I am thankful to UPR-Info for this opportunity to speak to this illustrious audience. I represent St. Lucia Planned Parenthood Association (SLPPA), SLPPA is an affiliate member of the International Planned Parenthood Federation (IPPF) and Caribbean Family Planning Affiliation (CFPA).

Government Commitment

St. Lucia has not previously received any recommendation on comprehensive sexuality education or sexual and reproductive health during the Universal Periodic Review (UPR). They did receive one recommendation from South Africa, in the Second Cycle, to "Mainstream gender equality policies in the education sector, ensuring that gender issues and sensitivity training become an integral, substantive and mandatory component of all teacher training at all levels," which was accepted.

St. Lucia has taken steps to pass policy to protect and support the sexual and reproductive health and rights of children and adolescents. On 20 November 2018, the Government of Saint Lucia passed the Child Justice Bill and the Children Care, Protection and Adoption Bill.

St Lucia has also ratified key international legal instruments such as the Convention on the Rights of the child (1993), Convention on the elimination of all forms of discrimination against women, CEDAW (1982), and the Protocol to prevent, suppress and punish trafficking in persons, especially women and children (2013), as well as CARICOM'S Council for Human and Social Development (COHSOD) strategy to reduce adolescent pregnancy in the region from 2014 -2019,

Current Context on Adolescent Sexual and Reproductive Health in St. Lucia.

However, the current context of adolescent sexual and reproductive health in St. Lucia demonstrates that there is still a dire need for action. St. Lucia has a population of183,000,¹ a quarter of whom at age 25 or younger.²

The PAHO Adolescent and Youth Health 2017 profile of St Lucia notes a high and early age of sexual activity among youth—more than 26% of adolescents 13-15 years old have had sex, almost 20% with two or more people; and only about half report having used a condom in their last sexual encounter.³ St. Lucia also has a high adolescent fertility rate of 22 births per 1000 girls aged 10-19, accounting for 15% of total births;⁴ in girls 15-19, the rate is higher at 40 per

¹ World Bank, Population total – St. Lucia https://data.worldbank.org/indicator/SP.POP.TOTL?locations=LC

² PAHO Adolescent and Youth Health – 2017 Country Prolife St. Lucia (2018) <a href="https://www.paho.org/adolescent-health-report-2018/images/profiles/StLucia-health-report-2018/images/profiles/S

PAHO%20Adolescents%20and%20Youth%20Health%20Country%20Profile%20V5.0.pdf

³ PAHO Adolescent and Youth Health – 2017 Country Prolife St. Lucia (2018) <a href="https://www.paho.org/adolescent-health-report-2018/images/profiles/StLucia-health-report-2018/images/profiles/S

PAHO%20Adolescents%20and%20Youth%20Health%20Country%20Profile%20V5.0.pdf

⁴ PAHO, Country Report: St. Lucia, page 2 https://www.paho.org/salud-en-las-americas-2017/?page_id=155

1000.⁵ Youth ages 15-24 years account for 17% of new HIV infections.⁶ The St. Lucia Multiple Indicator Cluster survey 2012 in the chapter on Child Protection reports 3% of women aged 15-49 were married or in a union before the age of 15 and demonstrated a strong relationship between early marriage/union and women from the poorest households. Of *reported* cases of child abuse between 2015-2015, 34% of the 1,341 cases were sexual abuse, with girls representing over 70% of victims.⁷ Girls ages 12-16 are the largest group of victims, many of which are incest cases.⁸

These statistics on sexual abuse and child abuse in general is alarming, considering that adolescents victims as a result of Covid-19 are now forced to be at home full time, trapped with the very perpetrators whom they fear. It is critical that as a nation with negligible social safety nets we be proactive in giving adolescents full access to services and information that would enable them to protect themselves and the skills set to develop positive coping skills through the expansion of comprehensive sexuality education.

While St. Lucia does have a Health and Family Life Education curriculum, an abstinence-only educational program, an impact study conducted by UNICEF which included St. Lucia, revealed no pattern of significant positive effects. In fact, many sexual and reproductive health outcomes actually worsened during this time. Unfortunately, this study failed to analyze the impact of teacher bias and their general discomfort with the lessons on sexuality. This is important, because through our work at primary and secondary schools we have discovered that teacher bias and general discomfort with SRH topics is an important issue locally.

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http://hdr.undp.org/sites/all/themes/hdr theme/country-notes/LCA.pdf p. 6

https://www.unicef.org/easterncaribbean/media/1711/file/SiTan%20St.%20Lucia%20document.pdf, Page 9, 42 ¹⁰ Ibid.

⁵ UNDP, Human Development Report 2019, Inequalities in Human Development in the 21st Century: Briefing note for countries on the 2019 Human Development Report, Saint Lucia (2019)

⁶ PAHO Adolescent and Youth Health, page 79.

⁷ UNICEF, Situation Analysis of Children in St. Lucia (2017)

https://www.unicef.org/easterncaribbean/media/1711/file/SiTan%20St.%20Lucia%20document.pdf, Page 9, 42 ⁸ lbid.

⁹ UNICEF, Situation Analysis of Children in St. Lucia (2017)

enable them to protect themselves and the skills set to develop positive coping skills through the expansion of comprehensive sexuality education.

St. Lucia's Health and Family Life curriculum needs to reflect and impact the reality of children and adolescence and adhere to UN standards. Without this children and adolescent will continue to be vulnerable and at high risk of intimate partner violence, sexual violence, unplanned pregnancy and sexually transmitted infections. We therefore would like to request that Member States make the following recommendation to the government of Saint Lucia during the 3rd Cycle of their Universal Periodic Review

Recommendation:

Revise the Health and Family Life Education program, to include education on healthy and respectful family life and interpersonal relationships, personal and shared values, cultural and social norms, human rights, gender equality, non-discrimination, violence and gender-based violence (GBV), consent and bodily integrity, sexual abuse and harmful practices in line with UN technical guidelines on education, train competent facilitators or services providers to deliver it and implement accountability measures.