



# Sexuality Education and Reproduction: The Complex Interaction and the Impact of Choices and Consequences

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## Abstract

Sexual interaction is an integral function of human life. Sexuality education is a complex series of proper, accurate content and timely implementation to avoid myths and adverse consequences. Comprehensive Sexual and Reproductive Education (CSE), understanding evolving and diverse concepts of sexuality and reproductive rights is a direct consequence of educational efforts by communities and educational systems. Health care is an integral part of those efforts. Widespread age-appropriate comprehensive informative programs are a desirable part of all person's education, albeit limited by local policies and politics. Medical practitioners must contribute positively to reproductive education conducive to optimal reproductive health.

Keywords: Sexuality; Reproductive health; Gender roles; Reproductive rights; Reproductive justice; Optimal health

## SUMMARY

The impetus to address the issue of sexuality, reproductive health education and management and its impact on individuals' life choices and consequences was provided by my experience as a physician, educated, trained and experienced in the practice of clinical obstetrics and maternal fetal medicine for over 30 years. This professional activity provided me the opportunity to listen, evaluate, understand, respect and respond to the concerns of women or cis or transgender couples faced with the often-complex decision of dealing with their gender expression and practices. Even in the event of a planned pregnancy or an unplanned, mistimed pregnancy at different times in their life, in a variety of personal circumstances, and a wide spectrum of desires and situations, including coerced sex or gender based violence, or confronting the occurrence of a sexually transmitted infection, all issues with potential or real short- and long-term consequences for the women and eventually her fetus and the extended family.

A significant part of human's life involves sex, sexuality and sexual interaction. A full understanding of the intricacies of these events is paramount. I received no formal training in sexual medicine, however I came to the understanding that sexuality education and reproductive choices and consequences are very closely related, and I developed a strong interest approaching the multiple ways a woman uses to get to the decision of what choice to make for her body, her health, her life and her relationships in order to respond appropriately, with knowledge, clarity, respect and empathy. Equally important, however seldom understood, is that the burden of responsibility on these matters resides with the female, a critical issue in clinical medicine with educational, social, financial, administrative, legislative, judicial and political implications. Her choice

results very frequently in a lifelong influential event in her health.

The World Health Organization (WHO) defines reproductive health as a state of complete physical, mental and social wellbeing, and not merely the absence of disease in all matters related to the reproductive system, its functions and processes. It implies that people can have a satisfying and safe sex life without imposing gender norms, and that they should have the right and the ability to reproduce and the right to decide when and how often to do so.

Reproductive Justice (RJ) is defined as "the human right to maintain personal body autonomy, have children, not have children, and parent the children in safe and sustainable communities". This approach is a comprehensive wide spectrum of issues affecting the reproductive lives of vulnerable persons, including access to effective, accurate, all inclusive, age-appropriate sexuality education, prevention and care for sexually transmitted infections, contraception, alternative birth options including parenting, adoption and safe induced abortion, adequate prenatal care, domestic violence assistance, adequate wages to support families, and a safe environment.

The above definitions include the issue of "choice", defined as the act of picking or deciding between two or more possibilities, a decision made based on available options, learning, and understanding (eg: informed choice) and "consequences", defined as a result, effect or outcome of a choice, (an action) or inaction.

Women's reproductive health is a priority for the Centers for Disease Control and Prevention (CDC) division of Reproductive Health, dedicated to improving women's health from menarche to menopause. In addition, sexual and reproductive health education were addressed in a clinical report from the American Academy of Pediatrics in 2016 providing evidence based sexual and reproductive health education, which must encompass developmentally, structured information of human sexuality and sexual reproduction over time.

For decades parents have reported talking openly with their young teenagers regarding sexual issues, including dating behavior, sexually transmitted conditions, abstinence until marriage, parental responsibility and more, showing the concept that sexual education can be provided initially by the family. Parents also supported the participation of schools to implement Comprehensive Sexual Education (CSE) curriculum to supplement their efforts, including birth control information, including condoms, and that all efforts within this subject should begin before students reach seventh grade. Full understanding of the "sexual debut" age is an important consideration for the educational system to understand

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the importance of completing sexuality education early.

We encourage the implementation of Comprehensive Sexuality and Reproductive Education (CSE) provided by trained personnel in all schools nationwide, with careful observation and monitoring of the program content, age appropriate, with parental intervention and consent when applicable, with careful observation of the local culture and the societal expectation that persons should conform to traditional notions of gender and sexuality. All persons able to implement penile vaginal penetrating intercourse should receive timely informative lessons including the anatomy and physiology of the male and female reproductive systems, sexual behaviors including abstinence, with full and accurate description of the available choices and the consequences that followed each of those decisions on all persons capable of consensual diverse practices related to sexuality, including reproduction. These educational efforts must include knowledge and attitudes that respect and support the many ways we encounter gender expression in the population, encouraging gender equitable norms and should continue in undergraduate college education, trading schools, medical schools, residency training programs, clinical practices of pediatricians, adolescent medicine specialists, obstetricians-gynecologists, family physicians, internists, midwives, advanced nurse practitioners and public health state departments programs. We understand this short paper does not encompass the multiple elements that are contained in a CSE program.

Health care insurers must respond positively to the federal government's requirement to provide easy access, cost free contraception to include all FDA approved techniques and medications for all pregnancy capable persons to increase its use, prevent sexually transmitted infections and unplanned pregnancies, and decrease the need to resort to induced abortion as a means of family planning, while maintaining the access to legal and safe induced abortion in indicated cases that are still occurring in daily practice.

The firm decision (choice) to avoid unprotected intercourse will go a long way to decreasing perceived or real undesirable consequences. All political groups advocating for reproductive rights, no matter how well intentioned, must include all persons capable of reproducing and properly informed those groups on all available choices, avoid using inappropriate terminology and inaccurate information.

The slogan "my body, my choice" seen on street gatherings and rallies should go much farther than advocating for a single approach to secure women's right to choose if, when and how often to reproduce. Furthermore, are only women who need their reproductive rights protected?

In summary, social, political, legislative, educational and medical battles have been drawn, often reaching heated confrontations that unfortunately create criminal behaviors.

The result of comprehensive, universal, well timed sexuality education leads to reproductive justice based on the international human rights framework, which defines reproductive rights for all, as human rights.

I understand that this approach represents a very serious commitment to break away from business as usual in human reproduction. It is an appeal to activate ways and means to implement an educational system that can offer everyone willing to join in the effort, to realize their rights to reproductive health in a safe environment [1-28].

The United Nations has recently announced its Summit of the Future to take place in September of 2024. This will be a splendid occasion to emphasize universal comprehensive respectful sexuality education, reproductive rights and reproductive justice for all.

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