



KNOWLEDGE EMPOWERS -- KNOWLEDGE SAVES LIVES

Comprehensive Sexuality Education and HIV/AIDS

The HIV/AIDS epidemic is a global crisis that requires bold leadership in both prevention and treatment based on sound public health policy. People have the right to information, education, and access to services in order to safeguard their sexual health and potentially save their lives. Today, with nearly one billion of the world's population between the ages of 15 and 24, it is critical that comprehensive sexuality education programs are supported and funded worldwide. These programs must include information about both abstinence and contraception, particularly the use of condoms in the prevention of HIV/AIDS.

The evidence is clear - comprehensive sexuality education programs are successful in delaying the onset of sexual activity, reducing the number of sexual partners, and increasing contraceptive use, particularly condoms. Furthermore, condoms used consistently and correctly protect against HIV/AIDS transmission. The promotion of condom use among sexually active people is crucial to their health and well-being.

There are 40 million people living with HIV/AIDS in the world today, the majority living in developing countries. At the end of 2001, there were 5 million new infections globally, most of which were transmitted sexually. Many people do not have access to information, education, and services that could prevent infection.¹

Since the beginning of the epidemic, more than 60 million people have been infected, and HIV/AIDS is the fourth leading cause of death worldwide, and the leading cause of death in Sub-Saharan Africa.²

HIV/AIDS has dramatically and devastatingly affected development, life-expectancy, and the lives of millions of people living with the disease, their families, children, communities, and countries. Though extensive studies have shown prevention and education work, millions of people do not have access to life saving knowledge and services.

KNOWLEDGE, EDUCATION, AND PREVENTION

Comprehensive education and prevention about sexuality and HIV/AIDS, when supported by policy makers and the community, work to save lives, promote sexual health, and avert the devastating social and economic costs to people and countries around the world.

Sexuality education and HIV/AIDS education work to prevent infection and reduce risks for young people by promoting and developing good decision making and communication skills, and increasing knowledge about disease transmission and prevention. According to a review by UNAIDS, high quality sexuality and HIV/AIDS education programs:³

- do not encourage increased sexual activity;
- help delay first intercourse, and protect sexually-active youth from STD, including HIV, and from unintended pregnancy;
- work best when started before the onset of sexual activity;
- show that responsible and safe behavior can be learned;
- have focused curricula, give clear statements about behavioral aims, and feature clear delineation of the risks of unprotected sex and methods to avoid it;
- teach and allow for practice in communication and negotiation skills;
- encourage open communication about sex;
- equip young people with skills for decoding media messages and their underlying assumptions and ideologies.

Countries Working for Change

In Uganda, where comprehensive sexuality education programs and condom distribution efforts have been supported by the government, the adult HIV prevalence rate was reduced from 14% in the early 1990s to 8% in 2000, and prevalence rates among teenage women dropped from 28% in 1991 to 6% in 1998.⁴

With the strong will and support of policy makers in the 1990s, Thailand's comprehensive prevention efforts reduced the number of new HIV infections to 30,000 from a high of 140,000.⁵

The Nigerian Ministry of Education has recognized that comprehensive sexuality education is critical in stemming the rise of HIV infection. Through the extensive dialogue and education efforts by organizations working to improve adolescent sexual and reproductive health, the Ministry of Education is now implementing a national sexuality education policy and curriculum for secondary school-age youth throughout Nigeria.

STATISTICS

Regional

Sub-Saharan Africa is the region most devastated and impacted by the epidemic; over 28 million people in Sub-Saharan Africa are currently living with HIV/AIDS, with nearly 3.5 million new infections in 2001 alone.⁶

- One-in-nine South Africans, or 4.7 million people, are living with HIV/AIDS.⁷
- An estimated 36 percent of Botswana's 15- to 49-year-olds live with the HIV virus.⁸
- In 2000, five West African countries (Burkina Faso, Cameroon, Côte d'Ivoire, Nigeria, and Togo) had adult prevalence rates over 5 percent.⁹

In Asia, 1.07 million new infections in 2001 brought the total number of people currently living with HIV/AIDS to 7.1 million.¹⁰

- By the end of 2000, India had a prevalence rate of one percent, which means an estimated 3.86 million people living with HIV/AIDS, second only to South Africa.¹¹

- In China, the world's most populous country, the health ministry estimated that 600,000 people were living with HIV/AIDS in 2000; reported infections rose by over 67 percent in the first half of 2001.¹²

Eastern Europe has the fastest increasing rate of new HIV infections, with 250,000 new infections in 2001, bringing the total to one million people living with HIV/AIDS.¹³

- Russia has had dramatic increases of infection rates, with reported infections doubling every year since 1998; in 2001 129,000 people were living with HIV/AIDS, though actual figures are estimated to be much higher.¹⁴
- The highest adult prevalence rate of HIV is in the Ukraine at one percent.¹⁵

In Latin America and the Caribbean, 1.8 million people are living with HIV/AIDS, with the Caribbean having the highest prevalence rates outside of Sub-Saharan Africa with an average rate of 2.11 percent; while rates are lower throughout Latin America, rates among certain populations tend to be higher.¹⁶

- Haiti and the Bahamas are the two most affected countries with prevalence rates exceeding four percent.¹⁷

In North America, there were 45,000 new HIV infections in 2001, bringing the total to 940,000 living with HIV/AIDS. Evidence exists that HIV infection is moving into poorer and more deprived communities, with women at particular risk of infection.

- Young adults belonging to ethnic minorities and homosexual males are at greater risk of infection than they were five years ago in the United States.¹⁸

Youth

There are 1.7 billion youth aged 10-24 living in the world today, 86 percent of which live in developing countries.¹⁹ Their need for accurate, comprehensive education, information, and services about sexuality, sexual health, and HIV/AIDS must be a priority if the epidemic and its devastating effects are to be halted for a future generation.

Over 10.3 million people aged 15-24 are living with HIV/AIDS, and half of all new infections (7,000 per day) occur among young people.²⁰

2.6 million men and 5.3 million women aged 15-24 are living with HIV/AIDS in Sub-Saharan Africa.²¹ In addition, 90 percent of all AIDS orphans, 12.1 million children, are struggling in the region.²²

Young people often lack the knowledge and skills to protect themselves and their sexual partners; in Mozambique, 74 percent of young women and 62 percent of young men aged 15-19 do not know of any way to prevent HIV/AIDS.²³

More than half of sexually experienced young people aged 15-19 in Kenya, Ghana, Zambia, and Zimbabwe believe they have little or no risk of getting HIV or AIDS.²⁴

In China, one of the areas with the fastest rising rates of HIV, only 26 percent of women age 15-19 know about the condom, in India, only 47 percent of women age 15-19 know about the condom.²⁵

Women

Gender inequity, lack of resources, knowledge, and power put women at particular and differential risk for HIV/AIDS. In particular, women's lack of power and decision making capacity in sexual relationships make them share a disproportionate burden of HIV/AIDS cases.

In the most devastated countries, the rate of new HIV infections among girls is 5 to 6 times higher than for boys.²⁶

The majority of young people age 15-24 living with HIV/AIDS in Sub-Saharan Africa and Asia are young women.²⁷

Young women are at greater risk of becoming infected with HIV during unprotected vaginal intercourse and become infected at earlier ages than men.²⁸

¹ UNAIDS, AIDS Epidemic Update, December 2001

² UNAIDS, AIDS Epidemic Update, December 2001

³ UNAIDS, Impact of HIV and Sexual Health Education on the Sexual Behavior of Young People: A Review Update (Geneva: UNAIDS, 1997).

⁴ UNAIDS, Global Crisis-Global Action, June 2001

⁵ UNAIDS, AIDS Epidemic Update, December 2001

⁶ UNAIDS, AIDS Epidemic Update, December 2001

⁷ UNAIDS, AIDS Epidemic Update, December 2001

⁸ Population Reference Bureau, World Population Data Sheet, 2000

⁹ UNAIDS, AIDS Epidemic Update, December 2001

¹⁰ UNAIDS, AIDS Epidemic Update, December 2001

¹¹ UNAIDS, AIDS Epidemic Update, December 2001

¹² UNAIDS, AIDS Epidemic Update, December 2001

¹³ UNAIDS, AIDS Epidemic Update, December 2001

¹⁴ UNAIDS, AIDS Epidemic Update, December 2001

¹⁵ UNAIDS, AIDS Epidemic Update, December 2001

¹⁶ UNAIDS, AIDS Epidemic Update, December 2001

¹⁷ UNAIDS, AIDS Epidemic Update, December 2001

¹⁸ UNAIDS, AIDS Epidemic Update, December 2001

¹⁹ PRB, The World's Youth, 2000.

²⁰ UNAIDS, "Children and Young People in a World of AIDS" 2001

²¹ UNICEF, Progress of Nations, 2000

²² UNAIDS, "Children and Young People in a World of AIDS" 2001

²³ UNAIDS, "Children and Young People in a World of AIDS" 2001

²⁴ Population Reference Bureau, World Population Data Sheet, 2000

²⁵ The Alan Guttmacher Institute, *Into a New World: Young Woman's Sexual and Reproductive Lives*, New York: AGI, 1998.

²⁶ UNAIDS, Global Crisis-Global Action, June 2001

²⁷ UNICEF, The Progress of Nations, 2000

²⁸ Kiragu K., "Can We Avoid A Catastrophe?" *Population Reports*. Vol. 12, 2001



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