



School Based Comprehensive Sexuality Program in Kolkata and Asansol, West Bengal, India

Comprehensive sexuality education (CSE) is a curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality and reproductive health. It aims to equip children and young people with the knowledge, skills, attitudes and values that empower them to realize their health, wellbeing and dignity; develop respectful social and sexual relationships; consider how their choices affect their own wellbeing and that of others; and understand and ensure the protection of their rights throughout their lives.

National Health Mission of the Government of India in 2014 began in implementing the Rashtriya Kishore Swasthya Karyakram (RKSK - the National Adolescent Health Program) in selected districts of the country. The project aims to strengthen the government of India's RKSK program.



This project is being undertaken in collaboration with Rotary Club of Capitol Hill (Washington, DC) and Rotary Club of Behala (Kolkata, India) and implemented by the Indian Academy of Pediatrics. Monitoring and Evaluation support is being provided by Phalarope. Funding has been provided by the RMCH Action Group and the District 7620.

Objective: Work with schools and school health programs in both urban and rural areas of Kolkata and Asansol (West Bengal) to raise awareness on sexual and reproductive health in order to improve health and development among young adolescents.

Key Accomplishments so far

Training camps have been conducted both in the urban and rural areas of Asansol and Kolkata. So far, 829 adolescents - both boys and girls - have been trained in the rural and urban schools of West Bengal (India). Adolescent health issues such as nutrition, reproductive and sexual health, mental health, medical issues and vaccination were discussed to create awareness and foster positive behavior change. The program incorporated pre-test and post-test questionnaires. It ensured that officials from the RKSK program were informed and engaged in the training program in order to ensure sustainability of the program. Anemia checkups and routine checkups were undertaken in some trainings. Anemic children were given treatment and referred to the government hospital.





Data analysis of one of the trainings in the rural areas of Asansol showed that knowledge of sexual and reproductive health was low among the respondents. Among those who responded (57 of the 164) the most common sources of information on reproductive health were parents, teachers and friends. There is little knowledge about symptoms of STDs and very low knowledge about ways to prevent STDs or pregnancy. Concerning the use of fertility awareness methods (i.e. Standard Days method) to prevent pregnancy, it seems that most - if not all - do not know about this method.



Overall, qualitative observations by the trainers regarding the program showed that students have enthusiastic attitude, participate actively during the training, and are interested to learn about reproductive and sexual health issues.

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