



# GIAff4ID

Games for Improving Affectivity in Youngsters with Intellectual Disabilities

Work package 2 - Activity 2.2

Template National Report - Desk Research and Interviews for Youngsters with Intellectual Disabilities



### Table of contents

- 1. Introduction
- 2. Methodology
- A) Desk Research
- 3a. Results
  - B) <u>Interviews</u>
- 3b. Results
  - Interviewees
    - 3.1 Key findings regarding the different kind of relations
    - 3.2 Key findings regarding sexuality and sex education
  - Interviewers
    - 3.3 Key findings regarding their degree of knowledge in this context
    - 3.4 Key findings regarding the degree of knowledge of YPWID in this context
- 4b. Final considerations
  - 4.1 Analysis, interpretation and comments of the key findings
- 5. Conclusions



### 1. Introduction

GIAff4ID- Games for Improving Affectivity in Youngsters with Intellectual Disabilities is a project aiming at enlarging sensibility and awareness around sexuality and affectivity in YPID. It is inspired by the need to shift the discourse from negative to positive freedom, to positive actions that allow the enjoyment of Sexual and Reproductive Health and Rights. In fact, persons with disabilities' sexuality is mostly discussed in terms of protection from abuse and violence, to which they are more vulnerable. It is certainly an important discussion to have, although it is as relevant to ensure that YPWID are equipped with the same sexual education as their peers, because it allows integration in society and independence over this part of their life.

GIAff4ID wants to break stereotypes around sexual education and affectivity of YPWID, demonstrating that disability is a union of a physical or mental impairment and a barrier. The project seeks to develop game-based Activities while, at the same time, produce materials for youth workers on how to use them and adapt them to the context they work in. Training youth workers will contribute to building networks and increasing sharing of good practices among youth associations working in this field.



### 2a. Methodology

In the context of Activity A2.2 Desk research and Interviews with YPWID in relation to Sexual Education and Affectivity themes, Partners conducted a desk research in order to investigate different aspects of sex education, and to engage in a preliminary inquiry on the issues that will be further examined in the Interviews. In particular, the desk research phase focuses on selecting and analyzing the most relevant themes on Sexual Education and affectivity for YPWID and on how to conduct youth work towards YPWID's independence and awareness of their own needs.

In order to explore these different topics and collect information, Partners used: online open resources, websites, e-books, national, European, and international projects connected to the issue, and studies and researches on Sexual Education and affectivity for YPWID.

The materials collected comes from:

- Existing training programmes and courses;
- Projects' results or activities;
- Research papers or essays;
- Websites or online resources;
- Audiovisual contents;
- E-books;
- Any other item considered relevant for WP2's objective.

The main goal of the desk research was to investigate different aspects of sex education, and to engage in a preliminary inquiry on the issues that have been further examined in the Interviews.

In a second phase instead, 6 interviews were conducted by youth workers to YPWID by each Partner of the Consortium. The objective of these interviews was to collect needs, expectations and level of knowledge on the topic of Sexuality and Affectivity by YPWID. The interview's results served as support working materials to develop other deliverables of the project, including the European and the present report, as well as the Toolkit.

- o Each partner selected two youth workers to conduct the interviews. They have demonstrated their interest and motivation to participate in the project and are familiar with the themes and general objectives of the project. Each partner is responsible for informing the youth workers about the project.
- o In total 6 YPWIDs are interviewed. YPWIDs are supposedly aged 12-17 years old.



- Each partner monitors the results of the interviews and ensures that the document was properly completed.
- The interviews are conducted either in person or remotely.
- O The interviews are composed of 57 questions. They can be divided into two macrosubjects: relations and sexuality. The former in fact, stems from very general questions in which participants are asked to reveal their subjective point of view about friendship, affection and relations in general. The latter instead targets the main focus of the project, addressing the topic of sexuality and sex education.
- O Interviewers are also asked to reply to some specific questions regarding their knowledge of the context, their preparation about it and, as experts, their main findings in terms of obstacles and difficulties encountered in order to pursue the objectives of the activity.

The background of the interviewee is taken into consideration for the involvement into this activity. Underlining what is his/her experience and expertise and what contribution can be relevant for the development of the project's activities. The approach for conducting such interviews was very flexible, allowing the use of different methods in order to accommodate the interlocutor's needs.

To sum up, the present Report is deemed to analyze the main findings of the desk research in order to obtain sensitive information to combine with the relevant data emerged from the Interviews. Indeed, each Partner of the Consortium is going to compile together data from Desk Research and the Interviews that will be further put together by CRES Association into the European Report.



### 3a. Results

As above mentioned, Desk research provides a comprehensive summary of information at national level. The present section relies on data previously collected. It aims to summarize fundamental research and, at the same time, highlight the main finding of the activity.

The tables are divided into several original sections, in order to provide a detailed analysis of the topics concerned. Partners are therefore requested to discuss their responses and to choose the significant findings that were gathered during the Desk Research.

Provide relevant findings of national definitions (if any)

According to data, do you believe that sexual education is sufficiently covered in your country? Briefly explain.

Despite discussions since 1993 with the participation of experts, national institutions, NGOs and UN entities and programmes, Bulgaria still has no national sexual and reproductive health (SRH) programme. Some activities targeting SRH are included in existing strategic and programmatic documents that the Ministry of Health implements - the National Health Strategy 2021-2030, the National Programme for Improving Maternal and Child Health 2021-2030, the National Programme for the Prevention and Control of HIV and Sexually Transmitted Infections 2021-2025, etc., but they are far from comprehensive enough and there is often a lack of synergy between national policies and those at the local level. The systemic health education is carried out integrated in the process of general education preparation, because there is no separate school subject. As a school subject, it can be carried out in the elective hours of the extended training or within the additional training at the decision of the school. Individual topics and competences are addressed in school education within the framework of "Man and Nature" and "Biology and Health Education", but access to systematic interactive health and sexuality education for all Bulgarian students. It is necessary to look for a mechanism that would ensure the opportunity for all young people in the Bulgarian school to be included in interactive systemic health education.

Provide main findings of sexual

Sexuality education of students and young people with



education on the national level. Briefly explain.

intellectual disabilities is a topic that provokes a lot of discussion, both among the professional community and society as a whole. As a society, we continue to feel uncomfortable about sexuality and disability.

- All this requires to enrich the pedagogical experience in this field and to offer educational programs in social and sexuality education for students and young people with many disabilities.
- Clear rules, specific training and impact guidelines, as well as appropriate practical training for school staff and the family are very important in providing appropriate social and sexual education to a child with multiple disabilities. Good policies and guidelines reduce the risk of real abuse or suspicion. A holistic approach to social and sexual education may take longer, but ensures success in providing sexual education to this group of students and young people.
- The school sexuality-education programme is optional.

According to data, do you believe that your country provides a sufficient legal framework **for** YPWID sexuality? Briefly explain.

The Council of Europe Convention on Protection of Children against Sexual Exploitation and Sexual Abuse ("the <u>Lanzarote Convention</u>") requires from states that they "ensure that children, during primary and secondary education, receive information on the risks of sexual exploitation and sexual abuse, as well as on the means to protect themselves, adapted to their evolving capacity."

Sexual education of youth is part of the policies and legislation under the authority of the Ministry of Labour and Social Policy and the Ministry of Education and Science at national level and the municipal authorities at local level.

Despite the national efforts children with disabilities continue to be one of the most excluded and invisible groups in the society. They are at greater risk of separation from their biological families, they are more likely to live in institutional care or to remain outside the mainstream schools and kindergartens.

According to data, do you believe that your country provides YPWID with a satisfying level of sex education? Briefly explain.

Sexuality education either hardly exists or is focused primarily on biological aspects. Sexuality education is integrated into wider teaching subjects, like biology, life skills or health education; stand-alone programmes are rare.

Very often children with intellectual disabilities, even if they are included in the learning process and to be present in the classroom, have not been successfully assimilated into the



collective. They are usually positioned at the back and on the side of the rooms themselves, they are accompanied by an adult - a parent or personal assistant, and if they are quiet and calm, they remain almost imperceptible.

Comprehensive sexuality education should also be provided to out-of-school children and youth. This is particularly relevant for children and young people with disabilities, many of whom, unfortunately, do not yet have access to mainstream education. Their sexuality tends to be ignored, or even perceived as harmful, and they are therefore often deprived of any access to adequate information on sexuality and relationships, despite their heightened vulnerability to sexual abuse and exploitation. Online sexuality education can be a useful tool for out-of-school children, provided they have access to safe and inclusive digital spaces.

The number of hours cannot be assessed because only 1 hour per week is allotted, which also includes 'civil and intercultural education'. It is uncertain whether the final sub-curriculum on 'Health and Sexuality' will have a comprehensive character.

- 1) Please list the most relevant themes on Sexual Education & Affectivity for YPWID, according to data collected in your country
- 1. Biological aspects and body awareness
- 2. Sexual and reproductive health
- 3. Family, friendship, love and romantic relationships
- 4. Prevention of HIV/STIs
- 5. Pregnancy and birth; and contraception

Gender roles; mutual consent to sexual contracts; sexuality and online media; and human rights and sexuality but these sessions are mainly delivered by NGO projects. The topics of sexual abuse, domestic violence are part of the programmes implemented by NGO in the school funded by the European projects.

2) Please provide some challenges or issues with regards to Sexual Education & Affectivity for YPWDI and with regards to teaching Sexual Education & Affectivity to YPWDI in your country Sexuality education of students and young people with multiple disabilities is a topic that provokes a lot of discussion, both among the professional community and society as a whole. As a society, we continue to feel uncomfortable about sexuality and disability. That is why it is not uncommon for misunderstandings and confusions in socio-sexual development and upbringing to stem from these different ideas that people have about sexuality. All this requires to enrich the pedagogical experience in this field and to offer educational programs in social and sexuality education for students and young people with many disabilities.

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á	Clear rules, specific training and impact guidelines, as well as appropriate practical training for school staff and the family are very important in providing appropriate social and sexual training to a child with multiple disabilities.
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### 3b. Results

The present section is divided into two separate parts in order to assure a better understanding of the activity and to preserve the fundamental findings of the research from all sides. The first part regards the Interviewees, their general information and their replies to the questions. The second part instead, refers to interviewers which had additional questions related to the development of the work.

In order to give a general view of the main findings provided through the interviews, the tables below are parted into macro-topics that are addressed in the interviews. The first column refers to a numeric indicator, an average between all the questions-replies. Partners are asked to give a number between 1-5 (where 1 is Very low, 2 is Low, 3 is Average, 4 is High and 5 is Very High). The second column instead, provides a more detailed and discursive argumentation.

The section "Further fundings" is a free panel to add something to the table; e.g. some specific quotes reported from the interviews, topics that popped out during the interviews that were not automatically related, main difficulties of that part of the interview.

The tables below are conceived to provide an outline of the results obtained in the interviews. To this extent, the goal here is to gather replies of each interview in order to realize a general overview of the findings. As mentioned above, the present National Report will be further analyzed into the European Report and it is crucial to take care of the most important topics and results addressed during the interviews phase. Therefore, in this present section data collected is going to be categorized and then processed by Partners in the following section.



### - Relevant themes for Desk Research

THEMES	SOURCES	SHORT SUMMARY
National legal regulation for people with disability	The Persons with Disabilities Act https://lex.bg/bg/laws/ldoc/2137189213	The Persons with Disabilities Act (PDA) outlines the basic rights of persons with disabilities. Support is general and additional and is applied in accordance with individual assessment of each child and each student with a disability prepared under the terms and conditions of The law on preschool and school education and state education standards.
National legislation for children with disabilities	the Law on Pre-School and School Education, https://lex.bg/bg/laws/ld oc/2136641509	This Act shall regulate the social relationships concerning the safeguarding of the right to pre-school and school education, as well as the structure, functions, organisation, management and financing of the pre-school and school education system. Bulgaria has several laws concerning education. The main goals of preschool and school education are: intellectual, emotional, social, spiritual-moral and physical development and support of each child and each student in accordance with his age, needs, abilities and interests of the children. The law recognizes the right of every citizen to receive education and ensure its realisation without discrimination while not allowing restrictions or privileges based on race, sex, ethnic or social origin, religion or social status. According to the Law on Integration of People with Disabilities, the Ministry of Education and Science provides a supportive environment for integrated education of children with special educational needs. Children with Special Educational Needs (SEN) and / or chronic diseases are trained in integrated schools that are obliged to accept them and as an exception when all other possibilities for training and education in public schools have been exhausted and upon written consent.
National legislation for inclusive education	Regulation on Inclusive Education https://lex.bg/bg/laws/ld oc/2137177670	It defines the state educational standard for inclusive education. The Ordinance regulates public relations related to ensuring the inclusive education of children and students



		in the system of preschool and school education, as well as the activity of the institutions in this system for providing support for the personal development of children and students. Inclusive education is the process of ensuring that all children with special needs have equal opportunities to receive an effective and quality education. This is achieved with additional aids and resource support in general education kindergartens.  In order to prepare children for a productive life as full members of society, it takes desire, compromises and a lot of work on the part of the teacher and the child.  Inclusive education is a model of teaching that focuses on understanding and meeting the needs of children regardless of their differentiating characteristics. In this way, it is und"
Sexuality education in Europe and Central Asia	https://www.bzga- whocc.de/fileadmin/user _upload/Dokumente/BZg A_IPPFEN_Comprehensiv eStudyReport_Online.pdf	
Analitycal report for children with disabilities	Data on the children with disabilities in Bulgaria, UNICEF How to overcome the challenges https://www.unicef.org/bulgaria/%D0%B4%D0%B0%D0%BD%D0%BD%D0%B0%D0%D0%B0%D0%D0%B0%D0%D0%D0%D0%D0%D0%D0%D0%D0%D0%D0%D0%D0	National data on the challenges and needs of children with disabilities in Bulgaria



Materials for teachers, parents and specialists	https://priobshti.se/categ ory/priobshtavashto-	Centre for Inclusive Education is a Bulgarian NGO whose main goal is to help as many
	obrazovanie	children as possible learn and play together with their peers. A large part of our projects and programs are aimed at children with learning difficulties. Social inclusion and quality education for all children, as well as the protection of those in need. Developed materials for parents, teachers and specialists.
Inclusive education Bulgarian Model for Building an Inclusive School Environment	https://priobshti.se/categ ory/priobshtavashto- obrazovanie	The One School for All programme contributed to quality education for all children that will allow everyone to develop their full potential. It also has specific objectives to test the applicability of the CIE Model in different school environments, further advance it and demonstrate its effectiveness. The Model is a reflective and participatory approach, developed entirely by the CIE over the course of five years. The aim was to reinforce inclusive attitudes and practices as a sustainable and system-level change in mainstream schools.
Materials for teachers to improve the health of children and young people, including reducing health inequalities, through a specific setting focus on schools.	School for help in Europe https://www.schoolsforh ealth.org/sites/default/fil es/material-for-teachers- 2020-bulgarian.pdf	In this educational material present a set of activities organised in the form of a project for universal health education. The project aims, through awareness, participation and empowerment of the school community to explore demands and collectively create alternatives that contribute to reducing social inequalities affecting health directly or indirectly
Regulation where sexual education is included	REGULATION No. 13 of 21/09/2016 on civic, health, environmental and intercultural education. Mental health and personal development; Sexual health and sexually transmitted https://www.shu.bg/wp-content/uploads/file-manager-advanced/users/normativni-dokumenti/naredbi/12_n	The objective is to convey to students knowledge about modern aspects of health, healthy lifestyle, sexual relationships, narcotic substances, individual and social consequences of their use and risky behavior in general. Sexual education is included in the topic of Personal Hygiene and Health - Learning about sexually transmitted diseases and how to prevent them.



	dbr13_2016_GZEIObrazo vanie 280918.pdf	
Materials for teachers for health education	REGULATION No. 13 of 21/09/2016 on civic, health, environmental and intercultural education. Mental health and personal development; Sexual health and sexually transmitted https://www.shu.bg/wp-content/uploads/file-manager-advanced/users/normativni-dokumenti/naredbi/12_ndbr13_2016_GZEIObrazo vanie_280918.pdf	,
Materials for	MODEL OF A HEALTH	MODEL OF A HEALTH EDUCATION PROGRAM
professionals addressing sexuality education with	EDUCATION PROGRAM FOR PRIMARY	FOR PRIMARY STUDENTS
young people with special	STUDENTS https://diuu.	
needs	bg/emag/13031/2/	

# 3.1 Key findings regarding the different kind of relations

This section concerns questions 1 to 17 of the interview template. It comprehends very generic questions related to all kinds of relationships.

	On a scale from 1 to 5	Argumentative response
Do Interviewees show general understanding of relationships? How much? Please explain briefly.	5	The interviewees show general understanding of relationships. They make a clear differentiation between what friendship is and what love relationships mean "A true friend is someone who supports you", "Someone you like in a specific way". In questions related to friendship, young people calmly describe characteristics of their peers that they associate with friendships such as trust,



	On a scale from 1 to 5	Argumentative response
		support, being relied on in times of need. They consciously distinguished between loving and friendship relationships. Recognise the difference in emotions towards a friend and emotions towards a boy/girlfriend.
Do Interviewees show general understanding of friendships? How much? Please explain briefly.	4	The interviewees identified the importance of friendship as "being with someone who has the same interests and gives you support and understanding. Being with you in difficult situations." Almost all did not share difficulties in making friends with other peers.
Do Interviewees show general understanding of sentimental/romantic relationships? How much? Please explain briefly.	4	The interviewees show general understanding and talk calmly about their personal experience about romantic relationships. They shared emotions such as "liking", "affection", "happiness", "butterflies in the stomach" that they associate with sentimental relationships. They defined a "good relationship" as "when someone respects you, doesn't talk behind your back and doesn't lie to you.
Do Interviewees show understanding of problems or obstacles related to relationships? How much? Please explain briefly.	4	The main problems in the relationship interviewers indicated lying, rejection, alienation. They share this based on their emotional experiences positive and negative, but this topic is not discussed at school and in rare cases rather with a parent.
Further findings (if any)	In general, the topic of friendship is a leading one for young people and they can describe what friendship is and who can be your friend. They explain love relationships mainly through their experience and relate it to feelings and love emotions. When it comes to the topic of sexual relationships the interviewees are visibly embarrassed to talk.	

# 3.2 Key findings regarding sexuality and sex education

This section refers to questions 17 to 54. Here the core topics of the interview are addressed.

	On a scale from 1 to 5	Argumentative response
Are Interviewees familiar with sex education? To what extent? Please explain briefly.	1	None of the interviewees mentioned sex education or a lesson on sex topics. To the question "Have you ever had a sex education lesson?" all interviewees answered in the negative. Young people get information on the topic from other sources - from the street, from films and programmes, from friends and much less with their parents/caregivers. In general, they say that it is very important to talk about it so that they do not make mistakes and know how to protect themselves, and they rather get information about sexual relationships from their peers. The interviewees are visibly embarrassed to talk about this topic and find it difficult, but say that they need to talk to a professional, a close person.
Do Interviewees show general understanding of sex? How much? Please explain briefly.	2/3	Interviewees have a basic understanding of sexual relationships and sex. This topic is taboo in the education program, but interviewees shared the need for a specialist to talk to about this topic. They find it difficult to share directly and openly about this with their parents and so seek information from peers or learn some things from TV, films and social media.
Do Interviewees have the occasion and a safe space to talk about sex? How much? Please explain briefly.	2	Interviewees shared that it is important to talk about the topic. In order to feel safe and calm and to talk they need to go to a professional they trust and feel supported by. The conversation should be adapted to the age and development of the child. Some interviewees feel uncomfortable talking to their parents and get information about the topic from outside sources - from the street, from films and programmes, from friends and much less with their parents/carers.

	On a scale from 1 to 5	Argumentative response
Do Interviewees show understanding of the difference between friendship, sex and love? How much? Please explain briefly.	4	Interviewees have an understanding of the difference between friendship, sex and love. This is explored through several questions in which they share the emotional and physical difference. "Friendship is being friends with someone and trusting them. Love is a beautiful thing and you feel happy. Sex is intimacy." Some of them clearly differentiate them according to the emotions and feelings they experience.
Do Interviewees show understanding of their body, its changing and how to keep it clean? How much? Please explain briefly.	3	Not all of the interviewees said they noticed the change in their own bodies. In general, they find it difficult to talk about this topic and respond with short answers saying that they do not want to talk. Understanding of body change has a correlation with the level of intellectual disability. Physical change in adolescence is also associated with feelings of shame, embarrassment, which to some extent may be due to being uninformed and unsure of the perception of physical body changes, external gender markings and emotions in relation to one's own body and to peers. The issue of intimate hygiene is perceived as part of personal hygiene.
Do Interviewees show understanding of sexual orientation and gender? How much? Please explain briefly.	3	The question of sexual orientation was not addressed directly in the interviews, but was tailored to the young person's willingness and understanding of whether they felt safe to talk about this topic and of their own volition to decide to share. A sharing space was created for interviewees to feel safe and secure. This was a major factor in having free sharing. Interviewees shared a difficulty that no one talked to them or talked about it, and in one case this conversation opened up an opportunity for personal sharing and a request for support. The conversation provided an opportunity for one respondent to share a

	On a scale from 1 to 5	Argumentative response
		personal experience they had not shared with anyone.
Do Interviewees show understanding of sexual pleasure and autoerotism? How much? Please explain briefly.	1	Interviewees shared their understandings of sex and intimate relationships primarily through their own experiences. In the interviews, they share about their experience by going through a trial-and-error experience, which may expose them to a risky situation or problem for them. Based on the responses received, they still find it difficult to talk about pleasure, some defining it as a fleeting sensation they have "heard about".
Do Interviewees show understanding of consent? How much? Please explain briefly.	3	On a narrative level, interviewees said they can refuse unwanted contact and say no to someone who harms or lies to them, however, it is unclear how much this is related to their real behaviour and boundaries they have with acquaintances and strangers. Sometimes there is a discrepancy between the behaviour they are posing and their understanding of boundaries, which can be a factor in getting involved in risky or abusive relationships.
Do Interviewees show understanding of how to behave in relation to sexual desire? How much? Please explain briefly. How much? Please explain briefly.	1	Interviewees do not or hardly talk about this topic. Perhaps this is embarrassing for them and they are reluctant to talk about their feelings and emotions about sex.

To what extent do Interviewees show familiarity with the following topics? (On a scale from 1 to 5)



1) Safe Sex	3
2) Birth control	3
3) Pregnancy	3
4) Gynecologist, Urologist or Sexologist	3
5) STDs	2
6) Menstruation	4
7) Sexting	4

# 3.3 Key findings regarding their degree of knowledge in this context

The second section is related to the Interviewers in order to better understand their professional background.

What is the perception of the Project's objectives and potential positive impact for the Interviewers?	It would be good to break down the stereotypes around sexuality education and develop a package of materials to raise awareness on these topics. Young people would talk about their needs if they were given more information and opportunities to talk about sexuality. It is good that they share with their loved ones and talk about sex, but there is a lack of information about sexually transmitted diseases, preventing unwanted pregnancies and the risks of challenging behaviour and abuse.  Young people would talk about their needs by giving them more information on the topic and more opportunity to share.
Do Interviewers have sufficient training, information and material on sexual education and affectivity of YPWID to support them?	Youth workers definitely do not feel prepared and do not have educational information materials. They have a lot of experience working with young people with special educational needs, but in terms of sexuality education they say there needs for more training.  It is important to have trained and prepared professionals in school who can talk about sexuality education with students. They think it is useful to develop information materials for children in accessible language and tailored to their age and individual development. For children with special needs and



	intellectual disabilities, there are no materials to support the conversation about sexuality. They need to have a trained professional working with them and preparing young people on sexuality topics. There should be a trained professional working with them and preparing young people on sexuality issues as they are a vulnerable group at high risk of abuse.
Do Interviewers feel satisfied with the development of materials, based on information reported during this interview ?	All topics from the questionnaire were covered, but there is a need for more questions that address how to refuse and what abuse means, as well as protection from both psychological and physical abuse.

### 3.4 Key findings regarding the degree of knowledge of YPWID in this context

List and explain the main difficulties encountered during the interview:	Interviewees do not or hardly talk about this topic. Perhaps this is embarrassing for them and they are reluctant to talk about their feelings and emotions about sex.
Which topics do interviewers think the respondent lacks in terms of knowledge/support?	Interviewees found it very difficult to talk about sexual relations and pleasure. In general, they find it difficult to talk about this topic and respond with short answers saying that they do not want to talk. Understanding of body change has a correlation with the level of intellectual disability. Physical change in adolescence is also associated with feelings of shame, embarrassment, which to some extent may be due to being uninformed and unsure of the perception of physical body changes, external gender markings and emotions in relation to one's own body and to peers.

### 4. Final Considerations

4.1 Analysis, interpretation and comments of the key findings

Parents can and must play a key role in supporting their own children to develop healthy relationships. However, they often are not in the position to foster these skills in their



children's friends, peers and future partners; only society as a whole can embrace this mission and invest today in the emotional and sexual competence of children and young people in order to increase their wellbeing and prevent violence and gender inequity in the future. Social pressure caused by a rigid interpretation of harmful traditional views of feminity and masculinity, particularly with respect to sex and relationships is the root causes and the effects. When young people lack these crucial skills, they inevitably face a lack of personal growth and joy as much as a lack of ability to form and foster nurturing and stable relationships with others.

Young people rely mainly on the media for information on sexuality. Friends and peers are also important for this. The school however plays a minor role, and parents hardly play any role. Young people would prefer that the role of the school becomes more prominent.

### 5. Conclusions

- Comprehensive sexuality education is part of a good quality education. Thus, it should be provided for by law, be mandatory and mainstreamed across the education system as of the early school years. The curricula and teaching methods should be adapted to the different stages of development of children and take into account their evolving capacity. Curricula on sexuality education should also be regularly evaluated and revised, in order to ensure that they are accurate and meet existing needs. It is important to consult and involve young people themselves, first and foremost, to ensure that the content of education that is provided to them is relevant and adapted to their needs.
- Comprehensive sexuality education should also be provided to out-of-school children and youth. This is particularly relevant for children and young people with disabilities, many of whom, unfortunately, do not yet have access to mainstream education. Their sexuality tends to be ignored, or even perceived as harmful, and they are therefore often deprived of any access to adequate information on sexuality and relationships, despite their heightened vulnerability to sexual abuse and exploitation. Online sexuality education can be a useful tool for out-of-school children, provided they have access to safe and inclusive digital spaces.
- Sexuality education either hardly exists or is focused primarily on biological aspects. The sexual education is integrated into wider teaching subjects, like biology, life skills or health education; stand-alone programmes are rare.
- Crucial importance for teachers to receive adequate specialised training and support for teaching comprehensive sexuality education, irrespective of whether part of the teaching is also carried out by external actors.
- Topics in sexuality education that are most often addressed are those related to the biology of the human reproductive system; prevention of HIV/STIs; pregnancy and birth; and contraception. Some attention is paid to love, marriage and partnership; gender roles; mutual consent to sexual contracts; sexuality and online media; and human rights and sexuality but these sessions are mainly delivered by NGO projects. The topics of sexual abuse, domestic violence are part of the programmes implemented by NGO in the school funded by the European projects.
- The school sexuality-edication programme is optional in Bulgaria.



- There is still serious opposition to sexual education. One of the main argument is that it will encourage young people to start early with sexual relationships
- The activities are being implemented to teach young people out of school about sexualityrelated issues are targeted mostly for vulnerable, marginalized and high-risk young people.
- It would be good to break down the stereotypes around sexuality education and develop
  a package of materials to raise awareness on these topics. Young people would talk about
  their needs if they were given more information and opportunities to talk about sexuality.
  It is good that they share with their loved ones and talk about sex, but there is a lack of
  information about sexually transmitted diseases, preventing unwanted pregnancies and
  the risks of challenging behaviour and abuse.
- Youth workers definitely do not feel prepared and do not have educational information materials. They have a lot of experience working with young people with special educational needs, but in terms of sexuality education they say there needs for more training.
- Interviewees have a basic understanding of sexual relationships and sex. This topic is taboo in the education program, but interviewees shared the need for a specialist to talk to about this topic.

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- World Health Organisation, Regional Office for Europe and German Federal Centre for Health Education (BZgA), <u>Standards in sexuality education</u>, (2010)
- UN Committee on the Rights of the Child: <u>General Comment N. 20 (2016)</u> on the implementation of the rights of the child during adolescence

### Annexes

- Interviews template
- National Report Template