

Sexual Health Education! A Taboo

Hafsa Jabeen**Department of Medical Education, ISRA University, Islamabad, Pakistan****Corresponding Author:** Hafsa Jabeen, Department of Medical Education, ISRA University, Islamabad, Pakistan.**Received:** April 04, 2022**Published:** July 14, 2022© All rights are reserved by **Hafsa Jabeen.**

Dear Ms Editor, Primary concern that this article will address is if we are following the evidence based protocol towards sexual health? There is handsome amount of evidence linking the spread of STIs, pregnancies with risks, unsafe abortions and even more so notorious social problems like harrasments and consequences with the lack of sex education in schools. All developed countries have endlessly funded programs to find out how education about sexual health can help reduce the economic burden and morbidity in retrospect. It would be significant to keep all that experimental and observational data in front while establishing new policies and attitudes towards sexual practices and orientations. Evidence explains the use of data to prevent criminal sexual practices and shape laws around them.

To put things into perspective, according to The Lancet (2018), 165,000 people in Pakistan are living with HIV. About 147,851 (89.6%) are not receiving any treatment. In the UNAID progress report, two major factors identified for the negligence were clinical malpractice by unregistered and unqualified people who only pretend to provide medical care, as well as a lack of effective community outreach, access to HIV prevention services, societal prejudice and discrimination, and sexual and gender-based violence are all issues that require immediate response.

We are raising questions about shame, discomfort, embarrassment and toxic cultural beliefs towards sexual and reproductive health and education. Average conversations about sex among teenagers if observed is regressive and prone to unsafe sexual practices and reflects the dangers it poses. How much of that is because of the lack of education and respectable discussion on the topic? It would be interesting to explore teen psychology and attitude towards their own desires and needs and what they turn to

serve their curiosity. And it will also be worth noting if a developed dialogue would help tame the desire.

The discussion and mention of Sex still remains a taboo widely. We occasionally humor ourselves while discussing the paradox. It is often referred to how fertile the population is and explosive growth rate of population explain how comfortable people get. Why is the mention of sex still frowned upon? It is also worth noting how carefully Urdu masks the meaning. All the vocabulary around the physical act of reproduction is only capable of suggesting what may have happened. The discomfort is very obvious in the language. Now the question is why exactly is the entire conversation "suggestive" at best. Does it cause an unintended miscommunication leading to errors in diagnosis? We must explore if the adaptation to the confidence that science brings and abandoning the shame will make us gain trust of our patients.

According to the biomedcentral the ratio of unplanned pregnancies in Pakistan is 16-46%. About 8.4% of maternal mortality is due to unplanned pregnancies. An estimate was made that every 5 in 100 pregnancies end in abortions. Most of these abortions are carried out by midwives and da'ais. complications occur in about 41-49 % of clandestine abortions performed by nurses, and midwives, compared to 0.1% abortions performed by gynaecologists.

There is one not so hidden agenda behind this article and that is to destigmatize the discussion on sexual health just like how we have been successfully revolutionizing and destigmatizing conversations on mental health. Sex Education will be the strongest tool in our design on revolutionize the ways of communication about the health risks. Our hypothesis can be, 'destigmatization of sexual health education will reduce the likelihood of STIs, unwanted preg-

nancies and sexual assaults.' We should also be prepared for unflattering inference because of ethical relativism.

Can we implement the lessons West has learnt through sex education campaigns? Pakistan may not be prepared. Various studies have been done examining the need of sex education in Pakistan but there isn't enough on the ethical challenges particularly faced by Pakistan. Even after sufficient evidence of strong positive correlation between education and openness leading to better health. It does not come without a challenge to introduce something like that to adolescents or to older adults in our society. Even in the west the area was met with a lot of backlash.

As a society the belief is pertinent that if we introduce children to sex, the children will feel inclined to go for it. Is it an equation if we put those two things together? Will people feel encouraged to engage in sexual activities if they are taught at school. Will sex education propagate poor sexual practices. We do not have a cross section of those two together. But if we have to think radically the answer would very clearly be No. Because people have known sex and have seeked knowledge about it. And people who continue to exploit the unchecked judicial system continue to do so. And those who don't, don't. It is a question about autonomy as well. States can only enable people to choose between two of the safe options. Adults have a right to know about their basic human rights and they should be empowered to decide for themselves. Recently the government has made efforts to reduce access to harmful content. Which may not have been a very productive solution. People do find ways to access the contents. Our better judgment says the modest possibility would be to talk about safety and abstinence for starters. We can go on from that.

It is crucial to pay attention to the fact that the majority of the population stays out of schools. Hypothetically, even if the idea is introduced in schools it may not yield any significant improvements. Hence the likelihood of schools not being a very significant medium. Who should be speaking to children about the importance of being informed about ethical and moral implications of sex? A study does suggest parents and pediatricians to be a team towards the grooming of children to have an ethical and functional model of sexual health. Which will again be inaccessible to masses.

Psychology believes that grooming should begin at an early age. Five to ten year olds should be taught about their genitals, starting

with at least the correct name and anatomy. Parents should learn how to teach their children. Parents can be given comprehensive training about the matter. We might also face an increased need to produce expert trained counselors for the matter. We can hope the concern reaches people who are skilled to decide the future of education and teaching institutions.