

"...culture is not static but is in constant flux, adapting and reforming..."

World Health Organization 1996,

Female Genital Cutting: A Joint WHO/UNICEF/UNFPA Statement

Culture is an important element of the foundation of every society. Culture provides the framework for people's social behaviours, contributes to their feeling of community, and helps individuals form their identity. However, constraints arising from cultural traditions often limit young people's access to the information and services they need to make informed and responsible decisions about their sexual and reproductive lives. Because it is often used to justify social inequality and can be a roadblock to achieving the full spectrum of human rights, "culture" must be addressed in the discussion around the rights of young people.

Defining Culture

Culture may be described as "the attitudes and behaviour that are characteristic of a particular social group or organization", and includes "traditions [that] reflect norms of care and behaviour based on age, life stage, gender, and social class." *

Religion plays a significant role in culture, as do social and political institutions such as media and communications, systems of education, and modes of governance.

*(<http://www.cogsci.princeton.edu/~wn/>)

Starting from the premise that "rights are universal but cultures are different"¹, it is important to understand the various cultural issues that are of great significance to young people worldwide, including such factors as information and communication technologies (ICTs) and media's influence on young people's choices.

The effect of culture on sexual and reproductive health policy and programmes for youth

- In some countries, cultural taboos on sexuality have made it very difficult to create adequate policies and programmes to deal with youth sexual and reproductive health and rights (SRHR). Sexuality itself is a difficult topic to broach in the public arena, and the idea of young people and sexuality introduces another level of difficulty. Even when laws and policies exist to protect youth's SRHR, cultural and religious climates may hinder their implementation.
- For example in India, where there is widespread discomfort with sexuality, "accurate information on sexuality is scarce, and health care of any kind is hard to come by for young people in India, who are seen as essentially healthy and not in need of service. Those who seek reproductive health services often are met by judgemental health providers, and are afforded little or no privacy in which to discuss their problems"². In both developed and developing countries, taboos on sexuality impede open communication and access to information about SRH. In some areas, low levels of literacy increase these problems.
- In some countries, attention to the sexual and reproductive lives of young people arises from concern over national population momentum. In such cases, the focus is mostly on delaying childbearing and not on the overall well-being of young people. Growing rates of HIV infection among young people may also compel governments to look at SRHR education, less from concern for individuals than from concern about national goals and priorities.
- Cultural and religious restrictions often mean that SRH is a part of a public health agenda, which is quite different from a rights-based approach to SRH. Public health policy usually looks at effects on entire populations and focuses less frequently on effects on individuals and their rights.

The effect of some cultural traditions on young women and girls

- Some cultural traditions and expectations can place disproportionate constraints on girls and challenge the "physical and psychological health and integrity of individuals."³ This is most evident in the practices of 1) marrying female children and very young women and 2) female genital cutting (FGC).
- Marrying girls at a young age is common in many cultures where girls are undervalued. They are an additional expense if dowry is to be paid; smaller dowries are one incentive for marrying girls earlier, as is the common belief that an early marriage ensures a long period of fertility.

¹ This same phrase was the theme of a moderated conversation and discussion held during a conference entitled "Cairo and Beyond: Reproductive Rights and Culture", held in Amsterdam, 7-9 March 2004.

² Margaret E. Greene, Zohra Rasekh, Kali-Ahset Amen, Nada Chaya, and Jenifer Dye. *In this Generation: Sexual and Reproductive Health Policies for a Youthful World*. Washington D.C.: Population Action International, 2002.

³ Advocates for Youth. "Giving Up Harmful Practices, Not Culture." *Issues at a Glance*. <http://www.advocatesforyouth.org/publications/iag/harmprac.htm>. Retrieved: July 14, 2004.

- In developing countries, 82 million girls who are now aged 10 to 17 will be married before their 18th birthday. Sixty percent of girls marry before the age of 18 in Nepal, 76 percent in Niger, and 50 percent in India. Early marriage may lead to early childbearing, with subsequent disruption of education as well as high rates of maternal morbidity and mortality.
- FGC, practiced in 28 countries, is an important rite of passage that places female infants, children, and young women at risk of infection and infertility as well as of severe blood loss, shock, and even death. FGC is intended to curb female sexual desires or prevent sexual activity, and may be a cultural necessity for marriage. Young women often fear social rejection if they do not undergo the procedure.
 - Approximately two million girls and young women are at risk of FGC each year (6000 every day). In some countries such as the Democratic Republic of Congo and Egypt, the prevalence of FGC is nearly 100 percent (98 and 97 percent respectively). Non-medically trained personnel often perform FGC in unhygienic conditions, exacerbating its potential negative health consequences.
- Cultural norms also may place girls and young women at increased risk of HIV infection. About 7.3 million young women are living with HIV or AIDS compared to 4.5 million young men. Early marriage can lead to increased chance of infection, as young women tend to marry older men, who are at increased risk of being already infected. In these circumstances, most young married women cannot safely request their husband to use condoms.

How religion factors in

- Religion is a prominent force in all societies, as it is estimated that more than five billion people follow one of the world's religions.⁴ In many societies, religious people and institutions promote human rights. However, some use religion to justify violations of human rights or to oppose certain rights, including SRHR.
- While the fundamental values of all religions promote the integrity and well-being of all human beings, different interpretations and the ways that values are translated into practice can create barriers to SRHR. This is especially so for young people seeking to make choices about their sexual and reproductive lives that in any way deviate from common practice.
- Young people often face contradictions between their religious beliefs, as passed on by religious leaders and institutions, and their life circumstances.

The role of information and communication technologies (ICTs) and media culture in the lives of young people

- The global media culture can be an independent force in the lives of young people, influencing behavioural and value patterns that differ from those of their elders. Some argue that ICTs carry a "cultural package" of values associated with Western popular culture. Facilitated by ICTs, media culture can sometimes conflict with more traditional concepts of how youth should behave.
- In urban centres, media culture and its predominant messages permeate almost all aspects of young people's lives. Increasingly, access to ICTs influences youth's education, personal relationships, employment opportunities, and more.
- The culture "industry", referring to the entirety of the media and ICTs, is a powerful tool through which young people can access information about SRH. With such information, they can exercise their sexual and reproductive rights and make better-informed decisions about their lives. Thus, ICTs should be available to all and should offer accurate information.

Unless otherwise noted, information and statistics cited from:

- Oxfam International Youth Parliament. (2003) *Highly Affected, Rarely Considered: The International Youth Parliament Commission's Report on the Impacts of Globalisation on Young People*. Sydney: Oxfam Community Aid Abroad.
- United Nations Department of Economic and Social Affairs. (2004) *World Youth Report 2003: The Global Situation of Young People*. New York: U.N.
- United Nations Population Fund (2003). "Making 1 Billion Count: Investing in Adolescents' Health and Rights." *State of the World Population 2003*. New York: UNFPA.

If you have any questions or comments about any of the Fact Sheets produced for the Working Group on Youth, please contact Youth Coalition at outreach@youthcoalition.org or Advocates for Youth at questions@advocatesforyouth.org.



⁴ Women and Religions in a Globalized World: Conversations to Advance Gender Equity. Background paper by the Center for Health and Social Policy and the International Inter-Religious Peace Council for *Cairo and Beyond* (see note 1).