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# Let's Talk About Sex, and What Happens When We Don't: How Limited Sex Education in Nepal's Government Schools Affects Women in Arranged Marriages

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*SIT Study Abroad*

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Let's Talk About Sex, and What Happens When We Don't:  
How Limited Sex Education in Nepal's Government Schools Affects Women in  
Arranged Marriages

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## Abstract

In Nepal's government secondary schools, the reproductive health curriculum is often covered in a single week, and many teachers neglect to administer the lessons thoroughly due to beliefs that sex is a private matter, inappropriate or unnecessary for students. The government curriculum not only lacks detail about reproduction and intercourse, but, in the information it does include, defines male and female puberty processes, reproductive systems, sexual health, roles in family planning, and intercourse in ways that further the gender inequality so deep-rooted in Nepali culture. Following secondary school, many women in Nepal are married in arranged matches, to men they have met only briefly, and are soon after expected to bear children. Lack of dialogue and education about reproduction and the subsequent expectation that women engage in sexual relations with unfamiliar men leads many women to fear intercourse and their husbands by association, and lack agency of their own bodies and, by extension, their position as women in society. This study collects the stories of rural and urban women in or approaching arranged marriages, reveals the reality of their knowledge about reproduction, and discusses their resulting levels of confidence. Additionally, this paper critically analyzes the government curriculum, gathers rural and urban teachers' views of the content, and examines their teaching of such lessons. By understanding the experiences and feelings of women and investigating the state of the reproductive health education, this paper provides a critique of Nepali government education and proposes methods to educate women for sexual confidence and female empowerment.

ISP topic words: reproductive health education, government schools, young women

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## Introduction

Over half of Nepali women are mothers by the age of twenty (Igras et. al 2014). Many of these mothers, and many other mothers in Nepal, are newly married to men they hardly know, in arranged marriages decided by their families; upon wedding, new wives are expected to have sex with their husbands and bear children (Cameron 2014). Most of these women are largely unaware of the realities of sex: how it biologically works and how to engage in intercourse safely and healthily (Pokharel, Andrzej, and Sujeeta 2006; Tuladhar and Marahatta 2008; Mathur, Greene, and Malhotra 2003). The Government of Nepal's Ministry of Education has introduced a mandatory reproductive health curriculum for secondary school students, but studies show that the content lacks crucial information, and that teachers tend not to teach the lessons in depth, for personal and professional reasons (Pokharel, Andrzej, and Sujeeta 2006). Many studies of young Nepali women reveal their great lack of knowledge about sexual activity and health, and their inability to seek further information or discuss the subject with family or friends (Pokharel, Andrzej, and Sujeeta 2006; Tuladhar and Marahatta 2008; Mathur, Greene, and Malhotra 2003). If young women approaching marriage are not fully informed about sex and sexual safety, it seems likely that many could not only be engaging in unsafe intercourse, but also be emotionally ill at ease and uncomfortable before, during, and after having sex.

This project gathers the narratives of young women in or approaching arranged marriages, determines the breadth of their knowledge about reproduction and intercourse, and examines if and how they believe reproductive health

education should be enhanced. Additionally, it collects secondary school teachers' opinions of the reproductive health curriculum, studies their methods of teaching the lessons, and analyzes the content of the curriculum itself. Research took place in one urban and one rural region of Nepal in order to determine variations of knowledge base and views about reproduction in societies at different levels of development and social progression. Through interviews with young women and teachers and classroom observation, this project answers the following questions: what effects does the current government-instituted reproductive health curriculum have on the knowledge base, emotional status, and confidence of young women in arranged marriages? How can reproductive health education be improved or supplemented in order to further educate, and therefore empower, young women of Nepal?

### Literature Review

Information regarding Nepal's mandatory sex and reproductive health (SRH) curriculum differs among sources. According to Pokharel et. al, in 1998, the Nepal Government Ministry of Education and Sports introduced a chapter about SRH into the grade 8 curriculum, but many government teachers are hesitant to teach these lessons in detail because of personal opposition, lack of community support, or belief that students should learn about SRH on their own (Pokharel, Andrzej, and Sujeeta 2006). Regmi found that many urban Nepali people believed that sex is innate, and therefore does not need to be studied or discussed (Regmi et. al 2011). Some students resisted the curriculum due to a

societal taboo surrounding conversation about sex; others, however, were dissatisfied with their education on the subject. Pokharel et. al concluded that SRH curriculum and teaching does not succeed in making students sufficiently sex-educated (Pokharel, Andrzej, and Sujeta 2006). In 2008, the United Nations Population Fund claims to have worked with Nepali students to restructure the mandatory SRH curriculum, but in reviewing the curriculum no mention is made of the impact of the course content (United Nations 2012). Similarly, in its 2010 study of educational progress, Government of Nepal Ministry of Education mentions an SRH curriculum program implemented from 2008 to 2010, but no evaluation of this program is included (Ministry of Education 2010). The facts surrounding the creation, distribution, and effect of a mandatory SRH curriculum are muddled and conflict in the literature. What exists now is a course entitled Environment, Health, and Population (EPH), a mandatory class for grades 8, 9, and 10 students, which briefly addresses sexual and reproductive health, but no research has examined the content of the course or its effects on boys and girls.

The International Center for Research on Women's (ICRW) study revealed that social conventions in Nepal prevent girls from asking questions about sex and seeking reproductive health services; many Nepali people agree that sex should not be discussed, but should remain a private matter (Mathur, Greene, and Malhotra 2003). Regmi found that women are reluctant to discuss sex for fear of appearing immoral to their community (Regmi et. al 2011). As a result, many Nepali women of reproductive age are unaware of many contraceptive methods and safe sexual practices (Tuladhar and Marahatta 2008). These studies,



however, have not evaluated women's knowledge of the process of intercourse itself, their attitude toward sex, nor the link between these cultural norms and the government education system.

Insufficient sex education exists in other countries as well. In some regions, it was found that lacking such education brings about uncomfortable and sometimes painful emotions. Wahba and Roudi-Fahimi (2012) found that sex education in Egypt is limited because many Egyptians believe it is not important to learn until marriage; therefore, teachers avoid the subject of puberty and many girls are shocked upon menarche and become afraid. The UK Department of Education and Employment found that even though the UK National Curriculum offers extensive sex education lessons, many students are still uncomfortable discussing such topics, lack knowledge about sex, are at risk for unsafe intercourse, and lack self-esteem when discussing or engaging in sexual acts (UK Department of Education and Employment 2000). Family Planning Victoria (Australia) concluded that a child cannot be considered fully sex-educated without discussion of sexual feelings, pleasure, gender roles, and intimacy (Family Planning Victoria 2014). Thus it is clear that even if sex education is comprehensive, many misconceptions and emotions surround the issue, and discussion of ideas beyond just scientific facts must occur to build students' confidence and comfort surrounding the issue. For Nepali students to reach this level of education may be more difficult than in other countries, as it may require the breakdown of the social conventions that make sex a taboo topic.

## Methods

Research took place throughout November 2014 in Kathmandu and Dhital, Khaski District in one government secondary school in each location, and with female inhabitants of both regions. Selection of the locations was based on the mixed caste and ethnicity make-up of the regions and the presence of government secondary school institutions. Information was gathered through observation and interviews.

At Durbar High School in Kathmandu and Bhoomeshwor High School in Dhital, the aim was to observe health classes and general school atmosphere, and interview health and science teachers and school principals. Classroom observation was conducted without participation, in order to ensure that my presence did not influence typical classroom goings-on, though it is impossible to know if my company changed the attitude or behavior of students or teachers. The same is true for my presence in teacher common rooms, school hallways, or with students during free time. By spending several days at each institution inside and outside the classroom so that the teachers and students became more accustomed to my presence, I believe that any changes in their behavior decreased over time.

Interview questions were prepared in English and Nepali. Interviews began with simple getting-to-know-you questions in order to set up a comfortable tone before I explained the subject of my research. To teachers, I explained that I aimed to understand how they taught and viewed the content of SRH curriculum. (Unfortunately, the Durbar High School science teacher was unavailable for interview, as he was on extended leave due to a death in the family.) To young

women I explained that I wanted to learn how they felt about their knowledge of reproduction while entering marriage or having been recently married. Informed consent was then obtained (in one case verbally), and, with permission, interviews were recorded. Early interviews were structured, guided by a list of previously formulated questions, but as I conducted more interviews and became comfortable with the topic and the questions, dialogue became more conversational. One interview was conducted in Nepali with the help of a translator. The recording was later transcribed with the help of a different translator.

Recruitment of young women was not as difficult as expected. The Padma Kanya Women's College office manager helped me set up a meeting time with a class of female students. Four students were willing to discuss their experience, feelings, and opinions with me, as well as with their classmates in a focus group. In Dhital, young women interviewees were recruited without a predetermined system; one was a chance meeting as I walked through town; one was the daughter of another subject; one woman worked at the lodge where I stayed.

Research methodology was slightly altered from the proposed methods. It became apparent after conducting one-on-one interviews with teachers at Durbar and Bhoomeshwor High Schools, and young women in Dhital, that focus groups would not be a productive research technique. Opinions of the individuals were varied, and a focus group may either have been an uncomfortable discussion, or have prompted false swayings of opinion in the presence of possibly louder-expressed thoughts.

One obstacle I encountered is the possibility that because subjects were conscious that a person with a Western background might disapprove of the lack of sex education and treatment of women in marriage, some participants told me what they believed I would agree with, instead of sharing their honest thoughts. Additionally, during some interviews, subjects asked personal questions about my sexual experiences, which I declined to answer. I do not believe my declining such questions changed the tone of the interviews, as such subjects remained open and friendly after I declined to answer. In one interview, a young teacher asked me to explain the process of intercourse to her. I was unsure whether doing so would cross the boundaries of my position as a researcher, but ultimately I fulfilled her request. I felt that I was ethically bound to provide an answer in an effort to perform reciprocal research. Furthermore, experiencing and having a hand in a young woman's learning about reproduction was a very informative experience for the project.

The following findings are presented in three sections – *Dhital, A closer look at the EPH curriculum*, and *Kathmandu* – the order of which was chosen to create for the reader a process of discovery: first, to hear the stories of rural young women; then, to understand the school setting in which they learned; third, to examine the curriculum from which they studied; fourth, to look into an urban school setting; and finally, to meet and hear from young women in an urban environment. Such a layout is intended to provide for the reader a navigation of the many facets of this broader social situation, and a gradual understanding of the

themes and commonalities present, their sources, and possible solutions to the issues.

## Findings

### *Dhital*

Parbiti is home sick. Her stomach hurts, and her back too. She sits on her porch, her back sunk into a heavy bag of rice and her bare feet dangling off the red clay ledge, wiggling lazily when flies land on her calves and ankles. She pats the rice bag next to her, motioning for me to sit. At eye-level, Parbiti looks at me from under thin eyebrows, her dark eyes focused as if trying to read something on my face. She rests her wrist on my shoulder and again tells me she is sick.

“Sick with what?” I ask, and she holds her hand over her lower abdomen, a small smile on her lipsticked mouth. “Your stomach?” I say. She giggles and says *mens*. She is menstruating.

Parbiti is nineteen years old and in her second of three years of study for her Bachelor’s Degree in Humanities. She attends Prithvi Narayan College in Pokhara, a large city about an hour south of her rural, 4,000-person hometown, Dhital, a Village Development Committee (VDC) in the Kaski District. Every time she menstruates, Parbiti comes home from school – “every month, five days I am sick,” she says, and her lips turn down at the corners. She says that all the women in her school do this – leave school for three, four, five days while they are menstruating. I ask her if she misses a lot of class time. She scrunches her

eyebrows and again explains that she is sick, hand against her lower stomach.

“Bad, not good,” she says. “Because I have a lot of pain.”

After she gets her degree, Parbiti is not interested in getting married. “You are married, no free,” she says. “Children,” she adds with a grimace. “Children is *way* bigger problems.” She will have to provide for their health and education, and won’t be able to hold her own job, which she hopes, in the interim between finishing her degree and getting married, will be as a bank receptionist. Her husband will “of course” be from Dhital, but when I ask if she will know him before they are married, she cries, “no!” and laughingly swats at my arm.

“I do not know about sex,” Parbiti says when I broach the subject. “Sex is not interesting subject.” She does not want to learn about it, or experience it at all. “Sex is pregnant is problems. Nine months problems.” She shakes her head and purses her lips. I ask again – does she know want to learn more about sex before she is married and expected to have children? Parbiti frowns and shakes her head. “Sex, I hate it,” she says and lists some of the problems associated – women’s health issues, boys kidnapping small girls for sex, boys without education who think it is very interesting. “Me, I am not interested in sex,” she says with a dismissive wave of her hand. Then, she doesn’t want to talk about it anymore, but she has one last question for me: “You are not married but you are interested in sex?” She giggles.

Sita is having a hectic day. On Tuesday, fifty students from Bhoomeshwor High School, one of Dhital’s government secondary schools, are leaving for a five-day

field trip to Kathmandu and Chitwan National Park. The schoolyard is a buzz with galloping, gossiping, giggling students; a group of male teachers sits in a circle in the grassy patch in front of the building, bent over forms and logistics.

Sita stands at the edge of the grass, her hands clasped behind her back, her green kurta pants billowing in the morning wind under a black felt coat, watching the frolicking children. She is nineteen years old, and has lived in Dhital all her life. For a year, she has been teaching primary level English, math, and Nepali at Bhoomeshwor. When I wave, she approaches slowly, nods politely, and we sit in an empty classroom, her hands tucked tightly under her thighs. Her hair is long and frizzy, pulled back from big, reflective eyes that stick on mine the whole time we talk. She takes several seconds to think before she speaks, her voice soft and high, tracking my words with “yeah, yeah”s and small nods.

Sita likes being a teacher. “Teacher is like a light,” she says. “Each gives good knowledge for the student, and it’s like a candle. They burn [and] give good knowledge for others. Therefore, I like teaching.” But she hopes not to be teaching for much longer. It is not a good job, she says. Teachers are ridiculed by uneducated families in the village, and make very little money. In March Sita will take a government exam, and if she does well she can get a job in a government office, which pays more than her current position. “For this money,” she says, “I can have family and our life [will be] better.” Only when she has landed this job will Sita be, in her words, “qualified to be married.”

Like most unmarried women in Dhital, Sita has not had sex. She does not know what happens during intercourse. She is scared. “I fear of this thing,” she

says. Sometimes, she talks about it with her friends or her sister; one of her friends studies Health, and knows about reproduction, but Sita has never asked her to explain it, even though she was curious. “I don’t think sex is important thing. Therefore, I cannot ask the question from my friends,” she says. When I ask her why she doesn’t think it is important, she smiles shyly and says, “My father and mother said don’t go for the sex before marriage. Therefore, I cannot think that it is important.”

But Sita wants to know. “I question to you, what is sex? What is it and for which people, what age of people can go for sex?” she asks me. I falter for a minute, caught off guard by the question, and then explain. The penis goes into the vagina, I say – “yeah” – and the sperm comes out – “yeah, yeah” – and finds the egg – “yeah.” She understands. She tells me she is happy to know. “I am confident when you talk me about sex. Now, I don’t have any fear.”

Sita thinks all women should learn about sex, and children in higher secondary level should too. “If [women] know about sex, then after married, their life is comfortable. They don’t fear about sex. If the children know about this thing, about sex, they think that it is not fearful thing, it is good thing.”

Puspa is making lunch for her family. Her parents are outside on the deck, her father seated in a plastic chair, her mother on hands and knees, smearing mud in the mortar between the deck’s stones. “I am not good cook,” Puspa says when she hands me a plate; her father agrees, “daal mitto chhaina,” he says – the daal does



not taste good. But I tell her it is delicious, and she smiles at me as she takes my plate to the water spigot.

Puspa is twenty, a native of Dhital, a graduate of Bhoomeshwor High School, and the daughter of Bhoomeshwor's headmaster. Today, she is home for her weekly Saturday off school. After lunch we sit in her bedroom and talk. With her soft but serious brown eyes focused on the room's walls, she licks and bites her lips before speaking and nods as she talks, making sure every word and sentence are as clear as possible.

As she is in her third of four years studying Bachelor level Public Health, Puspa knows how intercourse happens, but recognizes she is a rare case because of her chosen field of study. Because most women in Dhital are only able to attend school through grade 10, they never learn about reproduction, she tells me. But Puspa wants to change this. After getting her Masters in Public Health, marriage-willing (that is, if her husband and his family are supportive of her continuing her studies), Puspa hopes to teach higher secondary and plus-two level health in Dhital, a community she believes is rampant with health problems because people are uneducated about food, hygiene, and disease. Health is "the most important subject in developing country, in Dhital VDC, and this type of place," she says.

As it is now, the health education program does not satisfy her. "In higher school level, it's so little – just one subject of health – [and] it's not detailed information for children, so I think maybe two subject[s] of information is better." In addition to doubling the number of health courses, Puspa believes adding

reproduction to the curriculum is a necessity. “Girls around seventeen, eighteen, nineteen years old are married in Nepal, so it is so important to teach in grade 9 or 10, before they get married,” she says. “They must know about that all thing – reproduction, sex.”

Puspa’s marriage will be different than most marriages in Dhital. Because she is educated about reproduction, she will discuss it with her husband before the first time, and make sure they are on the same page before anything happens.

“When I will married, my husband and I, both we are agreeing. Without agree, we cannot do this, [have sex].” She wants this future for the women of Dhital as well. With increased education about reproduction, she believes all women would be able to speak frankly with their husbands. With more knowledge, women would become more confident and powerful, she believes – “obviously.”

The Mothers’ Group in Dhital – of which there are now nine, one for each of the VDC’s wards – began twenty years ago; its first project was building toilets (*charpi*-style, consisting of holes in the ground sheltered by outhouse structures) in the then commode-less town. Since constructing Dhital’s first *charpis*, the Mothers’ Group has developed a performance-group-slash-foundation structure, accepting donations for their village-wide singing and dancing get-togethers and distributing funds throughout the village to residents in need of health care, food, or books for their children.

Malati Adhikari is the President of the Mother’s Group. She organizes their meetings, dances in the performances, and teaches the Mothers many skills,

for practical purposes as well as to empower the women of her community – her mantra: “You can do, you can do.”

On top of being the Mother’s Group President, Malati is the village Reiki teacher, or power healer, and therefore one of the only people with whom women speak openly about their health issues. One specific sickness runs rampant in Dhital – pain after having sex. “After the marriage, all women going to [be] sick,” Malati says. “Because when they have sex and then when [sperm] goes to ovary of woman – then pain here, pain here, from the sex. Everyone, *everyone* going to be sick.” Malati attributes the condition to women’s ovaries’ inability to “accept” their husband’s sperm. She cannot explain this mysterious health issue, but she knows how grave a problem it is. Because the wife is expected to “give happiness for the man,” women remain silent about their pain, “or else [their husbands] can take a different wife.” The condition is a vicious cycle of pain and silence, she says.

Though the pain was more extreme after Malati’s first time having sex with her husband, she too experiences pain for one or two days after sex even now, decades after her wedding. “I’m still sick,” she says. “I cannot accept [sperm] now even. I feel pain in my stomach and then I have *pain* and *hurt*.” But her situation is lucky. “My husband and I, we love each other very much,” she says, and explains that in the early stages of her marriage, she spoke with him about her discomfort. She told him, “If you need sex, you can get new wife,” she says. “He said, ‘no, no, I have family, I love you.’”

Not every situation is so lucky, Malati knows. One friend of hers was married to a man twelve years her senior and on the first night of her marriage fled her home in fear. Her husband had experience with sex, but she did not know what would happen. “She ran away in the night: ‘no, I don’t want to! I want to go my parents’ house!’” Malati recounts. Her husband eventually convinced her to consent, and the woman’s fears were confirmed: “pain, pain, pain,” according to Malati. Another friend of Malati’s was unable to bear children at all, and her husband left her to take another wife. Malati has given her work and a home at her family’s farm, so she is no longer alone.

As the Reiki teacher, President of the Mother’s Group, and a woman who has experienced years of pain after sex, Malati is trying to take matters into her own hands. She talks with women throughout the village: “how is health, how is husband, how is sex.” Men, as she understands, need sex more than women, but women often do not want to engage. Malati offers simple Reiki practices for some pain relief, advises women about talking with their husbands, and sometimes offers to confront husbands herself. “I’m trying to talk with everyone, because I have something, I experience[d] that,” she says, straightening in her seat, seeming empowered by her own past. “This is my story, my real story.” But she remains befuddled as to what causes the issue – or how to solve it.

While we talk, Malati bashfully twirls thin locks of her shampoo-commercial hair around her barrette. Her voice is quiet, often bordering on a whisper, especially when she uses the words “sex” and “reproduction.” “I’m still shy about this topic,” she tells me several times, giggling and laying a motherly

hand on my arm. But more times than she declares her shyness, Malati insists on the need for more sex education. “They need to learn,” she repeats with set lips. “They must learn.”

But the “how” of increased education eludes Malati. She shakes her head remembering her own school experience. She passed grade 10 at twenty-two years old (the typical age is sixteen), because, though her mother and father told her, “no need education for the daughter – you can teach yourself, why you go to school?” she begged and begged for “Please, one more year,” and ended up with a year-on-year-off high school career. In the alternating years during which she was able to attend high school, hers a government institution, Malati says her health teacher taught the lessons about reproduction in English. “At that time we couldn’t understand English,” she says. “And then if we ask someone, ‘what is that thing, can you translation?’ they say, ‘no, this bad word.’”

With such an education, like all women of her generation and most of the current one, Malati learned how intercourse worked after she was married – “from the practically,” she says, giggling. I ask Malati how men learn how to do it – if the women do not know, the other party must, I assume. “It’s men!” she says, laughing. “They know!” Many couples, however, learn by “just trying things,” as was the case with Malati and her husband. “It’s Nepali way!” Malati says, her head tilted back in laughter.

These days, especially as more urban women (though none in the countryside, Malati confirms) experiment with sex before marriage, Malati believes it is becoming more important for women to understand the process of

intercourse. “They must learn. This is very important,” she says and adds later, “If they know, they will be more confidence.” I ask Malati a few different times how she thinks women should learn more. Each time, Malati’s gaze circles the room and her chin tilts to one side, her voice high in day-dreamy consideration. “How would they learn?” she asks herself, then answers: “This is no way, because our culture not like Western. In Nepal – they must learn, but how to do, I don’t know. Now they know from the TV, from the videos, something. They have to know – but for women, I don’t know. Do you have any idea?” I propose adding the information to the school curriculum, and Malati says she agrees, but does not seem convinced. “They must know, but in Nepal still nobody don’t say [talk about it],” she says in response to my suggestion. “They need to learn for after the marriage, but how – I don’t know, it’s still shy. Even I am still shy for the question and then how can say? How can they learn?”

Bhoomeshwor High School sits on a green hillside at the eastern edge of Dhital VDC. The school is forty years old, but the main building, white with bright blue shutters and echoey concrete classrooms, was constructed two years ago, with funds from Belgium. Two hundred and fifteen students attend the school, from nursery through grade 10, and the school employs sixteen teachers, four of whom are female.

This Thursday morning is warm, and five male teachers sit in a circle on the sunny field in front of the building, young boys leaning against their suit-clad, criss-cross-apple-sauce legs, or running circles around their huddle. The young

girls, their red-ribbon-tied braids coming loose at the ends, giggle in clusters closer to the building. At 10:40, the teachers stand, and the students collect into classrooms. I am invited to sit in on a grade 10 EPH class; the English and Health teacher, Haripsd Dhungana, leads me into his classroom.

Haripsd is a slight man in dark denim pants that hang baggy in the seat, a rugby sweater, and green Adidas soccer shoes, whose heels he drags with every step – casual dress compared to the other teachers. He has close-shaven scruff and a sharp, photographable jawline, and the nails on his left pinky and index fingers extend at least a centimeter from his fingertips, a symbol of status. During his forty-five-minute lecture, Haripsd looks at his notes no more than five times, preferring instead to pace in front of the white board, or down the classroom’s middle aisle – the right side of which is all girls, the left all boys. He accents every sentence with animated gesticulations, emphatic claps, demonstrative facial expressions, or a cliff-hanging sentence that his students complete in unison; sometimes he tosses in a bit of humor, to which the students respond with a low mumble of laughter. With the exception of a few English terms – “destruction,” “next generation,” “hydro-electricity” – I cannot understand the lesson, but I am engaged nonetheless.

After class, Haripsd explains his SRH teaching methods to me. His first step of the week-long unit is to talk the students out of their agitation and shyness by “convinc[ing] them that it is natural thing, and you have to face it”; he tells me that because of his persuasive abilities, his students “actively participate.” Then, Haripsd introduces the concepts. Within the EPH curriculum, by which he strictly

abides, one chapter discusses population control; one section of this chapter addresses methods of family planning, the main focus of the SRH information. Haripsd offers some examples: “out or withdrawal method, calendar method, condom – which is especially for male – femidom for female.” Haripsd also discusses menstruation with his students, which he believes is important for all students to learn about, so that everyone understands the “difficulty [women] may face” during menstruation. “If their mother or sister is facing such type of problem [i.e. menstruation], [students know] you have to take rest, you have to take nutritious food, you have to be careful about your sanitation.” Both boys and girls need to learn about menstruation, so that everyone understands what is happening when a woman stops cooking (which all women in Dhital do during menstruation), Haripsd says.

Intercourse is not addressed in Bhoomeshwor’s Health class, because, as Haripsd explains, “It is not prescribed in curriculum. So it is not necessary to teach them.” When his students ask how a baby is formed, Haripsd replies: “in the context of Nepal, after marriage, when the husband and wife start to sleep in a common bed, they involve in the intercourse. At that time, the sperm of the male and the ova of the female get chance to meet together, and that is known as fertilization. I teach in this way.” No more information is necessary, he says. He fears that, should the process be explained, students would want to experiment, and this would lead to many problems and accidents. “If we tell about apple, for example,” he says, “the children want to taste the apple. They start to produce saliva in their mouth. And if we go and tell about sex inside the classroom, some



boys and girls may...may involve in sexual intercourse before marriage.” With raised eyebrows, Haripsd informs me that in lower castes families, whose fathers use “vulgar words,” children do indeed have sex before marriage. Therefore, he concludes, “no need to tell about the intercourse.”

At the same time, Haripsd recognizes the domination of women by men in Nepali society, particularly when it comes to discussing or having sex. He offers an example of the unequal situation: if boys are overheard talking about sex, nobody thinks twice, but if girls are heard similarly, society “raises their eyes.” Haripsd himself is no exception to this rule. He tells me, “I also – if two boys are talking about sex – I listen and I forget what they are talking. But if two girls are talking about it, I tell them, ‘hey it is not okay, you mustn’t talk about it, what are you talking?’” Society simply is this way, he says. In sexual relationships as well, women are dominated. “If the woman has got so many pains, if she is not mentally ready or physically ready for intercourse, the male directly forces her,” he says. “And the female must quietly accept.” Intercourse is a mystery to women, Haripsd concedes, but he says it is not difficult for them to figure it out; they may not know “what their husband is going to do during the bedtime,” but when they first encounter it, “they can easily adjust.”

Because of the ease of this adjustment, Haripsd remains staunchly opposed to adding details of intercourse to the curriculum. All women need to know is: “[A]fter marriage, I must be involved in intercourse with my husband.” Perhaps the curriculum could include a bit about healthy discussion, he adds at the end of our talk. In many marriages, girls are too shy to broach the subject of sex

with their husbands for fear of being accused of having previous sexual relations. This is why the male has to force her, Haripsd explains. School textbooks should include information about marital discussions and teach students that “they should not be forceful.” The rest of the curriculum need not include more information because when couples first engage in intercourse, “they can easily understand it.”

Bhoomeshwor’s science teacher, Prem Dhungana, offers the same explanation for excluding the process of reproduction from his unit about reproduction – “course limitation,” he says. In grade 8, 9, and 10’s fewer-than-six-day units on reproduction, Prem teaches “about fusion of gametes in science, fusion of sperm and ovum...but not all the physical level activities or psychological activities about that.” He believes that kids can learn about it on their own, through porn sites on their mobile phones – a source Haripsd also says is common among students.

Prem hardly makes eye contact as we talk. His sentences are interspersed with “uh” and “um,” and he clicks the cap of a pen consistently throughout our conversation. The twenty-six-year-old has taught science at Bhoomeshwor for two years, but would rather be studying physics in America. Throughout our conversation, his opinions fluctuate. First, he says the details of intercourse are not necessary for students to learn. Later, he says it might be good if women learned, “because, um, for example at the time of first sex for, um, ladies, uh, they have problems so if they know about that, um, they can manage, they can manage, so no accidental things happens.” A few minutes later, he says, “Process of intercourse, intercourse is natural thing, that is not necessary [in the curriculum] I

think.” He believes it is important to learn about sexual safety, and that students can get this information from television and radio. It might be beneficial, he says, for teachers to receive more training about teaching matters of SRH, so classroom discomfort can be avoided. Then, Prem declares that people should know all details about intercourse before they are married. High school and college courses should be modified and television and radio programs offered to teach this information. “I am positive about that,” he decides, with a firm click of his pen.

Bhoomeshwor’s thirteen-year-serving headmaster, Puspa’s father, Jhala Bahadur Chetri, reaches the same conclusion as Prem, but much more quickly. He brings up the issue of early marriage – seven-year-old girls wed to twenty-five-year-old men –and the problem of gender domination with saddened eyes, crossing his loafer-and-Nike-socked foot gently over his opposite knee. “In our culture, Nepalese girls are dominated. Women are dominated by their husbands.” But with more education, this norm can begin to change, Chetri believes. “Curriculum must be changed,” he says; it is one of the few sentences he does not struggle to find the English words for. “Sexual intercourse should be easy for them,” he adds. “When you start the curriculum with sexual intercourse at high school level, after they married, that is easy for them.”

Khimlal Tripathi, who has taught grades 6, 7, and 8 health courses at Bhoomeshwor for twenty years, agrees with the headmaster – the curriculum must be changed. He also suggests that the community offer educational programs about SRH. “One place gathering, and there about sex, give something,” he says. Such programs are needed, Khimlal believes, because sex before marriage is

“very dangerous for life.” Especially in rural areas, he says, people do not understand sex and are “mentally not ready.” Their misguided actions, he says, may produce a child, which will cease the mother’s education. These kinds of “accidents” also may get a woman disowned by her family. Furthermore, Khimlal adds, the children of parents without SRH knowledge do not receive good education or health care. After marriage, sex may be “successful,” he believes, but can be made more so if Nepali culture becomes more open to talking about intercourse. “Should discuss for life,” he says, nodding. “For long live. [People] must discuss. To live together, you must talk about sex.” Increased discussion and education will allow parents to pass on their good knowledge to their children, Khimlal believes, urging again that discussion will reduce accidents and dangers.

#### *A closer look at the EPH curriculum*

Reading the EPH curriculum books is crucial in understanding the depth of, and holes in, SRH education. Each EPH course book (just PE for grade 8) is around one hundred and fifty pages, divided into Units with group activities or check-in questions in the middle and at the end of unit chapters. Grade 8 Population and Environment curriculum addresses reproduction only in terms of family planning, which is defined as the need to minimize the bearing of children in order to reduce population growth. Unit 3, “Causes of Population Change and Environmental Degradation,” reads: “It is due to our religious and cultural customs that people tend to bear more babies” (Government of Nepal 2005: 48).

Three such customs are mentioned: first, that girls have early marriages “because of social customs and conventions,” which result in more children; second, that some families continue to have children until they have a son – because “it is customary”; and third, that some people do not believe in family planning (Government of Nepal 2005: 48). All of these cultural practices result in population growth, which is always harmful, the book makes clear. Later, Unit 5’s short list of health factors necessary for a high quality of life includes having a small family. In the grade 8 EPH book, reproduction is discussed only in relation to population control (Government of Nepal 2005).

Grade 9’s EPH textbook also emphasizes the dangers of population growth, and in the first chapter introduces this “great problem” as the major reason to learn about reproduction (Government of Nepal 2008: 5). Unit 2, “Family Life Education,” includes brief sentences about birth spacing, advising that a four- or five-year difference will ensure health for both the mother and the child. The “right time” for marriage, Unit 2 explains, is twenty years for girls and twenty-five years for boys (Government of Nepal 2008: 29). Following this is a page-long section (lengthy compared to the rest of the book’s short paragraphs) on “Women participation in planning of family,” which explains that women should be involved in society beyond just tending to the children and the house; to become “active and efficient members of society,” women can take responsibility for family planning, and thereby spur “changes in our society” (Government of Nepal 2008: 33). Male roles in family planning are not mentioned (Government of Nepal 2008).

Grade 9's textbook is the only one that explicitly addresses reproduction, in Unit 7, "Adolescence, Sexual and Reproductive Health Education" (Government of Nepal 2008: 116). The chapter begins by outlining the "problems" associated with the physical, mental, emotional, and social changes that occur during adolescence, including the "social problem" of premarital sex (Government of Nepal 2008: 119). Sexual abuse, the book warns, may occur because "adolescents have sexual desires"; examples include "sexual harassment, rape and even in telephone bluff" – activities that are "very dangerous for their career," the section concludes (Government of Nepal 2008: 119). The textbook then offers advice for "Management of adolescents' problem," saying that, "adolescents should be advised to delay the sexual relationship as far as possible," as it presents great health risks (Government of Nepal 2008: 121).

The second section of Unit 7 first provides rationale for the inclusion of sex education in the curriculum; the book reads, "Sex education is not the sexology. In fact, sex education deals with different queries of sex related issues which ultimately helps [young people] to maintain abstinence" (Government of Nepal 2008: 122) . Following, this, RTIs, STD, HIV and AIDS are explained thusly: "If a woman's reproductive tract is infected, there is a greater chance to transmit HIV, syphilis, and other STDs" (Government of Nepal 2008: 125); men are not mentioned as carriers of sex-related diseases. Two pages teach the male and female reproductive systems, with labeled diagrams and bullet points explaining the testes, vas deferens, seminal vesicles, penis, vagina, uterus, fallopian tubes, and ovaries. The functions of these organs are stated, but no information is

given as to their purpose – why they do what they do. The descriptions are brief and undetailed: sperm are intended “to be inserted in the female vagina during sexual intercourse”; the vagina is described as “a receptacle for the male penis and sperm” (Government of Nepal 2008: 128). On the next page, conception is discussed in five sentences, the most detailed of which reads, “During sexual intercourse the male sperms reach the fallopian tubes through the uterus” (Government of Nepal 2008: 131). Following the four pages that address the reproductive systems and conception are eleven pages under the heading “Safe Motherhood” (Government of Nepal 2008: 133).

Like the grade 8 curriculum, the grade 10 textbook repeatedly emphasizes the importance of limiting family size to ensure a high quality of life. Appropriate marriage and pregnancy age and birth spacing are addressed in ways similar to the other grades’ curricula. Familial health is declared important, and must begin by educating women specifically, because “[i]f a female is educated she can give the right direction to her family” (Government of Nepal 2008: 135). Unit 6, “Disease, Nutrition, Tobacco, Alcohol and Drugs” touches on sexually transmitted diseases. Unsafe sex is defined first and foremost as “sexual contact before reaching proper age” (Government of Nepal 2008: 110). This idea is included in the list of measures to prevent sex-related diseases: “Any sexual activity done before the right age is unsafe” (Government of Nepal 2008: 112). Methods for transmitting sex-related diseases are repeatedly identified simply as “unsafe sexual contact” (Government of Nepal 2008: 111).

## *Kathmandu*

Durbar High School, the oldest government secondary school in the city, is situated in the bustling heart of Kathmandu. The facade, a once-majestic marble white, is now paint-chipped and dirtied with its one-hundred plus years of teaching, learning, and poor government funding.

In the mornings, students play soccer or sit in groups in the yard of dust in front of the building. About three hundred students are enrolled, but many of them do not attend every day because of their families' work, one teacher says. Around 10:00, teachers begin to trickle into the Common Room, sitting at the long brown tables to read the newspaper or chat with their coworkers. They carry no books or supplies with them; their figures are slouched and their movements effortful. A few minutes after 10:00, a small handbell is rung, and the students clamber up the concrete, blank-walled stairwell into their classrooms. Teachers mosey down the hallway to greet their students for the first class of the day.

Ms. Bidya's grade 8 health class is held in a large, concrete, warehouse-like room with a few brown tables crowded at the front, which the students sit on top of and elbow-lean over, cramming to share a look at the few textbooks in front of them. Ms. Bidya points to a page and speaks quietly to the students, whose murmur prevents me from hearing what their teacher is saying.

Because her main subjects are Health and Physical Education, Ms. Bidya has a different curriculum than the EPH course. Health, which is an optional subject for secondary level students, teaches the nine organ systems of the body,



one of which is the reproductive system. “Only the organs involved are briefly described, but not in detail,” Ms. Bidya says, adding that she teaches that the male and female cells come together to make a baby, but not how the union occurs.

Reproduction is never an easy unit for Ms. Bidya. “This is co-education,” Ms. Bidya says. “So while teaching, they feel awkward, laugh, and feel shy. They are too embarrassed to ask any questions.” Such discomfort greatly interferes with Ms. Bidya’s teaching. “Last time I gave them notes about the male reproductive system, and they were embarrassed to copy the notes, so I skipped female reproduction and told them to learn themselves and then I changed the topic,” she says.

Ms. Bidya knows the EPH does not teach SRH in detail either and lacks an explanation of intercourse, but she believes it is enough for secondary level students. “Currently, for grade 9 and 10, this is sufficient,” she says. “I think more than this isn’t required.” Before marriage, women only need to know what is written in the textbook; they get other information from television or movies, so they are “aware enough,” she thinks.

Kamala Sharma, Durbar High School’s EPH teacher, disagrees. Reproductive health should become the main subject of the health curriculum, Ms. Kamala says, because it is “important from birth to death.” With the current curriculum, Ms. Kamala guesses students might learn about sex from cinema, Internet, and “sex movies,” though she cannot be sure if they do any research on their own. But, Ms. Kamala says, “they should know.” When I ask why, she nods decisively and says, “to protect.”

Later, Ms. Kamala adds that more education might ease the early stages of marriage for women. Ms. Kamala has been married for twenty-five years; she giggles when I ask her if she knew about intercourse before she was married – she had a graduate degree in science, so she was well aware, she tells me. But for other women, who do not have sufficient sex education, marriage, especially the beginning, may be a very difficult time in life. “The first time won’t be succeeded, there are possible diseases from husband [from relations before the marriage], maybe the husband and wife are not frank to each other.” Lack of knowledge about sex makes marriage more difficult and presents unspoken tensions between husband and wife; more education “would make mutual life easier and more romantic,” Ms. Kamala says.

But while she believes the current curriculum is insufficient, to include more detailed information would be difficult. Her job is already hard enough – the topic of reproduction elicits days’ worth of giggles and teasing among her students. “We cannot manage or control students,” she says, shrugging. Adding details of intercourse to the curriculum would make classroom management that much tougher. “The process of sex I cannot explain in class.” Ms. Kamala shakes her head and slashes her hands in the air like an umpire.

The difficulty is inherent in the “cultural basis” of Nepal, Ms. Kamala says. “We are not a developed country, so we do not tell things openly.” The issue of SRH is a private one, and many teachers and students prefer to keep it that way. “We should change our mentality,” Ms. Kamala believes, so that schools can address the topic openly. Perhaps the first place to start is by training teachers to

become closer with their students, she suggests, so they “become more comfortable with the topic and the students.” Ultimately, Ms. Kamala decides, despite the difficulties, more information about intercourse should be included in the curriculum.

Durbar High School’s Principal has a slightly different opinion than the health teachers on his staff. Hemchandra Mahato, a square-chested, square-jawed man in a beige sweater-vest, sits at a large desk in a red-velvet carpeted room in his sock feet. He leans across his paper-strewn desk and chops his hands in the air as he speaks, immediately raising the issue of child marriage in his country, just as Headmaster Chetri did. Government curriculum should teach that twenty years is the minimum age acceptable for marriage, he says with conviction; students should be taught this as the “actual age for sex.”

But he worries that if the process of intercourse is taught in his school, students will want to experiment with physical relationships. “If knowledge is given to you, we are the human beings so once [when] we have a curiosity, then once a time we have to use it.” Mahato shakes his head. “We have to give with limitations.” Knowledge about reproduction should be imparted over time, and only when a student is eighteen years old should he or she have learned all the details, which Mahato describes as, “the limitations of [sex], how do we make safe sex.” Most importantly, young people should know “what are the safety hazards, what are the side effects, what are the diseases.” Other programs, family, and friends can help with this, but the curriculum should be slightly altered as well.

A 15-minute walk from Durbar High School, down a street cluttered with bookstores and brightly colored billboards reading “Study in Japan, Australia, Germany!” and “Full Scholarship for Abroad Study!” sheltered by an old brick wall, stands Padma Kanya Campus, the oldest all-women’s college in Nepal, a government institution. Inside the bright yellow building, young women, Master-level students in English, Economics, Humanities, Sciences, Sociology, or Women’s Studies, walk in twos and threes from class to class, books in hand, laughing loudly or conferring softly. Above the main staircase hangs a green sign with white block letters: “Our Motto: Quality Education For Women Empowerment.”

In early November, the English students are preparing for exams, two weeks away. Fiction class is thick with concentration, the women bent over their stacks of books, nodding as their teacher lectures from the front of the classroom. Several of them are married; a few have children at home. None with whom I spoke knew how sex worked before they were married; none felt that sex was a topic they could comfortably discuss with anyone; all voiced that the government health curriculum should be added to.

“I was nervous,” says Ruba Bidari, a twenty-four-year-old student with a small voice coming from trembling lips, and hands that shake as she holds them against her neck. “I was totally unknown about this matter.” For the first few months of her marriage, to a man she met twice before the wedding for a half hour each time, Ruba continued to feel uncomfortable sleeping with her husband.

But she had no idea if her husband was nervous too. “How can we say about his feeling?” she says, giggling. Then she looks down, shy. “I don’t know.”

Overall, Ruba’s marriage was a situation of mixed feelings. “On one side, I was happy; on another side, I was unhappy.” The “new situation” she faced was scary – leaving home, quitting her job, moving in with a man she had known for one month, having sex. “On the other side, I was getting a life partner,” Ruba says. “So it was a twisting situation I faced.” I ask if these conflicting emotions affected her relationship with her husband. Ruba looks at me with shy eyes and says, “We have to face each and everything in our life, and we should learn something. This is process of our life.”

Ruba’s classmate Daya<sup>1</sup> had similar feelings. “Totally I did not know what about sex. So that I felt so nervous,” she says. Before her marriage, she understood sex simply as “satisfying an agreement between two partners.” After her first time having intercourse with her husband, Daya was overwhelmed. “I feel so distracted from my parents and I have lost all my properties, I have lost my virginity with him, I feel *so* sad at that situation,” she says. But she convinced herself that it was a good and necessary thing to do, especially because her family was pressuring her to bear children. “I have this whole life with him that I have to worry about [sex],” she says. “He is my life right now. I remembered [this], then I became satisfied with him.” Now, she and her husband share “physical and spiritual love,” and are equals in their marriage. In six months, Daya will give birth to their first child, she tells me with a smile.

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<sup>1</sup> Name has been changed

Now, three years later, Ruba is happy with her husband, who watches their two-year-old daughter while Ruba is at school, but she still feels shy during sex. It was a topic she never talked about – “still also I hesitate,” she says – and one she never explored outside the classroom, though she was unsatisfied with the lack of knowledge her high school education offered. “Don’t know,” she says, giggling, when I ask why she did not try to learn on her own. “Nepalese context is like this.”

Prity Shah, though much more talkative and outgoing than Ruba, also did not attempt to supplement her high school education about reproduction with outside sources. “We would mainly discuss only regarding diseases,” she says of her high school EPH course. “And of course we don’t openly discuss about how intercourse occurs. In context of Nepal it is not so open, so only our teacher used to teach how to prevent and how we should maintain reproductive health if you get children, but we did not talk about how to have sex.” With her narrow shoulders hunched forward and her knees bouncing under the table, Prity talks quickly, her words often coming out so fast that she interrupts her own sentences as she describes her upbringing. Growing up in the southern Terai region of Nepal (she has been married now for two years; “five minutes!” she says, giggling, when I ask how long she knew her husband before the wedding), Prity was not allowed to go before her father or older brothers while she was menstruating. When watching movies with her parents, if a “bed scene” came on, Prity says, “we feel *so* uneasy we used to leave the room.” Nodding her head sharply, Prity explains, “It’s a matter of taboos in Nepal.”

Twenty-six-year old Parbiti Mahato offers the same explanation: “it’s not in our culture.” Talking about sex makes a young woman a “bad type of girl,” and “even if you are close with your friends then you can’t discuss about sex,” she says. But Parbiti has done a little reading herself, mostly in magazines and on the Internet; she knows a little bit more about sex than she learned in high school, but still is not fully informed. The idea of her first time with her husband-to-be, whom she will marry in about a month, is a little unsettling. “It’s strange for me, because I’ve never done it before,” Parbiti says. “So it’s a little bit nervous thing.”

Across gender lines, knowledge about reproduction is widely disparate, these four women agree. “This is a patriarchal society,” Ruba says – one in which social norms, family, nation, and government all prevent women from achieving the same knowledge as men. Men learn more about reproduction “because they are educated,” Prity offers, and because they have more access to Internet and communication. “Men learn more because they are socially not restricted as women,” Parbiti declares, and Prity, Daya, and Ruba nod.

Such a lopsided system, these students believe, leaves women weakened and powerless. Prity tells a story of a friend who fainted unconscious the first time her husband approached her for sex. This lack of confidence can be attributed, the young women argue, to the inadequate EPH curriculum. “It is not sufficient,” Parbiti says; “[Students] have to learn[] what is sex, what is reproductive system, all must be taught in their younger years,” Daya adds; “They should teach more,” Ruba nods; Prity agrees, saying, “Because it is a part of our life, we cannot be away from it. It will make life easier for women also for men. It will help. We

will be less nervous and it will not be like, ‘how will be life after marriage?’ We will not be scared and we will continue with our education also.”

Increasing education means boosting confidence and empowering women in their marriages and in general society, Prity, Parbiti, Ruba, and Daya agree. Learning about sex will “of course” make women stronger and more powerful, Ruba says. Education is “a necessity to empower women to face the men in patriarchal society,” Prity argues. “Because through only education they can be enlightened and empowered.” But Parbiti believes education is not enough – the issue is so deeply rooted in societal norms that Nepal needs “a change in culture too,” loosening the boundaries about sex discussion, so that people can address it openly.

“It will take a long time,” Ruba says. “Because the nature of Nepali people is so traditional. They don’t want to go opposite of culture.” The other women nod. “Little bit changes has been happening through education, but it will take long time,” she adds. “Long time,” Prity echoes.

### Analysis

Research in rural and urban areas delivered similar overarching results. Themes such as sex negativity, widespread gender imbalance, and the accounting for such conditions simply as parts of Nepali culture, are prevalent in both regions. Some smaller differences, however, become apparent when comparing Dhital and Kathmandu. For example, in the rural area, Parbiti and her fellow female students miss school when they menstruate; the women I interviewed in



Kathmandu do not. This may reveal that inhabitants of rural regions place lower value on education or higher value on traditional practices involving menstruation compared to more progressive attitudes of urban dwellers. However, we cannot assume that no females in Kathmandu miss school for their periods, or that all women in villages do.

Gender roles of teachers also varied between the urban and rural locations. At Bhoomeshwor High School, the schoolyard, lunch room, and planning of the field trip were dominated by men – the few female teachers lingered on the outside of the grassy field and did not speak during the lunch I ate with the staff. At Durbar in Kathmandu, male and female teachers occupied the Common Room with equal amounts of chatter from both genders, often with members of the opposite gender; though I did not spend lunchtime with this staff, it was apparent that Durbar High's staff mingled between genders much more fluidly. The urban staff proved more equal in gender roles than the rural staff.

Most notably exclusive to Dhital's situation involving sex was Malati's account of the widespread post-sex sickness found in women. Malati's view of the shared accounts of the village-wide affliction raises interesting questions, including the possibility that a group dynamic of psychosis is at work. It may be that the fearsome idea of sex and subsequent discomfort during intercourse leaves a mental scar on a woman that translates into physical pain – that is, the physical pain is in her head. It is also conceivable that distress during intercourse would cause a woman to physically tense her body, leaving her with cramps and strains in her genital region. It seems this affliction must stem from overwhelming sex

negative attitudes, which ultimately stem from the lack of knowledge about intercourse.

Sex negativity is apparent in dialogue with both urban and rural men and women, even in arguments for increased education. All but three subjects voiced a belief that government reproductive health curriculum needs to include more information, and almost all of these participants advocated such inclusion in order to avoid the associated “problems,” “accidents,” “safety hazards,” “limitations,” “dangers,” potential “failures,” diseases, or health risks – phrases repeated by an overwhelming majority of subjects – or because it is an inevitable part of life that all people must face – not embrace, enjoy, or derive any sense of happiness, love, or intimacy from. Surrounding the idea of intercourse, it feels, is a barrier of thick yellow CAUTION tape, the crossing of which will, most subjects express, inevitably result either in sickness, unhappy life, or a stained reputation.

Sex positivity did, however, arise in a few conversations with women – the students at Padma Kanya College, Puspa Chetri, and Ms. Kamala specifically – who argued that a stronger knowledge base about sex can result in greater confidence, power, happiness and romance in marriage, and less fear for women. Sita furthered these ideas, believing that if children were to be educated about reproduction and intercourse, they could view sex as “a good thing,” rather than fearing it as they do now. Transforming sex negative, sex-fearing cultural beliefs into sex-positive attitudes begins with knowledge, these participants expressed.

Deep-seeded gender imbalance – women “dominated” by men, as many participants described it – plays a huge role in sex negative culture. Because men

are just that – male – most participants agreed that they have more knowledge about sex, whether due to their greater educational opportunities, access to Internet and communication, freedom to discuss such matters, or position as “god” figures within the marriage. Women are prevented from having equal levels of education and freedoms to discuss matters of sex openly. Participants claimed that women are therefore unable to speak about sex frankly with their husbands, a silence that increases fear and discomfort about intercourse and marriage. The result is a cycle of uneducated and therefore silenced women facing inevitable sexual relations. Male-dominated culture, therefore, is both a reason for and a result of the lack of agency women hold when studying or engaging in intercourse and reproduction in Nepal.

When asked to trace the roots of Nepal’s sex-negative atmosphere, the fear-inspiring taboo that surrounds ideas of reproduction, and gender inequality, every subject referred to Nepali cultural norms. Nodding and shrugging, teachers and young women alike gave answers such as, “society just is this way” (Haripsd), “Nepalese context is like this” (Ruba), and “it is just our culture” (Principal Mahato). Such answers signal an awareness of the traditional yet negative characteristics of Nepal’s culture – all participants agreed that these cultural norms are problematic. Such a cognizance is hopeful – awareness is the first step in bringing about change. At the same time, however, when “culture” becomes a scapegoat, a target at which to point fingers, the effort to change it can more easily be excused. Though awareness is the first step, the notion that long-held ideas can indeed be changed is a necessary second.

Sex negative attitudes and culture-blaming reasonings arose in every interview, and, though their origins surely stem from many roots, the EPH curriculum reflects all such beliefs. Throughout the EPH course, the textbooks cite ‘our culture’ as the reason that people have more than five babies, marry early, or prefer sons to daughters. The curriculum claims that the reason students should learn about sex is to understand and avoid ‘problems’ – of overpopulation, puberty, premarital sex, or sex at a young age; the textbook teaches students to delay sex as long as possible so that health and social risks might be avoided. Nepal’s gender imbalance is also apparent in the EPH lessons. The course book delegates the role of family planning to females, arguing that this role is a new opportunity for women to engage with society outside their traditional roles of family and home care, which seems ironic. The curriculum also argues that a woman should learn about familial health in order to care for her family; men are implicitly excused from studying such matters. The transfer of HIV/AIDS is also credited only to women; this is a scientifically incorrect statement, as any person can carry and transmit this STD. The defining of the vagina as a receptacle for sperm further robs agency from women; the organs of her womanhood become merely a dumping ground for male excretions. Further, the neglecting of some teachers to administer such information sends the message to students that their bodies are not worthy of discussion, only for making babies. When female students learn from their government-issued lessons that only they carry diseases, that only they are responsible for the family, that their vagina exists only for a man to ejaculate into, or that their body deserves no discussion in a classroom, it

is no wonder that so many women lack confidence, are nervous about sex, and fearfully and quietly succumb to the oppression of a patriarchal society.

All participants who supported increased sex education and dialogue first suggested reworking the EPH curriculum. A few mentioned community-based, television, or radio programs, and believed these may have a place in furthering educational opportunities, but none argued that these should be the first step in augmenting SRH knowledge. It is clear when examining the ideas held by participants and analyzing the information given in the government education system that the EPH curriculum is both a culprit in the sex negative, woman-oppressing culture, and a potential tool for change.

### Conclusion

Through the curriculum it writes and prescribes, the Nepal Ministry of Education has furthered gender inequality in Nepal; insufficient education has perpetuated the lack of empowerment of Nepali women. When young women do not learn about or talk about sex, it is clear that they are denied the power that comes with knowledge and the agency that comes with having a voice, or even the words, to address the most natural process of life. EPH textbook content is a player in sex negative culture and the denying of women's agency over their bodies and in their marriages. But secondary school-based education can begin to change such conceptions; the power to alter such ideas begins in the written EPH curriculum.

The content of Nepal's government EPH curriculum must be changed – details of sexual organs and processes must be added, the current information

reworded, and, after supplementary teacher training, all the content administered with attention to detail, respect to each student's power over his or her own body, and recognition of the many positive aspects of sexual relations. Further, as research has shown that discussion is a crucial tool in building sex confidence, ample time for discussion about the positive aspects of healthy and respectful sexual relationships must be added and discussed in order to change the stigma around sex and dispel the fear so many young women hold. The EPH curriculum must be revised, rewritten, and greatly supplemented. To make a social change, Nepal must begin to learn and talk about sex.

Further research may seek to study the successes and failures of non-school reproductive health education programs such as community-based organizations and NGOS, and evaluate how these might become more effective or prevalent in the future. Additionally, the role of parents, particularly mothers, in their children's understanding, or lack thereof, of reproduction and sexual health, might be examined in order to understand how and why Nepali traditions are communicated and perpetuated over generations.

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### Interviewees

1. Bidya Shakya, November 2014, Durbar High School, Kathmandu, Nepal.
2. Daya Dahal<sup>2</sup>, November 2014, Padma Kanya College, Kathmandu, Nepal.
3. Haripsd Dhungana, November 2014, Bhoomeshwor High School, Dhital, Kaski District, Nepal.

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<sup>2</sup> Name has been changed.



4. Hemchandra Mahato November 2014, Durbar High School, Kathmandu, Nepal.
5. Jhalak Bahadur Chetri November 2014, Bhoomeshwor High School, Dhital, Kaski District, Nepal.
6. Kamala Sharma November 2014, Durbar High School, Kathmandu, Nepal.
7. Khimlal Tripathi November 2014, Bhoomeshwor High School, Dhital, Kaski District, Nepal.
8. Malati Adhikari November 2014, Annapurna Eco-Village, Dhital, Kaski District, Nepal.
9. Parbiti Adhikari November 2014, Padma Kanya College, Kathmandu, Nepal.
10. Parbiti Mahato November 2014, Padma Kanya College, Kathmandu, Nepal.
11. Prem Dhungana November 2014, Bhoomeshwor High School, Dhital, Kaski District, Nepal.
12. Prity Shah, November 2014, Padma Kanya College, Kathmandu, Nepal.
13. Puspa Chhetri, November 2014, her home, Dhital, Kaski District, Nepal.
14. Ruba Bidari, November 2014, Padma Kanya College, Kathmandu, Nepal.
15. Sita Paudel November 2014, Bhoomeshwor High School, Dhital, Kaski District, Nepal.

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