls (including gender-based violence)</p>	<p>Explain the risks associated with gender inequality and gender-based violence (60% of new HIV infections are in young women); women are unable to decide whom and when to marry; to make decisions on use of contraception and when to start a family or choose how many children to have; to negotiate condom use; to seek treatment for sexually transmitted infections without their husband's permission, or to refuse sex.</p> <p>Between 15 and 35% of women report having experienced sexual violence at some point.</p> <p>It is important that young people today have a full understanding of the concept of gender – that women and men have equal rights to be heard and to make decisions. This does not mean making decisions alone, but by men and women discussing and reaching mutual agreement. This is the only way that gender equality can be fully realised, both inside and outside the family.</p> <p>Also explain that comprehensive sexuality education highlights the positive aspects of culture and social norms that uphold women's position in society and the family.</p>
<p>Discussion of different types of marriage and potential risks involved with each (including arranged marriages, child marriages, child pledging and forced marriages)</p>	<p>Explain that early marriage, child marriage and teenage pregnancy have negative social and health consequences. These include poor health of the baby and mother, as well as poor economic and livelihood opportunities for girls, who are likely to drop out of school when they become pregnant and not complete their education.</p> <p>Girls under 18 are more likely to die during pregnancy and childbirth than women in their twenties. One in five girls has started childbearing by the age of 17, while 10% of all births in the region are to girls aged between 15-19 years.</p> <p>Over 10% of girls had their sexual debut before the age of 15.</p> <p>Forced marriage also exacerbates gender inequality by positioning women as commodities – this can put them at risk in a relationship where the husband has assumed 'ownership'; 34% of women aged 20–24 years old were married or in a union by the age of 18.</p>
<p>Understanding different feelings in relationships (friendship, attraction, lust, love, desire)</p>	<p>Understanding different emotions and feelings is vital if young people are to build skills in coping with these feelings – including controlling and not acting on feelings of lust, attraction and desire. Comprehensive sexuality education highlights trust, love, commitment and mutual respect, as vital components of a healthy relationship.</p>

Understanding that there are different ways to express love and affection	Comprehensive sexuality education places the focus on non-risky expressions of love and affection such as holding hands, hugging and talking
Understanding that harassment and stigma of anyone on any grounds is unacceptable, including on the basis of sexual orientation	Harassment and stigma of anyone, on any grounds, is against their human rights. Building tolerance is vital for harmony in communities and ensuring that all people have access to services they need. In the context of HIV, which can be spread through sexual contact between people of different sexual orientations, it is vital for the health of the whole community that HIV prevention and treatment services are freely accessible, without fear of stigma.

2.3.2 Values, attitudes and skills

Some potential areas of resistance to aspects of CSE curriculum content	Strategies for overcoming resistance
Importance of anticipating the consequences of decision-making, including discussing the potential negative consequences of sex	<p>Responsible decision-making is a vital skill for all young people, including with regard to sexual behaviour.</p> <p>Ensuring that young people are informed about and encouraging them to consider the potential negative consequences of sex is an important way of promoting safer sex practices, including delayed start of sexual activity.</p>
Importance of assertiveness and negotiation skills, including in the context of protecting against the negative consequences of sex	<p>Being able to say 'no' confidently is an important protection mechanism against unwanted sexual attention or pressure.</p> <p>Building negotiation skills in the context of comprehensive sexuality education necessarily includes information on negotiating consensual and safer sex. While comprehensive sexuality education promotes abstinence as the most effective safer sex option, it recognises the reality that not all young people will abstain and, for those who do not, knowing how to negotiate for condom use (as well as how to use condoms correctly) is vital in preventing against unplanned pregnancy and infection with HIV and sexually transmitted infections.</p>
Discussion of the effects of alcohol and drugs	The negative effects of alcohol and drugs on decision-making are discussed as part of comprehensive sexuality education, promoting responsible and mature behaviour, as well as strategies for remaining safe in situations where alcohol is offered (not accepting drinks; not leaving drinks unattended, having a 'buddy' system with a friend to keep an eye on each other, etc.).
Discussion of sexual decision making in the context of peer pressure	Focus is on building skills to resist peer pressure to engage in risky or early sexual practices.

2.3.3 Culture, society and human rights

Some potential areas of resistance to aspects of CSE curriculum content	Strategies for overcoming resistance
Young people's right to good sexual and reproductive health, including access to information and services	International, regional and national guidelines outline the rights of young people to sexual and reproductive health information and services, in order to be able to protect their health and the health of others
Discussion of positive and harmful practices, social and cultural norms and rites of passage that affect health (including honour killings, forced and child marriage, female genital mutilation (FGM), wife inheritance, virginity testing, polygamy, etc.)	<p>Both positive and harmful practices are discussed and this is done in a culturally and contextually appropriate manner.</p> <p>Explain the risks associated with common practices and norms in the community (e.g. wife inheritance in the context of HIV can expose additional people to HIV infection if the husband died of AIDS related illness; child marriage exposes children to the risks of sexual activity, including pregnancy, before they are physically or emotionally ready; FGM causes serious health risks and is illegal in most countries.</p> <p>Note that polygamy may also expose additional people to the risk of STI and HIV infection if all partners are not tested and do not use condoms, etc.</p>
Discussion of sexual coercion, abuse and rape	Sexual abuse is a sad reality for a lot of young people. Comprehensive sexuality education builds skills in protecting against sexual abuse. It ensures that young people know that sexual abuse is always wrong and never the fault of the person who is abused; it helps young people identify sources of help and support in their community if they are concerned about, or experience, sexual abuse.

2.3.4 Human development

Some potential areas of resistance to aspects of CSE curriculum content	Strategies for overcoming resistance
Understanding pregnancy (all stages), protecting against unplanned pregnancy (abstinence and contraceptives) and planning for healthy pregnancy	Focus is placed on preventing unplanned pregnancy (for which a full understanding of the stages of pregnancy is required). While abstinence is highlighted as the safest measure against unplanned pregnancy, contraceptive methods are discussed to ensure that young people who are sexually active are equipped with the information and skills they need to protect themselves.
Changes during puberty: emotional (including increasing sexual awareness), social (including the increasing influence of peers) and physical (including changes to reproductive body parts and functions)	Preparing young people properly for puberty and what to expect helps to guard against unnecessary confusion and embarrassment. It also ensures that they are prepared for the new feelings and emotions that they will experience – and can control these feelings in a healthy way.

2.3.5 Sexual behaviour

Some potential areas of resistance to aspects of CSE curriculum content	Strategies for overcoming resistance
Curiosity about one's own body is natural	Exploring and understanding one's own body is an important source of learning – and can provide safe ways of dealing with increasing sexual feelings and responses
Understanding sexual feelings and physical responses to sexual stimulation	Focus is placed on the fact that whilst sexual feelings, fantasies and desires are natural, there are ways to control them; they do not have to be acted on.
Discussion of safer sex methods including condoms and contraceptives	<p>The consequences of engaging in sexual activities are highlighted, as well as the associated responsibilities that come with them.</p> <p>Comprehensive sexuality education promotes abstinence as the safest way to avoid pregnancy and sexually transmitted infections, including HIV; but it also discusses safer sexual behaviours, condoms and other contraceptives that can reduce the risk of pregnancy, and sexually transmitted infections, including HIV, for those who are sexually active.</p> <p>The importance of joint responsibility for preventing unintended pregnancy, and sexually transmitted infections, including HIV, is highlighted.</p>
The importance of having respect for the different ways that sexuality is expressed	<p>Sexuality is expressed in many different ways and the promotion of universal human rights requires that we respect difference, including people of differing sexual orientations. However, 'coming out' and seeking sexual and reproductive health services for people of differing sexual orientation services may result discrimination</p> <p>Homosexuality is both illegal but criminalised in some sub-Saharan countries, so working with MSM can raise legal issues. Comprehensive sexuality education can help reduce stigma and discrimination.</p>



2.3.6 Sexual and reproductive health

Some potential areas of resistance to aspects of CSE curriculum content	Strategies for overcoming resistance
<p>Understanding HIV and STIs (transmission, prevention – including correct and consistent condom use, treatment and risk reduction strategies)</p>	<p>Comprehensive and accurate information regarding HIV and STI transmission, prevention, treatment and ways of reducing risk is vital to supporting reduced risk of HIV transmission among young people, as well as supporting young people exposed to, or living with HIV, to access the care and treatment services they need to stay healthy and reduce risk of onward transmission.</p> <p>Ensuring young people know how to use condoms correctly is vital to supporting prevention of sexually transmitted infections, including HIV in sexually active young people.</p>
<p>Benefits and drawbacks of different contraceptive methods</p>	<p>Contraceptive use can help people who are sexually active plan their families and avoid sexually transmitted infection, including HIV. Understanding the benefits and drawbacks of all available contraceptive methods helps ensure that contraceptives are used correctly and responsibly.</p> <p>Further, abstinence-only CSE programmes have been found to be less effective in protecting young people against the negative consequences of sex than those that promote abstinence as well as sharing information on other contraceptives and safer sex methods.</p>
<p>Discussion of cultural, social and gender influences on ways of reducing sexual risk</p>	<p>Understanding cultural, social and gender influences on ways of reducing sexual risk helps young people develop appropriate coping responses. For example, condom negotiation tends to be more difficult for girls and women, due to gender and power issues in relationships. By considering these issues ahead of time girls and young women are better placed to develop ways of reducing risk and to negotiate effectively.</p> <p>Some religions and cultures do not agree with the use of condoms in relationships. Young people who are affected by this will benefit from learning about and discussing alternative, safer and acceptable strategies.</p>



3.1 Community Dialogues as part of a Multi-Media Campaign

Integrating community dialogues makes sense. It will also ensure consistent messaging on comprehensive sexuality education within communities. Some complementary strategies for strengthening comprehensive sexuality education may include:

- **Community sensitisation:** Engage community health workers and volunteers and encourage them to include aspects of comprehensive sexuality education in their outreach work.
- **Other cultural interventions:** With good buy-in from traditional leaders it is possible to include comprehensive sexuality education interventions and knowledge within existing cultural practices (such as initiation ceremonies and rituals), to make them safer for youth.
- **IEC material distribution:** Spread social behaviour change communication materials (such as leaflets, flyers and posters) on comprehensive sexuality education information, as well as promoting the importance of comprehensive sexuality education for children and young people. The *Know More Guides* in the *Engaging Communities on CSE Toolkit* can be reprinted or copied for wider distribution.
- **School outreach:** Many schools already provide comprehensive sexuality education, or aspects of it, as a distinct lesson or as part of other lessons (e.g. social studies, life skills and biology). Talk to school authorities and see if they are willing to initiate outreach sessions to ensure that more children and young people are able to access this important information. The school will benefit by being seen as a community leader in CSE comprehensive sexuality education for young people.
- **Identification of comprehensive sexuality education champions and peer educators:** These are an effective way to reach young people out-of-school with relevant comprehensive sexuality education information. You can train existing peer educators in the community on comprehensive sexuality education. If there are no existing peer educators, you may be able to identify young people willing to take on this role.
- **Media:** Locally and culturally appropriate dissemination of comprehensive sexuality education information using TV and radio is a successful strategy for reaching large audiences. It is also a way to bring the young and old together with open discussion and live debate. Always have an expert at hand whenever young and old get together. Newspapers (such as weekly columns on comprehensive sexuality education issues) are also a good way to reach large audiences. The Internet and social media sites, such as Facebook, Twitter and YouTube also present new opportunities for reaching children and young people with comprehensive sexuality education information. Digital information adapted for computer screens and smartphones is likely to have the widest reach.
- **Establish CSE clubs:** Community comprehensive sexuality education clubs in- and out-of-school, provide an effective channel for children and young people to 'opt in' for comprehensive sexuality education – or for parents who understand its importance, to ensure their children receive this information, if standardised and routine comprehensive sexuality education has not yet been formalised in the community. If carefully planned, the clubs can follow topics on TV or radio as part of the media efforts.



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