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Sex Education for Smart Population

(A Fundamental Mechanism in Enriching Human Security and Reduction Poverty)

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Poverty and human security are domestic problems that occur in many countries. This caused by the population continuing to increase and not being optimal in suppressing the population which increase every minute. Sex education is one of the solutions to reduce the population and explain that premarital sexual behavior continues to increase from year to year. For instance, the emergence of unwanted pregnancies, abortions, dropping out of school, and contracting non-communicable diseases. This study aims to examine the sex education for smart population to enriching human security and reduction the poverty. Due to the fact that such education would seek to empower people to make the right decisions with correct information on anatomy, contraception, and disease identification and prevention. The intended effects of the intervention include prevention of unintended births, prevention of AIDs and sexually transmitted diseases, and the prevention of

overpopulation which can cause hunger and it will happen eventually in malnutrition everywhere.

Kata Kunci :

Kata Kunci 1;
Pendidikan Seks
Kata Kunci 2;
Kemiskinan
Kata Kunci 3;
Kemananan
Manusia

Abstrak

Kemiskinan dan keamanan manusia merupakan permasalahan domestik yang terjadi di banyak negara. Hal ini disebabkan oleh jumlah penduduk yang terus bertambah dan tidak optimal dalam menekan jumlah penduduk yang terus bertambah setiap menitnya. Pendidikan seks menjadi salah satu solusi untuk mengurangi jumlah penduduk dan menjelaskan perilaku seksual pranikah yang terus meningkat dari tahun ke tahun. Misalnya munculnya kehamilan yang tidak diinginkan, aborsi, putus sekolah, hingga menular penyakit menular. Penelitian ini bertujuan untuk mengkaji Pendidikan seks bagi populasi cerdas untuk memperkuat keamanan manusia dan mengurangi kemiskinan. Karena dengan Pendidikan tersebut diupayakan memberdayakan masyarakat untuk mengambil keputusan yang tepat dengan informasi yang benar tentang anatomi, kontrasepsi, serta identifikasi dan pencegahan penyakit. Dampak yang diharapkan dari intervensi tersebut antara lain pencegahan kelahiran yang tidak diinginkan, pencegahan AIDS dan penyakit menular seksual, sehingga mencegah kelebihan populasi yang dapat menyebabkan kelaparan dan pada akhirnya akan terjadi kekurangan gizi dimana-mana

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INTRODUCTION

Poverty is a problem that envelopes factors at all levels of society and daily life. True, at the core of poverty is the issue of wealth distribution, but this is not the whole story of poverty. There are many factors that lead to this unequal distribution, exacerbate it, perpetuate it, and then there are factors that merely serve to exacerbate the suffering of impoverished people. (Institute 2011) The way in which the act of sex is approached in society is one of these factors.

Sex is an act that is inseparable from the human experience and yet discussing it is often taboo. This culture and lack of an effective educational system is the cause of numerous health-related

pathologies, such as sexually transmitted diseases, and negative social outcomes at the macro level, such as unintended child birth, subsequent teen marriages, and in overpopulation, which leads to a distortion in wealth distribution. Needless to say awareness of the methods of safe sex is required before one can practice safe sex and this has been identified in the literature as major problem in developing countries, where there are portions of the population, most commonly women, that are not aware that even healthy-looking people can have AIDS. It is clear that an important factor in overpopulation and the problems to which it leads is a simple circulation of information. This research will describe sex education as a fundamental mechanism in enriching human security and reduction of poverty. (Hu Angang 2003)

The Complex Systems Approach

In order to understand a multi-factor phenomenon such as poverty a complex systems approach is helpful. The complex systems approach recognizes that each factor, or agent, within a system defines the natures of related factors. Thakur (2007) describes this in regards to the unintended effects of Peace Keeping Operations (PKO). A PKO operates under a set mandate with set goals, and yet it “accomplishes” much more than these goals, often leading to unintended effects on the host country, both good and bad. This is because the PKO is not just an instrument of its mandate, but is essentially the injection of a foreign entity into the organism that is society. The PKO thus often draws much attention from the locals and results in a distortion of the local economy. Industries such as prostitution have been known to grow ten-fold in the presence of a PKO. In addition, restaurants and businesses catering especially for the PKO arise. As one can see, an introduction of a new agent into a system, leads to socio-economic distortions, both positive and negative. (Chiyuki Aoi 2007)

Poverty can be understood in much the same way, for poverty is based on a certain arrangement of socio-economic

entities and social customs. Often times, the poverty arrangement is self-perpetuating, creating a poverty cycle. In order to combat poverty this cycle must be interrupted at some point, leading to a change in the arrangement of the system. The change, because it is a new factor, though made with good intentions, will affect many factors and lead to negative outcomes in some areas. The challenge is to reduce the amount of unintended negative effects and firmly pursue the intended positive effects.

Sex Education Mechanism

As has already been said, sex is a key component of the human experience, the intervention into which will cause widespread effects in society, conceivably, up to the macro level. Providing new information and redefining the sexual experience is not a modest goal, but it is one that has many implications for poverty and the suffering of impoverished people. Such education would seek to empower people to make the right decisions with correct information on anatomy, contraception, and disease identification and prevention. The targets of the education will be all people of all ages and sexes, but especially women and teenagers, who have, through practice, been recognized as the key targets of such initiatives (e.g. MAMTA). (Forss Kim. 2009) The intended effects of the intervention include prevention of unintended births, prevention of AIDs and other sexually transmitted diseases, and the prevention of overpopulation and the “market failure” it represents. Non-communicable diseases will grow due to the lack of understanding of a basic mechanism in sex and will affect the total of population as well as will create endless hunger and poverty in the future.

However, knowledge is not necessarily “good” in nature and several negative outcomes will, doubtless, occur. These may include the increase of promiscuity as a result of the demystification of the sexual experience, a change in traditional attitudes and customs, friction with these traditional attitudes, and

friction within families resulting from empowerment and the new choices it will inevitably lead people to make.

Not only limited to formal classes, this mechanism focuses on the distribution of information in all practical forms. This includes by word of mouth, text, and other communication mediums such as the internet. Therefore, assuming the mechanism is embodied in a single organization, the facilitating organization will have a media/ advertising division that will complement the classroom activities. In addition, understanding the reality that poverty is a multi-factor phenomenon, the organization will also maintain a network with other specialized organizations (for example in employment fields) in order to build the social capital of its students, participants, etc., and provide incentives for further participation.

Feasibility and Funding

One advantage of this mechanism is that it has the potential to be high yield, while at the same time incurring a low cost. Communication of information is an intrinsic human capability and therefore, does not require a large amount of resources. Moreover, the process can be repeated over and over again by word of mouth of the participants, making the indirect effect of the education potentially huge. The passing on of knowledge is a financially feasible and effective measure to take against poverty.

The specific cost of such an operation can be grasped by looking at the annual expenditures of organizations that deal with sex education. One example of this is the Institute for Mother and Child (MAMTA), which is a national level NGO in India. There are many similarities between the proposed mechanism and MAMTA; MAMTA deals with gender issues and youth sex education, in addition to its activities in informatics and networking, in order to integrate health with development in underserved areas of India. In its latest biennial report for the 2007-2009 period it records a total expenditure amounting to approximately \$3 million a year. Considering that MAMTA

working at the national level and in additional areas not covered by the mechanism described in this paper, costs for implementing a sex education program in a single community would be far less costly.

Now that the basic rationale for a sex education mechanism has been laid out, this essay will continue on to two case studies of India and China, which describe how the mechanism fits in the context of highly populated developing countries. There are problems found in this research that how to overcome human security and poverty in China and India through sex education for smart population.

Based on the International Planned Parenthood Federation is advocating for sexual and reproductive health as well as sexual rights. This organization and the participant of alliances showed 149.3 million sexual and reproductive health services, as well as abortions and provisions of condoms and other choices contraceptive. (Fischer 2016)

RESULT AND DISCUSSION

The Case of India

The growth rate of world population is high and it is one major reason for extreme poverty in most of the highly populated countries. In fact continuous efforts have been made to manage this growth rate at the regional, national and international level.

In the case of India too, Government and many civil organizations of national and international level are working towards reduction of population growth through various planning schemes and projects. In spite of all these, people still continue to bear many children and the global population is growing at a tremendous rate, with India being the second largest contributor to world's population with only China ahead of it. Moreover, India is expected to overtake China as the most populous country in the world by 2030.

According to the 2011 Global Hunger Index (GHI) Report, India is the 15th, amongst leading countries with hunger situation. And according to a recently released World Bank report, an estimated 53 million people will still live in extreme poverty in India by 2015 and 23.6% of the population will still live under US\$1.25 per day.

When we talk about reduction of extreme poverty or population control-related ultra-poor interventions, India's case needs a thorough analysis as its contribution to world's population in terms of people below poverty line is considerably high and in fact poverty rates in some states like Orissa and Bihar are among the world's most extreme. (Mehta Aasha Kapur. 2011)

If we study the concentration of the poorest of the poor in the Indian states, almost half of India's poor and one third of India's population are concentrated in the three states of Uttar Pradesh (including Uttaranchal), Bihar (including Jharkhand) and Madhya Pradesh (including Chhatisgarh). The exact estimates are 48% of India's poor and 35.6% of India's population are in these states.

Why are we interested in case studies from India and China?

This is because India and China make the largest contribution to world's population and their share towards world population in extreme poverty is also relatively very high.

First we focus on a case study of Bihar taken up by Pathfinder International, a global leader in reproductive health education that works for the poorer section of society. The project called PRACHAR is based on health education specially targeted to some select groups of people for better reproductive health and child birth spacing for better future. In a way, it is meant to change reproductive health behaviors in youth, especially in the state of Bihar in India. More importance is given to women and girls as they are more vulnerable to socio-economic inequality.

As a part of PRACHAR which was taken up in the year 2001, Pathfinder International provides health education to the following sections of society in Bihar state:

- Young Couples
- Newly Weds
- Young Adolescent Girls
- Adolescent Girls and Boys
- Traditional Birth Attendants
- Voluntary Contraceptive counselors

When the results were evaluated, the NGO finds that young people and their families are ready for and want change, if only they have the knowledge and means to attain it. (Agency 2005)

The Case of China

China is the most populous country in the world. It is not surprise that china's huge population, tumultuous demographic history, and in for the future will attract the world's attention. China's population of 1.3 billion in the early 2000s, in 2011 increased by 1, 341,355,000, is projected to grow by another 100 million by 2050.

China is the huge country but the surprising thing will attract the world is in rural areas because the economic expansion and reforms have also brought inequality among Chinese citizens. Inequality is visible throughout China, and some groups are particularly vulnerable. Mostly the people who are suffering from these are people in rural areas. (E. 2004)

Regional, occupational, gender, ethnic, educational and other differences are all tied to socioeconomic inequalities. In China, There were always significant differences between urban

and rural citizens, between people working in state and collective enterprises, between cadres and workers, and between citizens with different political characteristics. Gender and ethnicity also continued to be dividing lines within the social fabric and work environment.

In Western and southwestern areas are much poorer than are eastern provinces, for example. These regional differences reflect, in part, greater state investment in some areas. Chinese state has focused on developing industry, infrastructure, communications, schools, and other institutions to strengthen the country as a whole. But most of these investments were made in urban and eastern parts of China.

They hope that the benefits from these investments would “trickle down” to other areas, but Western and southwestern provinces remain relatively poor, and parts of these provinces are among the poorest areas in China. In rural areas, there are clear differences between poor and rich peasants, with the latter in control of land and surplus labor. These rural class differences and the labor surplus itself have also spurred rural-to-urban migration.

In Western and southwestern areas, Health care is grossly inadequate, and disease and mortality rates are relatively high. Children, especially girls, are often not sent to school or are taken out at young ages so that they can help on family farms. The education provided for those who do attend school is often of poor quality.

This is one example of Non-governmental organization, they applied their program to reduce extreme poverty in China. China Family Planning Association (CFPA) is the largest non-governmental network in China active in reproductive health, family planning and HIV/AIDS prevention and care. CFPA was founded in 1980 and became a full member of International Planned Parenthood Federation (IPPF) in 1983. CFPA’s mission is to act as a channel for external resources and expertise while taking a role in public mobilization and education for population

and health programs. They have 94 million members and volunteers.

CFPA has core missions, advocating social resources to promote comprehensive sexual and reproductive health care campaigns (5 Cares Program) that must be universally accessible, regardless of income or geography. Concentrates on serving those who are not reached by the government or the expanding private sector: such as the poorer, younger, rural and migrant populations.

They also have strategic focus areas, Adolescents and Young People which is all adolescents and young people are aware of their sexual and reproductive rights are empowered to make informed choices and decisions regarding. HIV/AIDS prevention and compassionate care, including community-based institutional capacity-building and household integrity, Access: for the poor, marginalized, the socially-excluded and under-served are able to exercise their rights, to make free and informed choices about their sexual and reproductive health, and have access to sexual and reproductive health information, sexuality education and high quality services including family planning. Advocacy which is Strong public, political and financial commitment to and support for sexual and reproductive health and rights at the national and international level. Abortion: A universal recognition of a woman's right to choose and have access to safe abortion, and a reduction in the incidence of unsafe abortion. By applying this CFPAs mechanism can be minimize and reduce the extreme poverty in China.

In China, International Planned Parenthood shows their action particularly in the region that working hand in hand to press the baby born, they also affiliate organization literally work in tandem with the government's coercive one or two child. This action has purpose to implement government population control policies. This organization assume that the importance of international cooperation for maintaining control over population levels. (John 2016)

CONCLUSION

This research has attempted to illustrate the importance of sex education as a fundamental human need and as a basic mechanism to combat poverty, improve lives, and improve society. Developing countries are places that have a high level inequality and therefore large gaps in access to education in general. This is not an excuse to not supply the people with reliable sex education which is arguably the most practical and important education for them to receive, one that will affect their lives in deep ways. Practiced on a mass level it will, likewise, affect society itself in deep ways. Sex education is the difference between being pregnant and not, between being HIV positive and not, therefore its recognition as a mechanism worthy of investment is essential to developing nations.

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