



Comprehensive Sexuality Education Technical Guideline

Adaptation of Global Standards for Potential Use in China

FIRST EDITION



First Edition

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Foreword

The 2030 Agenda for Sustainable Development calls for action to create a world where no one is left behind and everyone can benefit from quality education, gender equality, and good health and well-being. Human capital investment that addresses development needs and inequalities amongst youth and the recognition of their rights enable young people to make invaluable contributions to the socio-economic development of their countries and communities and to the achievement of the Sustainable Development Goals (SDGs). However, without sexual and reproductive health these gains can be undermined. Therefore, universal access to quality sexual and reproductive health services, information, and education, with a particular focus on the needs of adolescents and youth, is critical for achieving the SDGs by 2030.

Comprehensive sexuality education (CSE) plays a central role in achieving universal access to sexual and reproductive health and rights (SRHR). It develops children's and adolescents' ability to protect and advocate for their health, well-being, and dignity. Age-appropriate CSE includes discussions about family life, relationships, culture, and gender roles, and it supports children and adolescents to develop self-esteem and life skills in critical thinking, effective communication, responsible decisions, and respectful, empathetic behavior.

In 1994, the International Conference on Population and Development (ICPD) Programme of Action was adopted by 179 countries, including China. This global commitment to realizing people-centered development through a focus on sexual and reproductive health and gender equality recognizes that providing education on sexuality is essential to promoting the well-being of adolescents. Almost 30 years later, despite much progress, we continue to see millions of young people across the world unable to access the quality, evidence-based CSE they need.

The updated edition of the *International Technical Guidance on Sexuality Education (ITGSE)*, released in 2018 by the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Population Fund (UNFPA) and other United Nations (UN) agencies, defines international standards in the delivery of CSE based on the most recent scientific evidence and global experience and serves as a guide for national governments and their partners to develop and implement effective CSE programmes adapted to their local contexts.

China is home to one of the largest populations of children and adolescents in the world and for more than 40 years, UNFPA, the UN SRHR agency, has worked closely with the Government of China and other partners to strengthen national capacity in the areas of sexual and reproductive health, adolescents and youth development, gender equality and population and development data. It is notable that China has ensured that the provision of sexuality education and the strengthening of sexual and reproductive health services have been incorporated into various national strategies,

laws, and regulations, including a call for multi-departmental cooperation and an enforcement system for the protection of rights and interests of children and adolescents.

Since 2018, UNFPA China and UNESCO Beijing Office have supported the development of this Comprehensive Sexuality Education Technical Guideline –Adaptation of Global Standards for Potential Use in China (First Edition) (hereafter referred to as the Guideline). The development of the Guideline was led by Professor Liu Wenli and the children's sexuality education project team from Beijing Normal University and included close consultation and engagement with a technical advisory group consisting of relevant experts and specialists with diverse backgrounds, representing various sectors and institutions. The Guideline is aligned with the ITGSE global standards and the Government of China's laws, policies and national programmes on children, adolescents, youth, and women's development.

The Guideline is designed as a technical resource to support the work of policymakers, teachers, health educators, programme managers, youth development professionals, and young leaders in China in the design, implementation, and monitoring and evaluation of quality CSE curricula and programmes through holistic, scientific, localized, and standardized approaches.

We are committed to supporting the application of the Guideline by continuing to work with valuable national partners and hope this Guideline will be a useful resource for national partners seeking to strengthen access to quality CSE for children and adolescents.

Dr. Justine Coulson

UNFPA Representative to China and Country Director of UNFPA in Mongolia

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The development of the Guideline was completed by the children's sexuality education project team led by Professor Liu Wenli of Beijing Normal University in collaboration with experts from technical advisory group. The members of the children's sexuality education project team of Beijing Normal University are Liu Wenli, Li Jiayang, Zhong Yao, Li Yumeng, Guo Lingfeng, Lu Mingqi, Li Yiyang. The technical advisory group experts who provided technical support for the Guideline are: Liu Wenli, Professor of the China Collaborative Innovation Center for Quality Monitoring of Basic Education, Beijing Normal University; Ma Yinghua, Professor of the Institute of Child and Adolescent Health, Peking University; Wang Xiying, Professor of the Institute of Education Basic Theory, Beijing Normal University; Wei Wei, Professor of the School of Social Development, East China Normal University, Gou Ping, Professor of Teachers College of Chengdu University, Li Hongyan, Independent Consultant and former National Associate Program Officer (Education for Health and Well-being) of UNESCO Beijing Office, Zhu Min, Lecturer of Health Research Institute, School of Public Health, Kunming Medical University, Zhang Xuemei, lawyer of Beijing Juvenile Legal Aid and Research Center, Liu Qing, Deputy Chief Physician of Science and Technology Research Institute of National Health Commission, Miao Shirong, senior psychological teacher of the Adolescents Health Education Expert Group of the China Family Planning Association, Cai Yiping, Special Researcher of Kangzhong Health Education Service Center, Beijing Chaoyang District, Wang Longxi, Director of Xi'an Guangyuan Sex Education Support Charity Center (You and Me).

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Introduction

Globally, a wide array of issues such as HIV and AIDS, sexually transmitted infections (STIs), child sexual abuse, unintended pregnancies, gender-based violence (GBV), and gender inequality pose serious threats to health and well-being of children and adolescents. A wealth of research evidence shows that comprehensive sexuality education (CSE) enables children and adolescents to acquire accurate, age-appropriate, and practical knowledge, attitudes and skills, develop positive values, and make responsible decisions about their own and others' sexual and reproductive health and life to address threats and challenges.

In China, sexuality education has made great strides through decades of development. To promote the health, well-being and dignity of children and adolescents in China, the *Comprehensive Sexuality Education Technical Guideline–Adaptation of Global Standards for Potential Use in China (First Edition)* (hereinafter referred to as the Guideline) has been developed over four years since 2018 by the children's sexuality education project team led by Professor Liu Wenli of Beijing Normal University in collaboration with a technical advisory group, with the financial and technical support from UNFPA China and UNESCO Beijing Office. It is expected that the Guideline will provide holistic, scientific, standardized and localized content, methodologies and references to China's education and health policy-makers, education and health specialists, children and youth programme managers, professionals for youth development, young people and all those who are willing to learn and implement CSE with, and consequently to make positive contributions to the promotion, implementation, monitoring and evaluation of the development of sexuality education in China.

1. What is comprehensive sexuality education?

Humans are "sexual" beings throughout their life cycle. Though sexuality manifests itself differently at different ages, no one can live without relationships regardless of their age. A harmonious relationship is influenced by physiology, psychology, emotions, affections, and values. CSE aims to enhance the health, well-being and dignity of individuals in relation to sexuality and is a lifelong learning process with great benefits for people.

The latest concept of "Comprehensive Sexuality Education" comes from the International *Technical Guidance on Sexuality Education* (Revised) (hereinafter referred to as the ITGSE) released by the United Nations in 2018. "Comprehensive sexuality education (CSE) is a curriculum-based process of teaching and learning about the cognitive, emotional, physical, and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes, and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and understand and ensure the protection of their rights throughout their lives."

At the International Conference on Population and Development (ICPD) held in Cairo in 1994, a global consensus has been reached on promoting gender equality, sexual and reproductive health, eliminating gender-based violence and promoting sustainable development, with individual dignity and human rights placed at the very heart of development. 179 countries, including China, formally adopted the "ICPD Programme of Action," which explicitly calls on governments and relevant institutions to provide CSE and services for adolescents.

Since then, CSE has been developed and implemented for many years in various parts of the world, including some regions and schools in China. The CSE framework system has matured and improved. CSE is gaining wider recognition as an important tool to promote the realization of health, well-being and dignity of children and adolescents.

On September 25, 2015, at the UN Sustainable Development Summit, 193 member states of the UN, including China, officially adopted the 2030 Agenda for Sustainable Development and the 17 SDGs, aiming to address global sustainable development in the social, economic, and environmental dimensions from 2015 to 2030. Among them, CSE is included as part of quality education, with "the proportion of schools that provided life skill-based HIV prevention and sexuality education within the previous academic year" as a specific thematic indicator for SDG 4 (ensure inclusive and equitable quality education and promote lifelong learning opportunities for all). Also, CSE is relevant to SDG 3 (Health and Well-being) and SDG 5 (Gender Equality), as well as to SDG 10 (Reducing Inequalities) and SDG 16 (Peace and Justice).

Different from sexuality education focusing on the prevention of unintended pregnancy and STIs, CSE adopts a holistic educational philosophy and perspective, focusing not only on SRH issues affecting children and adolescents, such as changes during puberty, pregnancy, contraception, abortion, violence, HIV/AIDS and STIs, but also on other issues that affect the healthy physical and mental growth of children and adolescents, including the impact of the current social environment and new media networks on sexual behavior and psychology.

The ITGSE clearly states that the understanding of CSE should be based on the conceptual understanding of "sexuality". The concept of sexuality in CSE encompasses physical, psychological, social, political, religious, legal, historical, cultural, and ethical dimensions. In CSE, the concept of "sexuality" includes the human perception of and relationship with the body; emotional attachment and intimacy; biological sex; gender; sexual orientation; gender identity; sexual pleasure and reproductive health; and power relations.

"Sexuality" is culturally relevant and context-appropriate. It has different meanings in different languages and cultures and can be influenced by individual upbringing, educational background, cultural values, and social norms. In addition to the different perceptions of sexuality by different societies and cultures, there are also significant differences in the perceptions of sexuality even within the same culture and society. For example, there are diverse opinions about sexual behavior, sexual orientation, and gender identity. However, this does not mean that sexuality education should avoid these issues. On the contrary, it is important for CSE to reflect, discuss and respect these phenomena and issues, which exist objectively in society.

2. The background of the development of the Guideline

China is home to one of the largest populations of children and adolescents in the world. According to 2021 National Education-related Statistics released by the Ministry of Education (MOE) in 2022, China currently has 108 million students in elementary school, 50,184,400 students in junior high school, 26,050,300 students in senior high school, and 13,118,100 students in secondary vocational schools.

The Chinese government attaches great importance to the education, health and development of children and adolescents, and has issued several laws, regulations, and policy documents in this regard.

In September 2013, the MOE, the Ministry of Public Security, the Central Committee of the Communist Youth League and the All-China Women's Federation (ACWF) jointly issued the "Opinions on the Prevention of Child Sexual Abuse," proposing eight opinions to further strengthen the protection of children and adolescents, namely, "scientific education on the prevention of sexual abuse", "regular investigation of hidden dangers", "effective implementation of a daily management system", "strict management of female students' dormitories", "effectively strengthening of the staff management", "maintenance of close home-school contact," "properly handling of sexual abuse cases among primary and middle school students", "efforts to create a favorable social environment and public opinion environment", and "effective establishment of a long-term mechanism".

In September 2018, the National Health Commission (NHC) of the People's Republic of China released the *Core Information and Interpretation of Chinese Adolescent Health Education* (2018) which includes sexual behavior at an early age and unsafe sex among the nine problems that seriously harm adolescent health. Its core message 7 clearly states, "adolescents need to acquire correct knowledge of reproductive and sexual health, sexuality-related values, life skills and self-protection skills, avoid sexual behavior at an early age, and prevent sexually transmitted diseases (STDs) including AIDS", emphasizing that "receiving and participating in CSE enhances adolescents' level of knowledge about sexual and reproductive health and raises awareness of their responsibility to protect themselves and respect the physical and mental health of others."

In February 2019, the Central Committee of the Communist Party of China (CPC) and the State Council issued *China's Education Modernization 2035 plan*, which focuses on the deployment of ten strategic tasks for education modernization. The second strategic task of "building a world-class education sector with Chinese characteristics" proposes the education concept of "improving comprehensive quality and putting health in the first place". *Healthy China 2030 (HC 2030) blueprint* outlines the need to strengthen health education, "to integrate health education into the national education system and make health education an important part of quality education at all educational levels. Focus on primary and secondary schools and establish a mechanism to promote health education in schools."

In May 2019, the ACWF, the MOE and nine other departments jointly issued a notice on the issuance of the *National Family Education Guidelines* (Revised) (hereinafter referred to as the Guidelines (Revised)). The Guidelines (Revised) clearly state that age-appropriate sexuality education should be provided to children. The Guidelines (Revised) is a national-level family education guidance developed after in-depth research and demonstration based on years of theoretical and practical experience in family education, responding to the requirements of the times marked by the scientific development of family education, and the needs of parents and children. The Guidelines (Revised) was first released in February 2010, which did not explicitly mention "sexuality education" at that time. After nine years of family education practice, the Guidelines (Revised) include a clear statement of sexuality education and specific guidelines on its content, which indicates that sexuality education is already one of the important educational contents in China's family education practice.

In July 2019, the Healthy China Promotion Committee led by the State Council released the Healthy China Initiative (2019-2030), which established the strategic goals of raising the level of health literacy of the whole people, popularizing healthy lifestyles, controlling major health influencing factors, and achieving health equity; emphasized prevention as the focus, advocated healthy and cultivated lifestyles, and shifted from treatment-centered to people's health-centered approach. The document proposed 15 major health initiatives to be taken to achieve this goal, including health promotion for primary and secondary schools, maternal and child health promotion, infectious disease and endemic prevention and control, and mental health promotion. The health promotion initiatives for primary and secondary schools emphasize that students in primary and secondary school should master relevant knowledge and skills, prevent harm from school violence, sexual harassment, and sexual abuse, and stay away from unsafe sex, and also mention the rational and safe use of the Internet and enhance the discernment of Internet information. The maternal and child health promotion initiative suggests that women should improve their awareness and ability of reproductive health, actively acquire knowledge about puberty, pay attention to personal hygiene during menstruation, and be familiar with the symptoms and prevention knowledge of reproductive tract infections. It also mentions "improve the awareness of sexual morality, sexual health and sexual safety, refuse unsafe sex, and avoid unintended pregnancy, childbirth at an early age and transmission of sexually transmitted diseases". The initiative for the prevention and control of infectious and endemic diseases proposes the goal of controlling the HIV infection rate of the entire population, emphasizing "promoting responsible and safe sexual behavior and encouraging the use of condoms". The mental health promotion initiative emphasizes improving the mental health awareness of the whole population, recognizing emotional problems, and mastering the ability to regulate emotions and manage stress, and building good personal relationships, etc.

These Healthy China Initiatives and their related provisions are closely linked to CSE and are also highly aligned with the goals related to the health and well-being of the UN Sustainable Development Goals (SDGs).

Article 40 of the Law of the People's Republic of China on the Protection of Minors (revised in 2020), which was enacted on June 1, 2021, states, "Schools and kindergartens shall provide age-appropriate sexuality education to minors."

In June 2021, the *Decision of the CPC Central Committee and the State Council on Optimizing Fertility Policy and Facilitating Long-Term Balanced Population Development* (hereinafter referred to as "the Decision") was released. The Decision emphasizes "safeguarding maternal and child health, promoting the integration of reproductive health services into the whole process of women's health management," "integrating infant and childcare services into economic and social development planning, and strengthening policy guidance," and "safeguarding the lawful rights and interests of women's employment" and other contents related to the health, development and rights of women and children.

In August 2021, the Opinions of the Ministry of Education and Other Four Departments on Comprehensively Strengthening and Improving School Hygiene and Health Education Work in the New Era was released, stressing the requirement to specify health education contents in deepening education and teaching reform, including constructing an integrated, age-specific contents framework that incorporates human development, sexual and reproductive health, sexual morality, and responsibility.

Article 42 of the *Regulations on the Protection of Minors in Schools* issued by the MOE which came into effect on September 1, 2021, states that "puberty education and sexuality education should be carried out in a targeted manner so that students can understand the physiological health knowledge and improve their self-protection awareness and ability to prevent sexual abuse and sexual harassment."

On September 8, 2021, the State Council issued the *Outline of Children's Development in China* (2021-2030). Goal 12 under "Children and Health" clearly states, "Children of school age will receive universal sexuality education, and the accessibility of sexual health services for children will be significantly improved." Strategic Measure 14 under "Children and Health" also specifies the development and promotion of sexuality education for children.

On September 8, 2021, the State Council issued the *Outline of Women's Development in China* (2021-2030). Goal 4 under "Women and Health" clearly states that "popularize knowledge of reproductive health, healthy birth and childcare, promote healthy pregnancy and childbirth, and reduce unintended pregnancies." Strategic Measure 6 under "Women and Health" specifies to "provide scientific and practical health education in various forms at different stages of school education to promote students' knowledge of reproductive health and improve their ability to protect themselves. To enhance awareness of sexual morality, sexual health and sexual safety for men and women, and to promote shared responsibility for contraception."

In November 2021, the *Guidelines for the Integrating Life Safety and Health Education into Curricula and Textbooks of Primary and Middle Schools* developed by the MOE made targeted recommendations for the inclusion of sexuality education contents into teaching materials in primary and secondary schools, such as incorporating "understanding the concepts of puberty, gender, primary and secondary sexual characteristics," "knowing how to seek professional solutions to confusions about puberty", and "the formation process of menstruation and the menstrual cycle" into science subject in primary school; incorporating "safe sex and unprotected sexual behavior" and "teenage pregnancy" into biology in junior high school; incorporating "understanding the relationship between sexuality, love and marriage" into ideology and politics in senior high school, and "effective prevention and response to sexual harassment and abuse" into biology in senior high school.

Article 16 of the Law of the People's Republic of China on Family Education Promotion, which came into effect on January 1, 2022, regulates to "pay attention to minors' mental health, teach them to cherish their lives, educate them on safety knowledge in traffic and travel, healthy access to the Internet and prevention of bullying, drowning, fraud, trafficking and sexual abuse, help them master safety knowledge and skills, and enhance their awareness and ability of self-protection."

In April 2022, Circular of the General Office of the State Council on Issuing the "14th Five-Year" Plan on National Health was released, which encompassed an array of elements relating to fertility, marriage, infant and childcare, and SRH of women and children. In the same month, the General Office of the MOE issued the Circular of the General Office of the Ministry of Education on Implementing the National Plan for the Construction of Healthy Schools to speed up the capacity building of school health promotion, making it clear that health literacy should be integrated into every aspect of the all-round development of moral, intellectual, physical, aesthetics and labor education; that health education should be accessible throughout the entire process of school education and management services; and that health education should permeate all aspects of students' learning, practicing and living.

In the health promotion work carried out in schools across China, more and more schools are trying to provide health education that integrates perspectives of physical hygiene, adolescent health care, prevention of school bullying, prevention of child sexual abuse and sexual harassment, and prevention of HIV/AIDS and STIs. In the *Curriculum Program and Standards for Compulsory Education (2022)* issued by the MOE in 2022, the relevant concept of sexuality education is integrated into *Physical Education and Health Curriculum Standards, Science Curriculum Standards, Morality and Rule of Law Curriculum Standards and Biology Curriculum Standards.*

Considering that the sexuality education under the guidance of the Chinese government is becoming more comprehensive, it should fall into the category of CSE in terms of its current rich connotations (e.g., healthy lifestyle and hygiene habits, interpersonal relationships, self-protection, human body and development, sexual and reproductive health, values of respect and equality, prevention of AIDS and STIs, safe sex, etc.).

3. The purpose and significance of the development of the Guideline

In China, sexuality education has never been set up as a stand-alone course but relies on carrier subjects such as physical education and health, and is integrated into national subjects such as science, biology, morality and rule of law, and ideology and politics. In general, whether in the existing policies, guidelines, and teaching materials or during implementation, the lack of comprehensiveness in sexuality education content and inadequate implementation remains a serious problem.

Globally, CSE has made great progress in the development of curriculum and teaching materials, teacher training, and pedagogical assessment. But overall, as the 2019 Global Education Monitoring Report policy paper on CSE points out, CSE still faces social resistance and implementation barriers. China is no exception. The quality of sexuality education curriculum and implementation cannot be guaranteed due to the lack of clear technical guidelines for CSE that are relevant to China's educational reality. Currently, in some of the schools where sexuality education is provided, there is a wide variation in the way it is delivered, the content of the curriculum, and its concrete effectiveness.

To promote the implementation of actions related to the sexual health of children and adolescents in the *Healthy China Initiative* and to achieve the national strategic goals of education and health development, CSE urgently requires high-level attention and in-depth exploration and reform at the policy and practice levels. The development of the Guideline aims to integrate the experiences and achievements of China in recent years in the development of curriculum and teaching materials, teacher training and teaching evaluation, with the relevant Chinese policies and the concept, content framework and best practices of CSE advocated by the UN and provide technical support for CSE-related professionals in terms of curriculum development and implementation. It will also serve as a reference for administrations, professional organizations and schools in education, health, hygiene, and other related fields to better plan and support the implementation of CSE in China.

To ensure the integrity of CSE, the Guideline proposes a framework of sexuality education with eight key concepts consistent with those in the ITGSE. The topics and learning objectives have been localized with distinctive Chinese characteristics. First, all the topics and learning objectives covered in the Guideline are based on China's laws, regulations, and related policies as well as Chinese cultural characteristics, such as sexual and reproductive health rights based on the One-child family planning policy; and provisions related to adoption and marriage based on the *Civil Code*. The development of the Guideline is based on the practical experience and evidence base of sexuality education in China, and its educational philosophy and approach are in line with the learning characteristics of Chinese children and adolescents, as well as in congruence with the education system and model and teaching methods in schools in China.

4. The target audience of the Guideline

The Guideline is suitable for all who wish to learn about and carry out sexuality education. Its primary target audience includes, but is not limited to:

 Professionals in the field of education, such as developers of the school curriculum, school principals and teachers

The following persons may also find this Guideline useful:

- · Education and health-related policymakers and administrators at all levels
- Professionals and staff of social service organizations serving children and adolescents
- Professionals involved in the design, implementation, and evaluation of sexuality education programmes on and off-campus
- Other stakeholders, especially professionals and staff involved in the fields of education and health
- · Parents or other guardians of the children or adolescents

5. The development process of the Guideline

The Guideline is based on the experience and evidence of research and practice of sexuality education in China, in line with policies and guidelines developed by the MOE, such as the *Guidelines for Health Education in Primary and Middle Schools, National Family Education Guidelines* (Revised), and related curriculum standards, with close reference to the ITGSE of the UN.

With the support of UNFPA China and UNESCO Beijing Office, the work was completed by the children's sexuality education project team led by Professor Liu Wenli from Beijing Normal University in coordination with experts of a technical advisory group. The technical advisory group consists of experts from diverse fields such as human sexuality, education, psychology, public health, sociology, child and adolescent development, human rights, law, and gender, as well as youth and social service organizations.

In the process of developing the Guideline, members of the project team and experts from the technical advisory group consulted and referred to a substantial number of domestic and foreign research results on CSE, including more than 1,000 academic articles published by Chinese scholars in Chinese and English magazines, monographs of famous scholars, published research reports, etc. In particular, great importance has been attached to the research results of sexuality education in China. The development of the Guideline reflects the research achievements based on the practice of sexuality education in China.

In addition, members of the project team and experts from the technical advisory group have categorized the laws, regulations and policy documents related to CSE issued by the Chinese government in recent years, which have played an important guiding role in the development of the Guideline.

During the development process of the Guideline, members of the project team and experts from the technical advisory group wrote, discussed, and revised the framework of the content including the key concepts, topics and learning objectives several times. Offline and online workshops were also held to solicit inputs from various stakeholders to inform the Guideline.

On 20 August 2019, the children's sexuality education project team members, together with experts for the technical advisory group co-hosted a technical consultation on CSE with UNFPA China and UNESCO Beijing Office, to solicit ideas and input from all sectors of the community. More than 100 participants, including experts, scholars, leaders of relevant government departments, heads of relevant academic groups, principals, teachers, sexuality education practitioners, parents, and adolescents, attended the consultation, providing constructive advice for the revision and improvement of the Guideline.

6. Structure of the key concepts of the Guideline

The Guideline contains eight key concepts: relationships; values, rights, culture, media, and sexuality; gender; violence and staying safe; skills for health and well-being; the human body and development; sexuality and sexual behavior; and sexual and reproductive health. Each key concept has different topics. There are 29 topics in total, each of which is equally important. The eight key concepts are relatively independent. The content of each conceptual topic is interspersed with one another and repeated many times throughout the Guideline. The complexity of each topical content spirals upward with the age of the learner, with new topical content building on what has been learned previously, and the emphasis varies across themes.

The Guideline proposes learning objectives based on cognitive development and other characteristics of each age group, aiming to equip learners with knowledge, attitudes and skills related to sexuality. Knowledge refers to the conceptual foundations related to sexuality; attitudes emphasize positive perceptions of sexuality, diverse understanding, tolerance and respect for individuals, families, society, and the world; and skills include the ability to communicate, negotiate, refuse, make responsible decisions, build critical thinking, develop empathy, access scientific information, seek reliable help, challenge stigma and discrimination, advocate for rights, and many other areas. The learning objectives in the three domains of knowledge, attitudes, and skills are not necessarily linear, but rather are iterative, mutually reinforcing processes designed to provide learners with multiple opportunities to learn, review, deepen their understanding, and acquire skills.

7. The age range covered by the Guideline

The learning objectives of each topic in the Guideline are divided into stages based on age groups: lower elementary (6-9 years), upper elementary (9-12 years), junior high school (12-15 years), and senior high school and above (15-18 years and above).

The learning objectives for senior high school and above (15-18 years and above) are not only applicable to learners at the senior high school level but can also benefit learners in higher education institutions. To help learners better meet the learning objectives, there is a varying degree of overlap between the different key concepts. Therefore, the Guideline is applicable to learners of CSE at any age.

8. Flexibility in the use of the Guideline

CSE has important characteristics: scientifically accurate; incremental; age- and development-appropriate; curriculum-based; comprehensive; based on a human rights approach; based on gender equality; culturally relevant and context appropriate; transformative; able to develop life skills needed to support healthy choices.

The key concepts, topics, and knowledge, attitude, and skill objectives provided in the Guideline are developed according to age groups and do not prescribe a strict sequence. When referring to the Guideline to determine teaching themes, objectives, and key knowledge points, the learning content can be reasonably arranged based on an analysis of students' learning situations without violating the pedagogical logic or reducing the content of sexuality education, so as to form a scientific, systematic, age-appropriate, and learner-friendly curriculum system that reflects characteristics of different regions and school districts, and personal styles of teachers. The CSE curriculum can be adapted to target different ethnic groups, regions, and cultures, reflecting the cultural sensitivity and relevance of specific issues. For example, a CSE programme for a minority region in China may draw on the ethnic or local language and provide a targeted discussion of specific issues (e.g., marriage at an early age).

9. Aspects to be aware of when developing sexuality education materials using the Guideline as a reference

The Guideline provides key concepts, topics, and learning objectives that can be used as a basis for developing students' learning materials and teachers' teaching materials on sexuality education (e.g., instructional manuals for teaching sexuality education). As an important resource for students' learning, teaching materials on sexuality education should be scientific, comprehensive, relevant, and readable.

Scientific: This is the basic requirement for the development of teaching materials on sexuality education, that is, the content of sexuality education should be scientifically accurate and congruent with the cognitive development of learners.

Comprehensive: It refers to the diversity of key concepts of CSE and their connections, as well as the multidimensional learning objectives encompassing knowledge, attitudes, values, and skills.

Relevant: It means that the teaching materials should select appropriate information from a variety of real-life examples, relevant research materials, popular science knowledge, and hot news, etc., and design necessary learning practice activities and group activities to encourage learners to communicate, express, reflect and practice.

Readable: The readability of the teaching materials is reflected in whether it is easy for learners to understand, whether it can stimulate learners' interest in reading and learning, whether it can provide space for learners to think, and whether it can encourage learners to apply what they have learned in their daily life. Selecting learning materials that are close to learners' lives can help stimulate their enthusiasm and interest in learning.

The content of the teaching materials on sexuality education should also be designed with a certain degree of flexibility to accommodate the achievement of learning objectives while considering the individual differences of learners to meet their needs, including the special needs of people with disabilities for sexuality education.

The main purpose of teachers' instruction manual on sexuality education is to deepen teachers' understanding of the contents and learners' learning process and improve teachers' ability to adopt effective teaching methods. When preparing for teachers' instruction manuals, common issues in the teaching process of CSE can be highlighted, with teaching examples provided to illustrate the organic integration of CSE theory and teaching practice, which will also help improve teachers' professional skills and teaching quality.

10. Aspects to be aware of when designing curriculum and implementing CSE using the Guideline as a reference

The designers of CSE curriculum contents could refer to the Guideline, based on the goals and values of CSE, as well as the analysis of learning situations. The curriculum design should serve the process of teaching CSE, translating the basic concepts into teaching activities to help students improve sexuality-related knowledge, develop life skills, and cultivate emotions, attitudes, and values. It is essential to pilot the designed CSE curriculum before formal implementation.

Participatory teaching methods are particularly important in sexuality education. When designing their teaching according to the contents of specific topics, fully considering their own teaching styles and characteristics, teachers shall employ participatory methods to ensure student agency

in the learning process. By doing this, teachers could play the roles as organizer, facilitator, and collaborator in students' learning process. As the organizer, they can accurately grasp the teaching content in light of students' learning situation, and organize classroom teaching activities accordingly; as the facilitator, they could improve students' ability to reflect on and relate to the reality of life through appropriate guidance, stimulating students' curiosity and encouraging students to apply what they have learned to their life and practical activities; as the collaborator, they maintain a teaching attitude that reflects principles of equality, respect and inclusion throughout their teaching.

The development of CSE teaching activities should center around the learning objectives and fully reflect the concept of CSE. CSE is not only about helping students acquire sexuality-related knowledge, but also about promoting learning in multiple areas such as sexuality-related life skills, interpersonal skills, social development skills, and emotions, attitudes, and values. Appropriate classroom teaching activities not only promote the acquisition of knowledge during learning activities, but also stimulate students' interest in active learning, encourage reflection and practice, and promote students' understanding of the concept of CSE and the practice of the values of respect, inclusion, equality, and diversity.

11. The functional sections of the Guideline

The Guideline consists of four parts: an introduction; key concepts, topics and learning objectives; references; and appendixes.

Introduction: The introduction introduces the background of the development of the Guideline, the purpose and process of the development of the Guideline and the target audience to help users get a quick overview of the Guideline.

Key Concepts, Topics, and Learning Objectives: The Guideline includes eight key concepts, each containing several topics, and each topic provides learners with three-dimensional learning objectives, i.e., knowledge, attitudes and skills.

Users of the Guideline can understand the difficulty level of a learning objective by the indicative verbs used for that learning objective. For example, in the knowledge dimension, words such as "know", "learn", "list", "describe", "understand", "explain", and "analyze" are used to indicate the varying degrees of difficulty of different contents.

The Guideline features annotation to some of the learning objectives to help learners better understand the requirements of the learning objectives.

All learning objectives in the Guideline are expressed in terms of children and adolescents. For example, "express one's emotions positively" means that learners need to master this skill themselves; if the content involves "children", such as "analyze the ways in which family values

will affect children", the learner needs to be able to think not only about themselves but also about other children and adolescents, i.e., the scope of the learning objectives expands as the cognitive level of the learners increases.

The "child" and "minors" that appear in this Guideline refers to anyone below the age of 18, while "adult" refers to anyone above the age of 18.

References: In the process of developing the Guideline, we consulted and referred to a large number of domestic and foreign research results on CSE. Some of the reference materials are listed here for users to learn about the relevant research results

Appendixes: We have sorted out the laws, regulations and policy documents related to CSE issued by the Chinese government in recent years (see Appendix 1). These laws, regulations and policy documents have played an important guiding role in the development of the Guideline. The Guideline has been developed with technical support from experts in different disciplines, and therefore has a solid interdisciplinary academic foundation. See Appendix 2 for the list of these experts. In the process of developing the Guideline, the children's sexuality education project team led by Professor Liu Wenli has carried out in-depth and meticulous research and played a central role. At the same time, it has done a lot of organizing and coordinating work. See Appendix 3 for the list of these members.



Key concepts, topics and learning objectives

Framework of the Comprehensive Sexuality Education Technical Guideline— Adaptation of Global Standards for Potential Use in China (First Edition)

Key Concept 1. Relationships 1. Families 2. Friendship, Love and Romantic Relationships 3. Inclusion, Tolerance and Key Concept 8. Sexual and Key Concept 2. Values, Rights, Respect Reproductive Health Culture, Media, and Sexuality 4. Long-term Commitments and Parenting 1. Pregnancy 1. Values and Sexuality 2. Pregnancy Prevention 2. Rights and Sexuality 3. Sexually Transmitted Infections 3. Culture, Society, Law, and (STIs), including HIV Sexuality 4. HIV and AIDS stigma, Treatment 4. Media and Sexuality and Support 2 **Key Concept 3. Gender** Framework of Key Concept 7. Sexuality and the Comprehensive Sexual Behavior Sexuality Education 1. The Social Construction of Gender and Gender Norms Technical Guideline-1. The Sexual Life Cycle Adaptation of Global 2. Gender Equality, Stereotypes and Standards for Potential 2. Sexual Behavior and Sexual Use in China 3. Gender-based Violence (First Edition) 6 5 Key Concept 6. The Human **Key Concept 4. Violence and Body and Development** Staying Safe **Topics Topics** 1. Sexual and Reproductive 1. Violence Anatomy and Physiology 2. Consent 2. Reproduction 3. Privacy and Bodily Integrity Key Concept 5. Skills for Health 3. Puberty 4. Safe Use of Information and and Well-being 4. Body Image Communication Technologies (ICTs) 1. Norms and Peer Influence on Sexual Behavior 2. Decision-making 3. Communication, Refusal and Negotiation 4. Finding Help and Support

Key Concept: 1. Relationships

- 1. Families
- 2. Friendship, Love and Romantic Relationships
- 3. Inclusion, Tolerance and Respect
- 4. Long-term Commitments and Parenting



Basic concepts of the Comprehensive Sexuality Education Technical Guideline– Adaptation of Global Standards for Potential Use in China (First Edition)



Key concept 1: Relationships

Topic 1.1 Families

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: There are many kinds of families that exist around the world

- ▶ know that there are many different kinds of families around the world (knowledge);
- know characteristics of different kinds of families (knowledge);
- ▶ identify different kinds of families in the world (knowledge);
- acknowledge that all kinds of families are valuable (attitudinal);
- respect different kinds of families (attitudinal);
- be able to show respect for different kinds of families in appropriate ways (skill);
- be able to show respect for children from different kinds of families (skill).

Key idea: Family members have different roles and responsibilities

- know that each family member has a different role and responsibility within the family (knowledge);
- know family roles and responsibilities of oneself and other family members (knowledge);
- be willing to take on one's family role and assume family responsibilities (attitudinal);
- acknowledge that family members have different roles and responsibilities, but they should be equal and respect each other (attitudinal);
- be able to take on one's family role and assume responsibilities accordingly (skill).

Key idea: Gender inequality is often reflected in the roles and responsibilities of family members

- know the differences in roles and responsibilities of men and women within the family (knowledge);
- illustrate examples of how these differences can affect the behaviors of family members (knowledge);
- acknowledge that gender inequality impacts the roles and responsibilities within the family (attitudinal);
- recognize that promoting gender equality in the roles and responsibilities within the family can promote the gender equality in the society (attitudinal);
- ▶ be able to analyze whether the roles and responsibilities of one's own and other family members are based on gender equality (skill);
- ▶ be able to suggest how to identify the roles and responsibilities of family members based on gender equality (skill).



Key concept 1: Relationships

Key idea: Families play an important role in teaching values to children

- know the concept of values (knowledge);
- list values that they and their family members care about (knowledge);
- acknowledge that family members' values affect children's values (attitudinal);
- be able to reflect one's values in their lives (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Parents/guardians and other family members help children acquire values and guide and support their children's decisions

- know how parents/guardians and other family members help children acquire values (knowledge);
- know how parents/guardians and other family members support their children's decisions (knowledge);
- acknowledge that parents/guardians and other family members influence their children's decisions (attitudinal);
- be able to analyze how family values guide children in decision-making (skill);
- be able to analyze where family values have an impact on children (skill).

Key idea: Parents/guardians and other family members can promote gender equality through their roles and responsibilities

- b distinguish the roles, rights and responsibilities of different family members (knowledge);
- ▶ learn about ways that family members can support gender equality through their roles and responsibilities (knowledge);
- acknowledge that all family members can promote gender equality within the family (attitudinal);
- be able to take actions to support gender-equitable roles, rights, and responsibilities within the family (skill).

Key idea: Health and illness can affect how a family functions, as well as the capacities and responsibilities of its members

- learn about how health and illness can affect roles, responsibilities and capacities of family members (knowledge);
- recognize that health and illness can affect how a family function (attitudinal);
- be able to express care and support for family members affected by illness and in need of care (skill):
- be able to demonstrate empathy for families affected by illness (skill).

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Key concept 1: Relationships

Learning objectives for the junior high school stage (12-15 years)

Key idea: Growing up means taking responsibility for oneself and others

- know that one takes on more responsibilities for themselves and others as they grow older (knowledge);
- recognize that as they grow up, their worlds and affections expand beyond the family, and friends and peers become particularly important (attitudinal);
- be able to assess one's relationships with others and take on more responsibilities (skill).

Key idea: Conflicts and misunderstandings between parents/guardians and children are common, especially during puberty, and are usually resolvable

- know the common conflicts and misunderstandings between parents/guardians and children (knowledge);
- know the ways to resolve conflicts or misunderstandings between parents/guardians and children (knowledge);
- recognize that conflicts and misunderstandings between parents/guardians and children are common, especially during puberty, and believe that these conflicts and misunderstandings are resolvable (attitudinal);
- be able to resolve conflicts and misunderstandings with parents/guardians in appropriate ways (skill).

Key idea: Love, cooperation, gender equality, mutual caring and mutual respect are important for healthy family relationships and functioning

- know the characteristics of healthy family relationships and functioning (knowledge);
- acknowledge that these characteristics are important to healthy family relationships and functioning (attitudinal);
- be able to assess one's contributions towards healthy family relationships and functioning (skill);
- be able to express love, care and respect to family members in daily life, and build collaborative and gender-equitable family relationships (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: One's family roles and responsibilities will change as one grows up

- know that one's family roles and responsibilities will gradually change as one grows up (knowledge);
- recognize that it is common to have conflicts and misunderstandings with family members as one's family roles and responsibilities gradually change, and believe that these conflicts and misunderstandings are resolvable (attitudinal).



Key concept 1: Relationships

- ▶ be able to demonstrate empathy when facing conflicts and misunderstandings among family members (skill);
- be able to resolve conflicts and misunderstandings with family members in appropriate ways (skill).

Key idea: Sexual relationships and health issues can affect family relationships

- ▶ learn about the changes that may occur in family members' roles and relationships when a family member discloses sensitive information (knowledge);
- ► recognize that family members' roles and relationships may change when a family member discloses or shares information related to sexual relationships or health (attitudinal);
- ▶ be able to analyze how family members' roles and relationships may change when one discloses or shares information related to sexual relationships or health (skill).

Key idea: There are support systems that young people and family members can turn to when faced with challenges related to sharing or disclosure of information related to sexual relationships and health issues

- know what support family members can provide to a young person who discloses or shares information related to sexual relationships or sexual health (knowledge);
- know the external assistance families can seek when a young person has difficulties in disclosing or sharing information related to sexual relationships or sexual health (knowledge);
- believe that families are better able to overcome challenges when they support one another with mutual respect and actively seek help (attitudinal);
- ▶ be able to find valid and reliable resources in the community that can provide relevant support and assistance (skill);
- ▶ be able to better support the sexual health of oneself and other family members by proposing ways to improve resources in the community (skill).

Topic 1.2 Friendship, Love and Romantic Relationships

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: There are many kinds of friendships

- know the kinds of friendships (knowledge);
- recognize that all kinds of friendships shall be valued (attitudinal);
- be able to establish different kinds of friendships (skill).

Key idea: Gender, age, physical appearance, disability or health status, etc. should not get in the way of becoming friends

understand what friendship is (knowledge);

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Key concept 1: Relationships

- appreciate that friendship is an important personal relationship which should be cherished (attitudinal);
- recognize that gender, age, physical appearance, disability or health status, etc. should not be barriers to friendship (attitudinal);
- ▶ be able to develop friendships regardless of gender, age, appearance, disability, health conditions, etc. (skill).

Key idea: Friendships are based on trust, equality, respect, empathy, sharing and solidarity

- describe key components of healthy friendships (knowledge);
- acknowledge that healthy friendships are based on the above key components (attitudinal);
- be able to build friendships based on the above key components (skill);
- ▶ be able to demonstrate trust, equality, respect, empathy, sharing and solidarity in friendship (skill).

Key idea: Relationships involve different kinds of love and love can be expressed in many ways

- know different kinds of love and ways that love can be expressed (knowledge);
- acknowledge that love can be expressed in different ways (attitudinal);
- be able to express love to peers within a friendship (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: There are healthy and unhealthy relationships

- ▶ illustrate examples of characteristics of healthy and unhealthy relationships (knowledge);
- know ways to build healthy personal relationships (knowledge);
- acknowledge that there are healthy and unhealthy relationships (attitudinal);
- be able to develop and maintain healthy relationships (skill);
- be able to cope with unhealthy personal relationships in appropriate ways (skill);
- be able to seek help from a trusted adult when encountering problems in personal relationships (skill).

Key idea: Healthy friendships and love help people feel positive about themselves

- know the benefits of healthy friendships and love (knowledge);
- acknowledge that healthy friendships and love can help people feel good (attitudinal);
- acknowledge that healthy friendship and love are to be cherished (attitudinal);
- ▶ be able to express healthy friendships and love in ways that make people feel good about themselves (skill);
- be able to develop and maintain healthy friendships and love (skill).



Key concept 1: Relationships

Key idea: Friendship and love can be expressed differently as people grow up

- understand that the way one expresses friendship and love to others will change as one is growing up (knowledge);
- acknowledge that there are many ways to express friendship and love to another person (attitudinal);
- be able to express friendship and love to others in different ways as one grows older (skill).

Key idea: Inequality within relationships negatively affects personal relationships

- understand ways that inequality within relationships affects personal relationships (knowledge);
- know how equitable roles between people can contribute to a healthy relationship (knowledge);
- acknowledge that equality within relationships is essential for maintaining healthy relationships (attitudinal);
- be able to get along with others as equals in personal relationships (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Friends can influence one another positively and negatively

- ▶ know that friends can influence one another positively and negatively (knowledge);
- recognize that friends can positively and negatively influence each other' behavior (attitudinal);
- be able to respond to negative influences from friends in appropriate ways (skill);
- be able to constantly reflect on how one and one's friends influence each other positively and negatively and respond in appropriate ways (skill).

Key idea: There are different kinds of relationships

- know different kinds of relationships (knowledge);
- ▶ Distinguish between emotions associated with friendship, infatuation, love and sexual attraction (knowledge);
- Know that close relationships can sometimes become sexual and how that happens (knowledge);
- recognize that some relationships can become sexual and that this is normal (attitudinal);
- ▶ be able to get to grips with ways of managing emotions associated with different kinds of relationships (skill).

Key idea: Romantic relationships can be strongly affected by inequality and differences in power

- know how inequality and differences in power can negatively affect romantic relationships (knowledge);
- analyze how gender norms and gender stereotypes can impact romantic relationships (knowledge);

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Key concept 1: Relationships

- ▶ learn that gender norms and gender stereotypes can lead to intimate partner violence (knowledge);
- recognize that inequality and imbalance in power within relationships can be harmful to romantic relationships (attitudinal);
- ▶ be able to reflect on inequality and imbalance of power within relationships and act upon it appropriately (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: There are healthy and unhealthy sexual relationships

- compare characteristics of healthy and unhealthy sexual relationships (knowledge);
- perceive that there are healthy and unhealthy sexual relationships (attitudinal);
- be able to avoid unhealthy sexual relationships (skill);
- ▶ be able to identity trusted adults and seek help if one is in an unhealthy sexual relationship (skill).

Key idea: There are different ways to express affection and love as one matures

- know a range of ways to express affection and love within healthy sexual relationships (knowledge);
- recognize that sexual intercourse is not a requirement for expressing affection and love (attitudinal);
- be able to express affection and love to others in appropriate ways (skill).

Topic 1.3 Inclusion, Tolerance and Respect

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Every human being is unique, can contribute to society and has a right to be respected

- know what fairness, equality and dignity mean (knowledge);
- illustrate examples of ways that all human beings can contribute to society regardless of their differences (knowledge);
- know the harm caused to others by making fun of or teasing them (knowledge);
- recognize that every human being is unique and valuable and has a right to be treated with dignity and respect (attitudinal);
- be able to show inclusion, tolerance, and respect for others in life (skill).



Key concept 1: Relationships

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Stigma and discrimination are harmful

- understand stigma and discrimination, and recognize their harm to individuals, families and society (knowledge);
- understand self-inflicted discrimination and its consequences (knowledge);
- know the mechanisms and resources available to assist people experiencing stigma and discrimination (knowledge);
- acknowledge the importance of inclusion, tolerance and respect for others (attitudinal);
- ▶ recognize the importance and necessity of reaching out to a trusted adult for help in the process of reducing and eliminating self-discrimination (attitudinal);
- be able to provide support for people who are stigmatized or discriminated against (skill);
- be able to seek professionals for help in reducing and eliminating self-discrimination (skill).

Key idea: It is disrespectful, hurtful, and even illegal to harass or bully anyone based on their social status, economic status, origin, ethnicity, health status, physical appearance, gender identity, gender expression, sexual orientation, or other differences

- explain the meaning of harassment and bullying (knowledge);
- know why harassing or bullying others is disrespectful, hurtful, and even illegal regardless of any difference (knowledge);
- acknowledge that everyone has a responsibility to speak out against bullying and harassment based on differences (attitudinal);
- be able to respond to and stop harassment and bullying based on differences in various ways (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Stigma and discrimination on the grounds of differences are disrespectful, harmful to well-being, and a violation of human rights

- understand the concepts of stigma, discrimination, bias, prejudice, intolerance and exclusion (knowledge);
- know negative consequences of stigma and discrimination on people's sexual and reproductive health and rights (knowledge);
- acknowledge that everyone has a responsibility to defend people who are being stigmatized or discriminated against (attitudinal);
- ▶ appreciate the importance of inclusion and tolerance, non-discrimination and respect for diversity (attitudinal);
- be able to seek support if one or others are experiencing stigma and discrimination (skill);
- be able to speak out for inclusion, non-discrimination and respect for diversity (skill).

Key concept 1: Relationships

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Challenge stigma and discrimination and promote inclusion, non-discrimination and diversity

- analyze how stigma and discrimination impact negatively upon individuals, families, communities and societies (knowledge);
- understand China's laws and regulations against stigma and discrimination (knowledge);
- acknowledge that it is important to challenge stigma and discrimination against those perceived to be "different" (attitudinal);
- be able to express support for someone being stigmatized and discriminated against (skill);
- ▶ be able to advocate against stigma and discrimination and promote inclusion, non-discrimination, and respect for diversity (skill).

Topic 1.4 Long-term Commitments and Parenting

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: There are different forms of marriage

- know the concept of marriage (knowledge);
- know the different forms of marriage, including at present and in history (knowledge);
- know that divorce or the death of a partner can lead to the end of a marriage (knowledge);
- acknowledge that it is the individual's right to enter into and remain in a marriage or not (attitudinal);
- be able to show respect for children from different forms of marriage (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Child, early, forced, and mercenary marriages are harmful and illegal in the majority of countries including China

- ▶ know the concepts of child, early, forced and mercenary marriage (knowledge);
- know negative consequences of child, early, forced and mercenary marriages on the child, the family and society (knowledge);
- acknowledge that child, early, forced and mercenary marriages are harmful (attitudinal);
- ▶ be able to identify a trusted adult/institution (including women's federation and public security authority) to speak to if at risk of child, early, forced, and mercenary marriages (skill).

Key idea: Long-term commitments, marriage and parenting vary and are shaped by society, culture and laws

list key features of long-term commitments, marriage and parenting (knowledge);



Key concept 1: Relationships

- understand ways that society, culture and laws affect long-term commitments, marriage and parenting (knowledge);
- acknowledge that all people should be able to decide if, when and whom to marry (attitudinal);
- be able to express one's view on long-term commitments, marriage and parenting (skill).

Key idea: Culture and gender roles impact parenting

- know ways that culture and gender roles impact upon parenting (knowledge);
- acknowledge that culture and gender roles may impact parenting (attitudinal);
- be able to analyze parents' good practices and less satisfactory practices in the child-rearing (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: There are many responsibilities that come with long-term commitments and marriage

- know key responsibilities of long-term commitments and marriage (knowledge);
- summarize the key characteristics of long-term commitments and successful marriages (knowledge);
- acknowledge the importance of love, tolerance, equality and respect in long-term commitments and successful marriages (attitudinal);
- be able to express one's understanding of long-term commitments and marriages (skill).

Key idea: People become parents in various ways and parenthood involves many different responsibilities

- know responsibilities of parents (knowledge);
- compare the different ways that adults can become parents (knowledge);
- ▶ acknowledge that everyone should be able to decide whether or not and when to become a parent, including people with disabilities, and people living with HIV and AIDS (attitudinal);
- be able to consider if and when one will become a parent in the future and the responsibilities this entails (skill).

Key idea: Child, early, forced and mercenary marriages and unintended parenting can lead to negative health and social consequences

- know the health and social consequences of child, early, forced and mercenary marriages and unintended parenting (knowledge);
- recognize that child, early, forced and mercenary marriages are illegal, and parenting by unintended pregnancy is harmful (attitudinal);
- ▶ be able to seek help and support to address difficulties and challenges posed by child, early, forced and mercenary marriages and parenting due to unintended pregnancies (skill);
- ▶ be able to reflect on the social and cultural roots of child, early, forced, and mercenary marriages (skill).

Key concept 1: Relationships

Key idea: Resolutely resist the crime of trafficking in women

- know that the crime of trafficking in women still exists (knowledge);
- know that trafficking in women is a serious violation of women's human rights (knowledge);
- understand China's laws and regulations prohibiting trafficking in women (knowledge);
- recognize that preventing and combating trafficking in women is an important measure to protect women's rights and interests (attitudinal);
- be able to reflect on the social and cultural roots of the existence of trafficking in women (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Long-term commitments and marriage can be rewarding and challenging

- ▶ know the rewards and challenges of long-term commitments and marriage (knowledge);
- acknowledge that both spouses have the right to continue their education, seek career development, and pursue their own interests (attitudinal);
- ▶ be able to consider the challenges one may face in one's future long-term commitment and marriage and try to plan accordingly (skill).

Key idea: There are many factors that influence if, why, and when people decide to give birth to or adopt children

- know the different factors that influence people's decisions to give birth to or adopt children (knowledge);
- understand China's laws and regulations regarding giving birth to or adopting children (knowledge);
- acknowledge that some people may want to become parents; some people may not want to; not everyone is able to become a parent; and some people may have become a parent without wanting to (attitudinal);
- acknowledge that people are influenced by many factors in whether and when they give birth to children, and whether they adopt children (attitudinal);
- ▶ be able to critically assess the influences on one's decision about whether, why, and when to give birth to or adopt children (skill).
- ► Key idea: Children have a variety of needs that parents/guardians have a responsibility to fulfill

know key physical, emotional, economic, health, safety and educational needs of children and associated responsibilities of parents (knowledge);

- illustrate ways that children's well-being can be affected by unhealthy family relationships (knowledge);
- understand provisions of China's laws regarding parents/guardians (knowledge);
- perceive the importance of healthy family relationships in rearing, educating and protecting children (attitudinal);
- be able to communicate one's physical, emotional, economic, health, safety, and educational needs to parents/guardians (skill).

Key Concept: 2. Values, Rights, Culture, Media, and Sexuality

- 1. Values and Sexuality
- 2. Rights and Sexuality
- 3. Culture, Society, Law, and Sexuality
- 4. Media and Sexuality



Key concept 2: Values, Rights, Culture, Media, and Sexuality

Topic 2.1 Values and Sexuality

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Values are strong beliefs held by individuals, families, and communities about important issues

- know the characteristics of values (knowledge);
- know important personal values such as equality, respect, acceptance and tolerance, etc. (knowledge);
- explain how values guide decisions about life and relationships (knowledge);
- recognize that individuals, peers, families and communities may have different values (attitudinal);
- be able to express important values they hold (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Values imparted by families and communities influence people's understanding about sex and sexuality, as well as their personal behavior and decision-making

- understand sex and sexuality (knowledge);
- know that a person's values and attitudes influence their understanding of sexuality (knowledge);
- know sources of one's values and attitudes (knowledge);
- know values that affect gender role expectations and gender equality (knowledge);
- recognize that values and attitudes of families and communities impact personal behavior and decision-making (attitudinal);
- be able to perceive that one's values are influenced by their family and community (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Learn about one's own important values, beliefs, and attitudes, and how to stand up for them

- describe one's own personal values in relation to a range of sexuality and reproductive health issues (knowledge);
- identify how one's important personal values, beliefs, and attitudes are shaped (knowledge);
- recognize the importance of being tolerant of and having respect for different values, beliefs and attitudes (attitudinal);
- be able to take actions that are guided by important personal values (skill);
- be able to perceive that parents/guardians can influence their children's values through education and behaviors, and to defend the right values in appropriate ways (skill).

Key concept 2: Values, Rights, Culture, Media, and Sexuality

Key idea: Get to know how personal values influence oneself and others

- know how personal values affect their own decisions and behaviors (knowledge);
- understand how one's personal values affect the rights of others (knowledge);
- recognize that personal values guide one's behaviors (attitudinal);
- recognize that one should defend the rights of others when their personal values affect them (attitudinal);
- ▶ be able to perceive that society and culture affect personal values, and to defend the right values (skill).

Key idea: As children grow up, they develop their own values which may differ from their parents/guardians

- differentiate between values that they hold, and that their parents/guardians hold (knowledge);
- acknowledge that it is normal for one's values to differ from those of their parents/guardians (attitudinal);
- be able to deal with conflicts between family members due to differing values in appropriate ways (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Learn about one's own values, beliefs and attitudes and adopt sexual behaviors that are beneficial to their health and well-being

- know whether one's sexual and reproductive health behaviors are consistent with their personal values, beliefs, and attitudes (knowledge);
- appreciate how personal values, beliefs and attitudes influence one's sexual behaviors (attitudinal);
- be able to adopt sexual behaviors that are beneficial to one's health and well-being based on the values that are important to him/her (skill).

Key idea: As children grow up, they develop their own values about sexuality which may differ from their parents/guardians

- illustrate the similarities and differences between values that they hold, and that their parents/ guardians hold about sexuality (knowledge);
- ▶ know the changes in one's sexual values as he/she grows up and the extent to which these changes are influenced by the sexual values of their parents/guardians (knowledge);
- acknowledge that some of one's sexual values may differ from those of their parents/guardians (attitudinal);
- ▶ be able to resolve conflicts between family members due to differing sexual values in appropriate ways (skill).

Key concept 2: Values, Rights, Culture, Media, and Sexuality

Topic 2.2 Rights and Sexuality

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Children enjoy various rights

- know what right is (knowledge);
- know the terms and basic concepts of the rights to survival, development, protection, and participation (knowledge);
- know that every child is equally entitled to all rights under the law (knowledge);
- recognize that children's rights are not affected by the ethnicity, race, gender, household registration, personality, interests, religious belief, education, family status, occupation or physical and mental health status of their own and their parents/guardians (attitudinal);
- respect the decisions of others (attitudinal);
- be able to make simple decisions related to one's own life and learning (skill);
- ▶ be able to show support for children's rights to survival, development, protection, and participation (skill).

Key idea: Everyone has human rights and all are equal in respect of rights

- know the basic meaning of human rights (knowledge);
- acknowledge that everyone has equal human rights and should be respected (attitudinal);
- be able to express support for people's human rights (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Know one's rights

- know one's rights (knowledge);
- Learn about the institutions responsible for protecting children's rights (knowledge);
- Value one's rights and those of others (attitudinal);
- acknowledge that children have sexual rights (attitudinal);
- be able to identify whether one's rights are violated (skill);
- be able to seek help when one's rights are violated (skill).

Key idea: Human rights outlined in China's national laws and international agreements

- know the concept of human rights, and know the universality of human rights (knowledge);
- know national laws that include the protection of human rights and children's rights (knowledge);
- know children's rights as outlined in some international conventions or agreements signed by the Chinese government (knowledge);
- recognize the importance of universal human rights in safeguarding social harmony (attitudinal);
- be able to question and oppose when experiencing or witnessing violations of individual human rights (skill);
- be able to express one's determination to uphold national laws and the will to support universal human rights (skill).

Key concept 2: Values, Rights, Culture, Media, and Sexuality

Learning objectives for the junior high school stage (12-15 years)

Key idea: Everyone enjoys sexual and reproductive health rights

- understand the concepts of sexual and reproductive health rights (knowledge);
- know national laws and regulations that impact sexual and reproductive health rights (knowledge);
- know which groups in society are particularly vulnerable to neglect and rights violation (knowledge);
- identify situations in which sexual and reproductive health rights are violated (knowledge);
- recognize that sexual and reproductive health rights are closely related to life (attitudinal);
- acknowledge that sexual and reproductive health rights must not be violated (attitudinal);
- recognize that the rights of certain groups in society are particularly vulnerable to neglect and violation (attitudinal);
- be able to express support to those whose rights are infringed when experiencing or witnessing human rights violations against certain groups (skill);
- ▶ be able to respect the sexual and reproductive health rights of all people in daily life in the family, school and community (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Sexual and reproductive health rights must not be ignored and violated

- be familiar with the concepts of sexual and reproductive health rights (knowledge);
- know China's laws and regulations regarding sexual and reproductive health rights (knowledge);
- acknowledge that no one's sexual and reproductive health rights can be ignored or violated (attitudinal);
- identify situations in which sexual and reproductive health rights are violated (skill);
- identify groups in society whose sexual and reproductive health rights are particularly vulnerable to neglect and violation (skill);
- be able to take actions that promote the realization of sexual and reproductive health rights under current legal policies (skill).

Key idea: Promote human rights, including sexual and reproductive health rights

- know what constitutes violations of sexual and reproductive health rights (knowledge);
- list various efforts made by people around the world to defend and promote sexual and reproductive health rights (knowledge);
- explore ways to promote human rights among peers, and in the family, school, community and society (knowledge);
- acknowledge that sexual and reproductive health rights are an important part of human rights (attitudinal);

2 Key concept 2: Values, Rights, Culture, Media, and Sexuality

- acknowledge the importance of promoting sexual and reproductive health rights, and the right to make decisions concerning sexuality and reproduction free from discrimination, coercion or violence (attitudinal);
- be able to advocate for national laws and regulations that support sexual and reproductive health rights (skill);
- be able to advocate for the promotion and protection of human rights in family planning policies and related services (skill);
- be able to take actions to promote the realization of sexual and reproductive health rights (skill).

Topic 2.3 Culture, Society, Law and Sexuality

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: There are many sources of information that help people learn about themselves, including their feelings and their bodies

- ▶ list sources of information that help people learn about themselves, including their feelings and their bodies (knowledge);
- know that age, gender, and cultural factors can all influence how people perceive themselves, including their feelings and bodies (knowledge);
- acknowledge that values guide people's understanding of themselves, including their feelings and bodies (attitudinal);
- be able to talk with a trusted adult and ask questions about oneself, including their feelings and body (skill).

Key idea: There are many factors that influence one's self-esteem

- know the concept of self-esteem (knowledge);
- understand in what aspects children's self-esteem can be manifested (knowledge);
- acknowledge that self-esteem is influenced by different factors (attitudinal);
- be able to maintain self-esteem while objectively evaluating one's own characteristics and abilities (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Culture influences people's understanding of sexuality

- know that diverse cultures exist in China and the world (knowledge);
- understand that different cultures have different values (knowledge);
- know different rites of passage to adulthood that are local and across different cultures (knowledge);
- illustrate examples of how cultures related to sexuality have evolved over time (knowledge);

Key concept 2: Values, Rights, Culture, Media, and Sexuality

- recognize that different cultures influence people's understanding of sexuality (attitudinal);
- ▶ be able to perceive and analyze how the local culture influences one's understanding of sexuality and respond in appropriate ways (skill).

Key idea: Society influences people's understanding of sexuality

- know that there is a rich variety of social norms related to sexuality in different countries around the world (knowledge);
- recognize that people living in different societies may have different understandings of sexuality (attitudinal);
- acknowledge the diversity of perceptions and social norms related to sexuality (attitudinal);
- respect diverse practices and universal human rights related to sexuality (attitudinal);
- be able to perceive and analyze how local social norms influence one's own understanding of sexuality and respond in appropriate ways (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Social and cultural factors influence people's acceptance of sexual behavior, and these factors evolve over time

- understand the concepts of social and cultural norms (knowledge);
- know social and cultural norms related to sexuality (knowledge);
- illustrate examples of how social and cultural norms related to sexuality have evolved over time (knowledge);
- examine social and cultural norms that impact sexual behavior and how they change over time (knowledge);
- recognize that social and cultural norms can change over time (attitudinal);
- be able to question social and cultural norms that impact sexual behavior and respond in appropriate ways (skill).

Key idea: Law influences people's perceptions and attitudes about sexuality-related issues

- learn about China's laws related to sexuality (knowledge);
- understand the legislative principles and philosophy behind specific legal provisions on sexuality (knowledge);
- ▶ learn about how law influences people's perceptions and attitudes about sexuality-related issues (knowledge);
- recognize that law influences people's perceptions and attitudes about sexuality-related issues (attitudinal);
- comply with China's laws related to sexuality (skill);
- ▶ attempt to propose specific plans to make China's sexuality-related laws more comprehensive to further promote the popularization of sexuality education and gender equality (skill).

Key concept 2: Values, Rights, Culture, Media, and Sexuality

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Further learn about and reflect on how social, cultural, and legal norms impact sexual behavior, and form and develop one's own perspectives based on this

- compare social, cultural and legal norms that positively and negatively influence sexual behavior and sexual health (knowledge);
- familiarize with the process and purpose of rites of passage locally and in different cultures (knowledge);
- recognize the importance of developing one's own perspectives on sexual behavior (attitudinal);
- be able to respond in appropriate ways when social, cultural and legal norms influence one's personal views on sexuality and sexual behavior (skill).

Topic 2.4 Media and Sexuality

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Information provided through different types of media may be true or false

- list different forms of media (knowledge);
- discuss examples of information provided through media that is either true or false (knowledge);
- recognize that not all information provided by media is true and accurate (attitudinal);
- be able to identify the authenticity of information disseminated by various media with the help of parents and teachers (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Media can significantly influence values, attitudes, and norms about sexuality and gender

- list different types of media (knowledge);
- learn about the communication characteristics and use of different media (knowledge);
- analyze the cases of how individuals of different genders and personal relationships are represented by media (knowledge);
- describe the impact of media upon personal values, attitudes and behaviors related to sexuality and gender (knowledge);
- recognize the power of media to influence values, attitudes and behaviors related to sexuality and gender (attitudinal);
- be able to perceive and analyze the negative meanings represented by gender stereotypes in the media and the possible bias as a result of that and respond in appropriate ways (skill).

Key concept 2: Values, Rights, Culture, Media, and Sexuality

Learning objectives for the junior high school stage (12-15 years)

Key idea: Unrealistic or exaggerated representations of sexuality and sexual relationships in some media can influence our perceptions of gender and self-esteem

- discuss unrealistic or exaggerated representations of sexuality and sexual relationships in the media (knowledge);
- know the relationship between unrealistic or exaggerated representations of sexuality and sexual relationships in the media and self-esteem (knowledge);
- analyze how unrealistic or exaggerated representations in the media reinforce gender stereotypes (knowledge);
- acknowledge that media influences people's perceived standards of beauty and can lead to gender stereotypes (attitudinal);
- be able to perceive the impact of unrealistic or exaggerated representations of sexuality and sexual relationships on people's gender awareness and self-esteem and respond in appropriate ways (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Challenging negative and inaccurate media portrayals of gender can influence behavior positively and promote gender equality

- know how media can promote safer sex and gender equality (knowledge);
- recognize the potential power of media to positively influence perceptions of sexuality, sexual relationships and gender (attitudinal);
- be able to critically assess the potential positive or negative impact of media messages about sexuality and sexual relationships (skill);
- be able to question gender stereotypes in the media and identify and clarify inaccurate media portrayals of sexuality and sexual relationships (skill).

Key Concept: 3. Gender

- **1. The Social Construction of Gender and Gender Norms**
- 2. Gender Equality, Stereotypes and Bias
- 3. Gender-based Violence





Topic 3.1 The Social Construction of Gender and Gender Norms

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Learn about the difference between biological sex and gender

- understand the concepts of biological sex and gender and describe the differences between the two (knowledge);
- respect people of the same and different sex (attitudinal);
- be able to maintain awareness of gender equality in daily life in the family, school and community (skill);
- be able to perceive and express how one feels about their biological sex and gender in daily life in the family, school, and community (skill).

Key idea: Families, schools, individuals, peers, communities and the media are sources of information about biological sex and gender

- know various sources of information about biological sex and gender (knowledge);
- acknowledge that perceptions about biological sex and gender are influenced by information of many different sources (attitudinal);
- be able to categorize one's own sources of information about biological sex and gender (skill).

Key idea: Learn about gender identity and gender expression

- learn about the concepts of gender identity and gender expression, and the differences between the two (knowledge);
- know the diversity of gender expression (knowledge);
- list the impacts of gender identity on one's life (knowledge);
- acknowledge that children are entitled to explore their own gender (attitudinal);
- respect people of all genders (attitudinal);
- be able to seek help from a trusted adult for any confusion in the process of developing one's gender identity (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Social and cultural norms are some of the factors which influence gender roles

- understand the concept of gender roles (knowledge);
- illustrate examples of how social and cultural norms can influence gender roles (knowledge);
- acknowledge that many factors impact gender roles (attitudinal);
- be able to reflect on social and cultural norms that impact on how people view gender roles, and respond in appropriate ways (skill).

Key idea: Everyone has a unique experience of gender identification, which should be respected.

conceptual understanding of gender identity and gender traits (knowledge);

- learn about the diversity of gender traits (knowledge);
- explain that someone's gender identity may differ from their biological sex (knowledge);
- recognize that everyone has a gender identity (attitudinal);
- acknowledge that puberty is an important period when one develops their gender identity (attitudinal)
- appreciate their gender traits and accept their gender identity (attitudinal);
- be able to show respect for others' gender identity and gender traits in daily life in the family, school and community (skill);
- be able to seek help from professionals or institutions when having confusions in the process of gender identity development (skill).

Key idea: Human sexual orientations are diverse

- understand the concept of sexual orientation (knowledge);
- learn about the relationship among biological sex, gender identity, gender expression and sexual orientation (knowledge);
- show respect for others' sexual orientation (attitudinal);
- consider how the society should treat people of different sexual orientations equally (skill).

Key idea: Understand sexual minorities

- understand the concepts of homosexuality, bisexuality, transgender, intersex, etc. (knowledge);
- acknowledge that Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) people have human rights (attitudinal);
- respect LGBTI people (attitudinal);
- acknowledge that everyone can decide how to live their own life (attitudinal);
- be able to consider how to prevent discrimination against LGBTI people (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Gender roles and gender norms influence people's lives

- identify how gender norms shape identity, desires, practices and behavior (knowledge);
- analyze how gender norms and gender bias can be harmful and can negatively influence people's choices and behavior (knowledge);
- learn about the social norms that influence the image of individuals of different genders (knowledge);
- acknowledge that beliefs about gender norms are created by societies (attitudinal);
- acknowledge that gender roles and gender norms can change (attitudinal);
- be able to practice everyday actions to promote gender equality in the family, school and community (skill).



Key idea: Intimate relationships can be negatively affected by gender roles and gender stereotypes

- analyze the impact of gender roles and gender stereotypes on intimate relationships (knowledge);
- explain how violence in intimate relationships is strongly linked to gender roles and gender stereotypes (knowledge);
- acknowledge the impact of harmful gender roles and gender stereotypes on intimate relationships (attitudinal);
- be able to perceive gender stereotypes in intimate relationships and respond in appropriate ways (skill).

Key idea: understand the diversity of sexual orientation

- understand the concepts of diversity in gender and sexual orientation (knowledge);
- know that people's sexual orientation includes heterosexuality, homosexuality, bisexuality, and asexuality, etc. (knowledge);
- know the rights of persons with different sexual orientations (knowledge);
- learn about the Chinese government's stance on sexual orientation at important international conferences (knowledge);
- recognize that puberty is an important period to explore one's sexual orientation (attitudinal);
- show respect for people of different sexual orientations and their rights (attitudinal); be able to explore personal sexual orientation (skill);
- be able to positively recognize personal sexual orientation (skill);
- be able to actively seek help from professionals or institutions in the process of exploring sexual orientation (skill);
- be able to support, defend and safeguard LGBTI people in appropriate ways when their rights are violated (skill).

Key idea: Homophobia and transphobia are harmful to people of diverse sexual orientation and gender identity

- understand homophobia and transphobia (knowledge);
- analyze social norms that contribute to homophobia and transphobia and their consequences (knowledge);
- recognize that all people should be able to love who they want free from violence, coercion or discrimination (attitudinal);
- be able to provide support for people experiencing homophobia and transphobia (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Dare to challenge one's own and others' gender bias

▶ illustrate examples of gender bias against people of diverse biological sex, gender identity, gender expression and sexual orientation (knowledge);

- recognize that gender bias may be harmful to individuals (attitudinal);
- ritically assess their own level of gender bias and analyze gender bias within their community (skill);
- be able to propose effective measures to reduce and break down gender bias (skill);
- be able to appropriately respond when one or others are experiencing gender bias (skill).

Key idea: Gender has a profound impact on the establishment and functioning of social systems

- learn about links between social systems and gender (knowledge);
- acknowledge that gender has a profound impact on the establishment and functioning of various social systems (attitudinal);
- analyze mechanisms generating gender inequalities and consequences caused under current social systems (skill);
- be able to take actions to challenge systematic gender inequalities and engage in improving policies for gender equality (skill).

Key idea: LGBTI people can decide their way of life under the precondition of not harming themselves and others

- learn about the relationship between gender identity and gender role behavior (knowledge);
- learn about attitudes and practices towards LGBTI people around the world (knowledge);
- recognize that LGBTI people are entitled to decide their own way of life (attitudinal);
- be able to support everyone, including LGBTI people, to be free of stigma and discrimination through carrying out anti-discrimination activities (skill).

Key idea: Respect LGBTI people

- acknowledge that the majority of people in society are heterosexual and a minority are homosexual, and they enjoy equal rights (knowledge);
- recognize the importance of combating discrimination against LGBTI people (attitudinal);
- be able to analyze the discrimination that LGBTI people may experience and the impact on their daily life, and respond in appropriate ways (skill).

Topic 3.2 Gender Equality, Stereotypes and Bias

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Gender inequalities exist in families, schools, communities and society

- illustrate examples of people who are treated unfairly and unequally because of their gender (knowledge);
- describe how to promote gender equality in families, schools, communities and society (knowledge);
- recognize that unfair and unequal treatment of people of different genders is wrong and against their human rights (attitudinal);

Key concept 3: Gender

- recognize that it is important to respect the human rights of others, regardless of differences in gender (attitudinal);
- be able to advocate for creating a gender-equitable society in daily life in families, schools and communities (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Address gender inequality in families, schools, communities and society

- comprehend the concept of gender equality (knowledge);
- understand the concept of gender inequality (knowledge);
- describe the link between gender inequality and differences in power within families, schools, communities and society (knowledge);
- list negative consequences of gender inequality and power differences in relationships (knowledge);
- acknowledge that everyone has a responsibility to identify and overcome gender inequality (attitudinal);
- be able to promote gender equality in their relationships at home, school and in the community (skill).

Key idea: Gender stereotypes can bring gender bias and gender discrimination, and cause gender inequality

- understand the concepts of gender stereotypes, gender bias and gender discrimination (knowledge);
- understand that gender stereotypes have a strong negative influence on people's lifestyle (knowledge);
- acknowledge that gender differences may lead to exploitation, discrimination or unequal treatment, especially if people behave differently from the expected norm (attitudinal);
- be able to question the equality of gender roles and challenge practices that are unequal and harmful in daily life at home, school and in the community (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Gender stereotypes and gender bias impact how people of diverse gender identity and sexual orientation are treated and the choices they can make

- know how gender stereotypes and gender bias influence how people of diverse biological sex, gender identity and sexual orientation are portrayed and treated (knowledge);
- illustrate examples of gender bias and discrimination in all forms (knowledge);
- acknowledge the importance of treating all people equally (attitudinal);
- recognize that personal behaviors and decision-making with gender bias affect the realization of the rights of others (attitudinal);

- recognize that bias against persons that do not conform to gender norms can negatively impact their ability to make choices, including about their health; (attitudinal);
- treat people without gender bias and discrimination (skill);
- be able to perceive how personal values impact one's beliefs and possible gender bias and discrimination in daily life at home, school and in the community, and reflect on them in a timely manner (skill).

Key idea: Gender equality can promote equal decision-making about sexual behavior and life planning

- describe characteristics of gender equality within an intimate relationship and sexual relationship (knowledge);
- illustrate examples of how gender roles affect decisions about sexual behavior, contraceptive use and life-planning (knowledge);
- analyze how more gender equitable roles can contribute to a healthier intimate relationship and sexual relationship (knowledge);
- believe that gender equality is the gound of healthy intimate and sexual relationships (attitudinal);
- be able to build gender equitable relationships (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Gender inequality, social norms and power differences influence sexual behavior and may increase the risk of sexual coercion, sexual abuse and GBV

- ► Know how gender inequality and differences in power affect sexual behavior and risks of sexual coercion, sexual abuse and GBV (knowledge):
- acknowledge that gender inequality and power differences can impact sexual behaviors and the ability to make, and act on, safe choices (attitudinal);
- be able to access support or help others to do so if experiencing sexual coercion, sexual abuse or GBV (skill).

Topic 3.3 Gender-based Violence

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: All forms of GBV are wrong and a violation of human rights

- identify that GBV includes both physical and emotional violence, list examples of GBV in all forms, and identify spaces where GBV may occur (knowledge);
- acknowledge that all forms of GBV are a violation of human rights (attitudinal);
- be able to identify and talk to a trusted adult when someone they know is experiencing GBV or if they are concerned that the person might be experiencing GBV (skill);
- be able to actively seek help from a trusted adult when they are experiencing GBV to defend their rights (skill).

Key concept 3: Gender

Key idea: Gender stereotypes can be the cause of GBV

- explain how gender stereotypes contribute to bullying, discrimination, and other forms of GBV (knowledge);
- explain that GBV is a crime about power and dominance, not about one's inability to control
 one's sexual desire (knowledge);
- acknowledge that gender inequality and gender stereotypes may contribute to GBV (attitudinal);
- be able to take actions to advocate for gender equality and against GBV in daily life at home, school and in the community (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: All forms of GBV by adults, young people and people with special responsibilities for minors are a violation of human rights

- learn that sexual abuse and GBV, including violence and rape within an intimate relationship and sexual relationship, are crimes about power and dominance, not about one's inability to control one's sexual desire (knowledge);
- articulate specific strategies for identifying and reducing GBV (knowledge);
- understand the impact of violence on bystanders and witnesses (knowledge);
- acknowledge that GBV can be carried out by adults, young people, people with special responsibilities for minors, and is always wrong (attitudinal);
- when witnessing violence, be able to take measures to actively intervene while ensuring one's own safety (skill);
- be able to seek help from trusted adults and access GBV prevention services when needed (skill);
- be able to seek help from trusted adults and institutions that provide support to victims of GBV (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Violence in intimate and sexual relationships is harmful, and people who experience it should seek support

- learn that violence in intimate and sexual relationships can take in many different forms (knowledge);
- acknowledge that violence in intimate and sexual relationships is wrong and that it is possible to leave an abusive relationship (attitudinal);
- be able to seek support from trusted adults and institutions if one or others experience such violence (skill).

Key idea: Gender inequality, social norms, and power differences affect sexual intercourse and may increase the risk of sexual coercion, abuse, and other forms of GBV

 explain how gender inequality, social norms, and differences in power affect people's sexual intercourse and the potential risks of sexual coercion, abuse, and other forms of GBV (knowledge);

- acknowledge that gender inequality, social norms, and power differences affect people's sexual intercourse and their ability to make safe choices and adopt safe behaviors (attitudinal);
- be able to preserve evidence and use emergency contraception when one or others are subjected to GBV such as sexual coercion, solicitation, or abuse, and actively seek support or help others seek support (skill).

Key idea: Everyone has a responsibility to advocate for gender equality and speak out against human rights violations such as sexual abuse and other forms of GBV

- analyze examples of successful advocacy efforts to promote gender equality and reduce GBV (knowledge);
- recognize the importance of advocating for gender equality and speaking out against human rights violations in public and private spaces, including online (attitudinal);
- be able to advocate for gender equality and the elimination of GBV in daily life at home, school and in the community (skill).

Key Concept: 4. Violence and Staying Safe

- 1. Violence
- 2. Consent
- 3. Privacy and Bodily Integrity
- 4. Safe Use of Information and Communication Technologies (ICTs)



Key concept 4: Violence and Staying Safe

Topic 4.1 Violence

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: identify violence and bullying, and acknowledge that these are wrong and may even be illegal and criminal

- understand and distinguish between teasing, conflict, violence and bullying (knowledge);
- acknowledge that violence and bullying carried out by a family member, peer or another adult are wrong, and are never the victim's fault (attitudinal);
- be able to respond to violence and bullying among peers in appropriate ways while keeping oneself safe (skill).

Key idea: Identify child abuse, and acknowledge that this is wrong and may even be illegal and criminal

- understand the concept of child abuse (knowledge);
- acknowledge that child abuse is a violation of children' rights (attitudinal);
- acknowledge that being abused is not the fault of the child victim (attitudinal);
- be able to seek help from trusted adults when abused (skill).

Key idea: Identify child sexual abuse and acknowledge that it is a criminal offense

- understand child sexual abuse, including sexual solicitation and exploitation of children through the Internet (knowledge);
- ▶ learn that most sexual abuse against children are committed by acquaintances, even adults or family members whom the child trusts (knowledge);
- acknowledge that child sexual abuse is a violation of children's rights (attitudinal);
- be able to take self-protective actions when an adult attempts to commit sexual abuse (skill).

Key idea: Violence between parents or in other intimate relationships is wrong, and may even be illegal and criminal

- ▶ Learn about types of violence that can take place between parents or in other intimate relationships (knowledge);
- acknowledge that violence between parents or in other intimate relationships is wrong and harmful (attitudinal);
- ▶ be able to seek help and support from a trusted adult when witnessing such violence in their family (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: School bullying of any kind is not to be tolerated.

know the concept of school bullying (knowledge);

Key concept 4: Violence and Staying Safe

- know manifestations of school bullying and its relationship with gender, gender identity, gender expression, and sexual orientation (knowledge);
- know China's laws and regulations preventing and addressing school bullying (knowledge);
- acknowledge that school bullying of any kind is a violation of human rights and not to be tolerated (attitudinal);
- recognize the importance of seeking help and support when witnessing or experiencing school bullying (attitudinal);
- ▶ be able to seek help and support from a trusted adult when witnessing or experiencing school bullying (skill).

Key idea: Sexual abuse, sexual harassment and bullying are harmful and it is important to seek support if experiencing them

- list examples of sexual abuse, sexual harassment and bullying (knowledge);
- ▶ understand that sexual abuse, sexual harassment and bullying are illegal, and that there are many authorities and service-providers to assist children with such experiences (knowledge);
- recognize the importance of seeking help and support if experiencing sexual abuse, sexual harassment or bullying (attitudinal);
- demonstrate how to seek help and support when one or an acquaintance is experiencing sexual abuse, sexual harassment and bullying (skill);
- ▶ be able to respond effectively when they know someone is experiencing sexual abuse, sexual harassment and bullying (skill).

Key idea: Violence in intimate relationships is wrong and it is important to seek help if witnessing it

- understand intimate relationship (knowledge);
- identify violence in intimate relationships (knowledge);
- acknowledge that violence in intimate relationships is wrong and that children who witness it can benefit from actively seeking help (attitudinal);
- ▶ be able to seek help and support from a trusted adult and institution when one is experiencing such violence in the family (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Sexual abuse, sexual harassment and assault, and violence and bullying in intimate relationships are a violation of human rights

- analyze and contrast different kinds of violence (knowledge);
- clarify misconceptions related to violence (knowledge);
- acknowledge that sexual abuse, sexual harassment and assault, and violence and bullying in intimate relationships perpetrated by adults, young people or people in positions of power are always a violation of human rights, and are never the victim's fault (attitudinal);

Key concept 4: Violence and Staying Safe

- ▶ be able to report sexual abuse, sexual harassment and assault, and violence and bullying in intimate relationships (skill);
- be able to approach trusted adults and service-providers to and prevent sexual abuse, sexual harassment, and violence and bullying in intimate relationships, and to support victims (skill).

Key idea: Resolutely resist the crime of child trafficking

- know that the crime of child trafficking still exists in some places (knowledge);
- know China's laws and regulations on the prohibition of child trafficking (knowledge);
- ▶ learn that trafficked children can have their blood sample collected in the public security organizations, and find their lost relatives through DNA matching (knowledge);
- acknowledge that child trafficking is a serious violation of children's human rights (attitudinal);
- recognize that prohibitions of child trafficking are an important measure to protect the rights and interests of children (attitudinal);
- ▶ be able to reflect on the social and cultural roots of child trafficking and consider how to eliminate such phenomenon (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Everyone has a responsibility to advocate for people's health and well-being free from violence

- analyze successful examples of efforts to reduce different forms of violence including physical violence, psychological violence and sexual abuse (knowledge);
- appreciate the importance of speaking out against violence and human rights violations in all spaces (attitudinal):
- ▶ be able to advocate for a safe environment in daily life at home, school and in the community that ensures dignified and respectful treatment of everyone (skill).

Topic 4.2 Consent

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Everyone has the right to agree on who can touch their body, where, and in what way

- learn about the meaning of "body rights" (knowledge);
- recognize that everyone has "body rights" (attitudinal);
- acknowledge that everyone has the rights to agree or disagree on who can touch their body, where, and in what way (attitudinal);
- be able to defend one's "body rights" in daily life at home, school and in the community (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Everyone has the right to express consent or refusal with respect to physical boundaries

Key concept 4: Violence and Staying Safe

- understand what consent and refusal are (knowledge);
- ► recognize that everyone, regardless of gender, can express consent or refusal to physical contact based on personal physical boundaries (attitudinal);
- acknowledge the importance of obtaining consent for physical contact (attitudinal);
- be able to use effective communication in daily life at home, school and in the community to clearly express consent or refusal to physical contact (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Everyone has the right to be in control of what they will and will not do sexually, without violating the law, and should actively communicate and recognize "consent" or "refusal" from their partners

- describe what "consent" or "refusal" is, and explain its implications for sexual decision-making (knowledge);
- ▶ learn about relevant provisions of China's laws regarding the civil capacity of minors (knowledge);
- ▶ acknowledge the importance of expressing "consent" or "refusal" and understanding the "consent" or "refusal" of others (attitudinal);
- respect the "consent" or "refusal" of others (attitudinal);
- acknowledge the importance of expressing true intentions about sexuality (attitudinal);
- be able to express one's true intentions in relation to their physical boundaries regarding sexual behavior in daily life at home, school and in the community (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Voluntariness, consent, respect and freedom from mutual harm are critical for healthy and pleasurable sexual behavior with a partner

- learn that any sexual behavior against one's true will is sexual coercion (knowledge);
- understand what "consent" and "respect" really mean when discussing whether and how to have sex (knowledge);
- compare how men's and women's bodies are treated differently during sexual behavior (knowledge);
- analyze the double standards that may affect consensual sexual behavior for men and women (knowledge);
- ▶ acknowledge that voluntariness, consent, respect, and freedom from mutual harm are essential elements of a healthy sexual relationship (attitudinal);
- express consent and refusal (skill);
- ▶ be able to clearly interpret, accept and acknowledge the consent and refusal of others in daily life at home, school and in the community (skill).

Key concept 4: Violence and Staying Safe

Key idea: Learn about factors that can impact people's ability to acknowledge or use "consent" or "refusal"

- know what it means to listen carefully and confirm the "sexual consent" of the other person (knowledge);
- analyze the significance of listening to and confirming the "sexual consent" of the partner before considering whether to act (knowledge);
- contrast examples of situations where "sexual consent" is and is not acknowledged or given (knowledge);
- analyze factors that can affect the ability to give "sexual consent" or acknowledge "sexual consent" of the other person (knowledge);
- acknowledge that it is important to avoid factors that can impair "sexual consent" (attitudinal);
- be able to use "consent" or "refusal" when necessary (skill);
- be able to interpret and confirm the "consent" or "refusal" of the other person (skill).

Topic 4.3 Privacy and Bodily Integrity

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: It's very important to protect the private parts of the body

- know the private parts of the body and call them by their scientific names (knowledge);
- understand the need for privacy for oneself and others (knowledge);
- respect one's own and others' needs for privacy (attitudinal);
- ▶ be able to protect oneself and communicate with parents/guardians or trusted adults when faced with uncomfortable physical contact (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Unwanted sexual attention violates personal privacy

- understand that body privacy and private space become more important for children during puberty (knowledge);
- know what sexual attention is and what constitutes unwanted sexual attention in life (knowledge);
- acknowledge that unwanted sexual attention is a form of sexual harassment (attitudinal);
- acknowledge that unwanted sexual attention is a violation of children's privacy and body rights (attitudinal);
- ▶ be able to communicate effectively to protect one's privacy and resist unwanted sexual attention (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Everyone has the right to privacy and bodily integrity

understand the concepts of privacy and bodily integrity (knowledge);

Key concept 4: Violence and Staying Safe

- describe what is meant by the right to privacy and bodily integrity (knowledge);
- acknowledge that everyone has privacy rights and bodily integrity (attitudinal);
- express how they feel about their right to privacy and bodily integrity (skill);
- be able to take appropriate actions to protect one's personal privacy and bodily integrity (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Everyone's privacy and bodily integrity should be guaranteed and not be violated

- know the provisions of China's laws related to privacy and bodily integrity (knowledge);
- acknowledge that everyone's right to privacy and bodily integrity should be respected and protected (attitudinal);
- be able to take legal actions to defend one's rights when their privacy and bodily integrity are violated (skill).

Topic 4.4 Safe Use of Information and Communication Technologies (ICTs)

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: The Internet and social media are ways of accessing information and connecting with others, but they can also expose people, including children, to risks

- describe what the Internet and social media are (knowledge);
- list benefits and potential risks of the Internet and social media (knowledge);
- appreciate the social and cultural value of the Internet and social media, and recognize the risks involved (attitudinal);
- be able to tell trusted adults if one feels anxious, uncomfortable or scared when using the Internet and social media, and when necessary, complain and report through them (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Use the Internet and social media with caution

- ▶ learn about China's laws and regulations on the use of the Internet and social media by minors (knowledge);
- ▶ learn about the possible risks when sharing information on the Internet and social media (knowledge);
- acknowledge the importance of practicing caution when using the Internet and social media (attitudinal);
- be able to make cautious decisions about what information can be shared with whom on the Internet and social media (skill).

^{1.} For example, one sees some inappropriate pictures or videos, or is asked to do things against their will.

Key concept 4: Violence and Staying Safe

Key idea: Sexually explicit media is easily accessible through the Internet and social media, and can reinforce harmful gender stereotypes

- describe what sexually explicit media is (knowledge);
- know that sexually explicit media is easily accessible through the Internet and social media (knowledge);
- ▶ learn that sexually explicit media often presents men, women and sexual relationships unrealistically (knowledge);
- analyze how sexually explicit media reinforces gender stereotypes (knowledge);
- acknowledge that sexually explicit media can be misleading through inaccurate portrayals about men, women and sexual relationships (attitudinal);
- be able to identify sexually explicit media on the Internet and social media (skill);
- ▶ be able to talk to a trusted adult about sexually explicit media on the Internet and social media, and ask for help when necessary (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: The Internet and social media can be sources of unwanted sexual attention

- analyze how the Internet and social media can become sources of unwanted sexual attention (knowledge);
- acknowledge that there are ways to counter unwanted sexual attention coming from the Internet and social media (attitudinal);
- be able to stay safe when using the Internet and social media (skill).

Key idea: Sexually explicit media can be sexually arousing and potentially harmful

- analyze why sexually explicit media is so common (knowledge);
- summarize ways that sexually explicit media can be harmful, and where to report these harms and get help (knowledge);
- ▶ learn about China's relevant laws on the production, reproduction, distribution, dissemination or possession of sexually explicit media materials concerning minors (knowledge);
- recognize the importance of learning about China's relevant laws on the production, reproduction, distribution, dissemination or possession of sexually explicit media materials concerning minors (attitudinal);
- ▶ be able to express feelings and seek support from trusted adults when exposed to sexually explicit media (skill);
- ▶ be able to abide by the law and not participate in the production, reproduction, distribution, dissemination or possession of sexually explicit media concerning minors (skill);
- be able to avoid potential harm to oneself and other minors from sexually explicit media (skill).



Key concept 4: Violence and Staying Safe

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: The Internet and social media use can result in many benefits, but also has the potential for moral, ethical and legal situations that require careful navigation

- ▶ learn about China's laws and regulations regarding the use of the Internet and social media (knowledge);
- analyze strategies for using the Internet and social media safely, legally and respectfully (knowledge);
- ▶ illustrate examples of moral, ethical and legal violations in the Internet and social media (knowledge);
- ▶ acknowledge that use of the Internet and social media has many benefits for individuals, families and society, but can also trigger unsafe situations or violations of law (attitudinal);
- be able to make responsible use of the Internet and social media (skill).

Key idea: Sexually explicit media can satisfy sexual fantasies, but it can also trigger unrealistic expectations about sexual behavior, sexual response and body appearance

- learn about China's laws and regulations on preventing and combating sexually explicit media (knowledge);
- ▶ learn that sexually explicit media can fulfill sexual fantasies and stimulate personal sexual reaction (knowledge);
- explain ways that sexually explicit media can trigger unrealistic expectations about men, women, sexual behavior, sexual response and body appearance (knowledge);
- acknowledge that sexually explicit media can reinforce gender stereotypes and that some contents may normalize violent or non-consensual sexual behavior (attitudinal);
- ▶ be able to understand that sexually explicit media can negatively impact people's self-image, self-confidence, self-esteem and perception of others with its unrealistic portrays of men, women, sexual behavior and sexual response, and avoid the above-mentioned impact on oneself (skill).

Key Concept: 5. Skills for Health and Well-being

- 1. Norms and Peer Influence on Sexual Behavior
- 2. Decision-making
- 3. Communication, Refusal and Negotiation
- 4. Finding Help and Support





Key concept 5: Skills for Health and Well-being

Topic 5.1 Norms and Peer Influence on Sexual Behavior

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Peer influence can exist in different ways, and be positive or negative

- understand the concept of peer influence (knowledge);
- ▶ list examples of positive and negative peer influences one has experienced (knowledge);
- acknowledge that peer influence can be good or bad (attitudinal);
- acknowledge that one is able to agree or disagree with the words and behaviors of peers (attitudinal);
- be able to counter negative peer influence in appropriate ways (skill);
- be able to have a positive influence on peers in daily life at home, school and in the community (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Peers can influence decisions and behaviors related to adolescence and sexuality

- know that peers can have both positive and negative influence on others (knowledge);
- describe how peers influence decisions and behaviors related to adolescence and sexuality (knowledge);
- acknowledge that peers can influence decisions and behaviors related to adolescence and sexuality (attitudinal);
- be able to reflect on influence of peers (skill);
- ▶ be able to seek help and support from a trusted adult when having difficulty coping with negative peer influences (skill).

Key idea: There are ways to challenge negative peer influences and accept and promote positive peer influences related to adolescence and sexuality

- ▶ list ways to challenge negative peer influences and promote positive peer influences related to adolescence and sexuality (knowledge);
- acknowledge the importance of being able to counter negative peer influences related to adolescence and sexuality (attitudinal);
- be able to say "no" to something that one doesn't want to do (skill);
- be able to accept and promote positive peer influence (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Social and gender norms can influence sexual decisions and behaviors

- understand the concepts of social norms and gender norms (knowledge);
- list social and gender norms related to sexuality (knowledge);
- understand how social and gender norms influence sexual decisions and behaviors (knowledge);

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- acknowledge that one's sexual decisions and behaviors are influenced by social and gender norms (attitudinal);
- ▶ be able to reflect on the negative impact of social and gender norms on sexual decisionmaking and behavior and respond in appropriate ways (skill).

Key idea: Peers can influence sexual decisions and behaviors, and there are some strategies for challenging negative peer influences on sexual decisions and behaviors

- describe ways that peers influence sexual decisions and behaviors (knowledge);
- compare positive and negative ways that peers can influence sexual decisions and behaviors (knowledge);
- describe the significance of being assertive in the face of negative peer influence on sexual decisions and behaviors (knowledge);
- recognize that peers can have a negative influence on sexual decisions and behaviors (attitudinal);
- be able to demonstrate assertiveness by speaking out when one encounters bullying or peerimposed sexual decision-making (skill);

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: It is possible and necessary to effectively counter negative social and gender norms and peer influence and make rational decisions about sexual behavior.

- compare and contrast scenarios illustrating sexual decisions that are and are not influenced by social and gender norms or peers (knowledge);
- analyze factors that influence making rational decisions about sexual behaviors (knowledge);
- acknowledge the importance and necessity of rational decision-making about sexual behaviors (attitudinal);
- be able to counter negative social and gender norms and peer influence in sexual decisionmaking (skill).

Topic 5.2 Decision-making

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Everyone deserves to make their own decisions and all decisions have consequences

- describe a decision that one made and is satisfied with (knowledge);
- analyze examples of decisions that one or others have made that had either good or bad consequences (knowledge);
- acknowledge that sometimes children may need help from parents/guardians or trusted adults to make certain decisions (attitudinal);
- acknowledge that children also have the right to make decisions about matters that concern them (attitudinal);
- comprehend ways to make better decisions (skill);
- be able to identify trusted adults who can help one make informed decisions (skill).

Key concept 5: Skills for Health and Well-being

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Decision-making is a skill that can be learned and practiced

- describe the main steps in decision-making (knowledge);
- acknowledge that decision-making is a skill that can be learned (attitudinal);
- be able to apply the decision-making process to address problems (skill);
- be able to seek help from a trusted adult if one encounters difficulties in the decision-making process (skill).

Key idea: There are multiple factors that influence people's decision-making

- ▶ list factors that influence people's decision-making (knowledge);
- recognize that decisions are influenced by numerous factors (attitudinal);
- be able to analyze how different factors influence one's decisions (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: The process of making decisions about sexual behavior includes consideration of all positive and negative potential consequences

- analyze the positive and negative consequences of different decisions related to sexual behavior (knowledge);
- explain how decisions about sexual behavior can affect people's health, future and life plan (knowledge);
- recognize that the decision-making process of whether or not to have sexual behavior needs to be approached carefully, with many factors to consider (attitudinal);
- ▶ be able to effectively refuse unprotected sexual behavior and potentially life-threatening highrisk sexual behaviors in intimate relationships (skill).

Key idea: Analyze factors that can make it more difficult to make rational decisions about sexual behavior

- know a range of emotions that can influence decision-making about sexual behavior (knowledge);
- describe ways that alcohol and drugs can impact rational decision-making on sexual behavior (knowledge);
- explain how poverty, gender inequality and violence can influence decision-making about sexual behavior (knowledge);
- recognize that there are many factors that influence people's decision about sexual behavior, some of which are out of their control (attitudinal);
- be able to assess and manage emotional factors that can influence one's own or others' decisions about sexual behavior (skill).

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Key idea: Sexual decision-making can result in possible legal consequences

- learn about national laws that affect what minors can and cannot do related to sexual behavior (knowledge);
- acknowledge that minors should abide by the relevant provisions of China's laws in terms of what they can and cannot do sexually (attitudinal);
- ▶ be able to assess the potential legal consequences of one's own or others' decisions related to sexual behavior (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Sexual decision-making has consequences on oneself and others, including health and social consequences

- analyze consequences of decisions related to sexual behavior on the individual, family, and society (knowledge);
- recognize that sexual decision-making affects oneself, the family and society (attitudinal);
- > express empathy for others who are affected by their sexual decision-making (attitudinal);
- be able to make responsible decisions about sexual behavior (skill).

Topic 5.3 Communication, Refusal and Negotiation Skills

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Communication is important in all relationships including between parents/ guardians or trusted adults and children, and between friends and others

- ▶ list different types of communication (including verbal and non-verbal communication) (knowledge);
- know the difference between effective communication and ineffective communication (knowledge);
- summarize the benefits of effective communication between parents/guardians or trusted adults and children, and between friends and others (knowledge);
- know how to protect one's privacy and bodily integrity by expressing "consent" or "refusal" (knowledge);
- acknowledge that all people have the right to express their own opinions and ideas (attitudinal);
- be able to express "consent" or "refusal" through verbal and non-verbal communication (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Effective communication uses different modes and styles, and is important to expressing and understanding wishes, needs and personal boundaries

compare characteristics of effective and ineffective communication (including verbal and non-verbal communication) (knowledge);

Key concept 5: Skills for Health and Well-being

- acknowledge the importance of being able to express wishes, needs and personal boundaries, and understand that of others (attitudinal);
- recognize that negotiation requires mutual respect, cooperation and compromise (attitudinal);
- acknowledge that others have the right to express their needs (attitudinal);
- be able to respect and listen to others in daily life in the family, school and community (skill);
- ▶ be able to express one's wishes and needs to others in daily life at home, school and in the community (skill).

Key idea: Gender roles can affect interpersonal communication

- illustrate examples of gender roles (knowledge);
- ▶ illustrate examples of how gender roles impact interpersonal communication (knowledge);
- recognize the great importance of adhering to gender equality in interpersonal communication (attitudinal);
- be able to uphold the principle of gender equality in interpersonal communication (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Effective communication is essential to personal relationships

- list the benefits of effective communication to personal relationships (knowledge);
- ▶ know that verbal and non-verbal communication sometimes contradict each other² (knowledge);
- analyze the potential implications of verbal and non-verbal communication that contradict each other (knowledge);
- identify barriers that can stand in the way of negotiation with parents, teachers, classmates, or a romantic partner (including gender roles, etc.) (knowledge);
- recognize that effective communication is essential for building harmonious interpersonal relationships (attitudinal);
- recognize that effective communication is based on respect and equality (attitudinal);
- recognize that everyone's right to express and need to communicate should be respected (attitudinal);
- be able to confidently use negotiation and refusal skills in personal relationships (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Effective communication is essential for intimate relationships, and key to expressing sexual decisions and personal boundaries

- list the benefits of effective communication for intimate relationships (knowledge);
- analyze examples of effective communication for expressing personal needs and "sexual consent" (knowledge);

^{2.} Namely, the meaning of a non-verbal expression (for example, body language, etc.) is contrary to that of a verbal expression, i.e., saying one thing but meaning another.

Key concept 5: Skills for Health and Well-being

- ▶ illustrate examples of how to give "sexual consent" or refusal to sexual behavior, and how to recognize "sexual consent" of others (knowledge);
- Explain why consensual and safe sex requires effective communication (knowledge);
- acknowledge that assertiveness and negotiation skills can help counter unwanted sexual pressure or reinforce the intention to practice safer sex (attitudinal);
- be able to effectively communicate personal needs and boundaries (skill).

Topic 5.4 Finding Help and Support

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Family members, peers, friends, teachers and community members can and should help each other

- describe what is meant by a trusted adult and its characteristics (knowledge);
- describe specific ways in which people can help each other (knowledge);
- acknowledge that all people have the right to be protected and supported (attitudinal);
- be able to help each other with peers and seek help from a trusted adult in case of difficulties (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: There are different sources of help and support in family, school, community and society

- ▶ know that children need help when they have some problems (knowledge);
- learn about the various ways and sources of help and support available to children (knowledge);
- acknowledge that some problems require help from the family, school, community, social service organizations and government agencies (attitudinal);
- be able to seek out and access help through various means (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Assessing the help and support available in service providers and media, which helps access quality information and services

- ▶ list institutions and media that can provide help and support for sexual and reproductive health services and rights (knowledge);
- describe characteristics of institutions that can provide good help and support (knowledge);
- list characteristics of reliable media sources that can provide help and support (knowledge);
- recognize the importance of critically assessing the sources of assistance and support for sexual and reproductive health (attitudinal);
- ▶ be able to list possible sources of help and support in relation to one's needs, and practice expressing the request (skill).

Key concept 5: Skills for Health and Well-being

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Everyone has the right to affordable, credible and respectful assistance that follows the principles of confidentiality and privacy protection

- identify where to access relevant sexual and reproductive health services or assistance (knowledge);
- acknowledge that young people should be able to access affordable, credible and respectful services and support that follow the principles of confidentiality and privacy protection (attitudinal);
- recognize that it is normal to ask for help without guilt or shame (attitudinal);
- comprehend appropriate ways to seek help (skill);
- > express one's needs when seeking help and support with courage and confidence (skill).

Key Concept: 6. The Human Body and Development

- 1. Sexual and Reproductive Anatomy and Physiology
- 2. Reproduction
- 3. Puberty
- 4. Body Image





Key concept 6: The Human Body and Development

Topic 6.1 Sexual and Reproductive Anatomy and Physiology

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Learn about one's body parts and know how to keep them clean, and understand that it is natural to have questions about them

- use scientific names to call some important organs of the body, including internal and external reproductive organs, and describe their basic functions (knowledge);
- acknowledge that all body organs, including reproductive organs, are important (attitudinal);
- acknowledge that it is normal to be curious about one's body parts (attitudinal)
- be able to ask or answer questions about body parts (skill);
- be able to clean one's body, including genitals, correctly (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Everyone's body has parts involved in one's sexual health and reproduction, and it is common for children and adolescents to have questions about them

- know the body parts involved with sexual health and reproduction (knowledge);
- know the concepts of primary and secondary sexual characteristics (knowledge);
- describe the primary and secondary sexual characteristics of males and females (knowledge);
- acknowledge that it is normal to be curious and have questions about their bodies and functions of reproductive organs (attitudinal);
- recognize that individual differences exist in the onset, rate, and manifestation of pubertal development (attitudinal);
- be able to ask a trusted adult questions about sexual and reproductive anatomy and physiology (skill).

Key idea: Women's bodies can release eggs during the menstrual cycle, and men's bodies may make and ejaculate sperm, both of which are needed for reproduction

- describe the key functions of the body that contribute to reproduction (knowledge);
- learn about the menstrual cycle (knowledge);
- learn about the process of sperm production and ejaculation (knowledge);
- acknowledge that both women's and men's bodies play an important role in reproduction (attitudinal);
- be able to name the relevant genitals, and share views on the menstrual cycle and ejaculation of sperm with peers (skill);
- be able to reflect on the stigma of menstruation and the misconceptions about ejaculation (including seminal emission) that arise in the family, school, community and society, and be able to help others develop scientific perceptions (skill).



Key concept 6: The Human Body and Development

Learning objectives for the junior high school stage (12-15 years)

Key idea: During puberty and pregnancy, hormones impact processes involved with sexual maturation and reproduction

- explain that the biological sex of a foetus is determined by chromosomes, and occurs at the early stages of pregnancy (knowledge);
- describe the role hormones play in growth, development, and the regulation of reproductive organs and sexual functions (knowledge);
- acknowledge the importance of hormones (attitudinal);
- be able to tell the important role that hormones play in puberty and pregnancy (skill).

Key idea: Different individuals, regions, cultures and societies have different ways of understanding the biological sex, gender and reproduction.

- distinguish between the biological and social aspects of the sex, gender and reproduction (knowledge);
- analyze ways that different regions, cultures and societies influence how individuals view the biological sex, gender and reproduction (knowledge);
- acknowledge that different individuals, regions, cultures and societies view the biological sex, gender and reproduction differently (attitudinal);
- be able to articulate personal perspectives on the biological sex, gender and reproduction (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Men's and women's bodies change over time, including their reproductive functions and sexual capacities

- summarize the changes in reproductive functions and sexual capacities of men and women over the life cycle (knowledge);
- acknowledge that people are "sexual" beings throughout the life cycle (attitudinal);
- ▶ be able to correctly perceive changes in reproductive functions and sexual capacities over the life cycle (skill).

Topic 6.2 Reproduction

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: The sperm and egg cell unite to form a fertilized egg that implants in the womb and gives birth to a new life

- know that pregnancy is the process by which sperm and egg cell unite to form a fertilized egg that will implant in the womb (knowledge);
- ▶ learn that sperm originates from the male testes and egg cells from the female ovaries (knowledge);

Key concept 6: The Human Body and Development

- be clear that fertilization in a natural situation is accomplished by the act of the penis entering the vagina (knowledge);
- recognize that both mothers and fathers make an important contribution to the birth of a new life (attitudinal);
- be able to use scientific words to tell the story of the birth of a new life (skill).

Key idea: Pregnancy generally lasts for 40 weeks, and a woman's body undergoes many changes during the span of a pregnancy

- describe the changes that a woman's body undergoes during pregnancy (knowledge);
- acknowledge that men should also take responsibility in the process of conceiving a new life (attitudinal);
- be able to express one's positive feelings about the changes that a woman's body undergoes during pregnancy (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: The union of sperm and egg cell and successful implantation represents the beginning of pregnancy

- know the concept of reproduction (knowledge);
- list the steps necessary for reproduction (knowledge);
- ▶ learn that no matter whether the ejaculation occurs in or around the women's vagina, pregnancy is possible as long as the sperm and egg cell have a chance to meet (knowledge);
- understand that a girl who has started menstruation may become pregnant if she has sexual intercourse with a boy who has had seminal emission (knowledge);
- recognize the importance of reproduction (attitudinal);
- be able to collect scientific knowledge and information about reproduction through credible sources (skill).

Key idea: A woman is most fertile at the time of ovulation during the menstrual cycle.

- describe the menstrual cycle, including the specific phase in which pregnancy is most able to occur (knowledge);
- learn that changes in hormones regulate menstruation and when a pregnancy is most likely to occur (knowledge);
- know that having sexual intercourse outside ovulation is not a safe and reliable method of contraception (knowledge);
- acknowledge and accept that menstruation is a normal physiological phenomenon (attitudinal);
- build a positive attitude towards menstruation and respect women (attitudinal);
- be able to offer help in any way possible to the women around you who are experiencing menstruation (skill).



Key concept 6: The Human Body and Development

Key idea: There are common signs of pregnancy, which should be confirmed through a scientific pregnancy test that can be taken as soon as the menstrual period is missed or late

- describe the signs of pregnancy and stages of fetal development (knowledge);
- describe the different scientific methods of pregnancy testing (knowledge);
- recognize that a missed or delayed menstruation after sexual intercourse may be a sign of pregnancy (attitudinal);
- be able to seek help from professionals or trusted adults when one detects signs of pregnancy (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: There are differences between reproductive functions and sexual feelings and these can change over time

- know that pregnancy can be planned and prevented (knowledge);
- know the specific measures that can be taken to plan pregnancy and prevent unintended pregnancy (knowledge);
- understand the difference between reproductive functions and sexual feelings (knowledge);
- acknowledge that people experience changes in their reproductive functions and sexual feelings throughout their life (attitudinal);
- acknowledge that reproduction is not the only purpose of sexuality (attitudinal);
- be able to plan for how to prevent unintended pregnancy (skill);
- be able to seek help from a professional or trusted adult when faced with problems related to reproductive function and sexual feelings (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Not everyone is fertile and there are other ways of trying to address infertility for those who would like to conceive

- know what infertility is (knowledge);
- illustrate examples of the options available for people who would like to conceive but who are experiencing infertility (knowledge);
- recognize that there are options for addressing infertility (attitudinal);
- be able to demonstrate empathy for people who want to conceive but are experiencing infertility (skill)



Key concept 6: The Human Body and Development

Topic 6.3 Puberty

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: When approaching puberty, children undergo physical and emotional changes

- understand the concept of puberty (knowledge);
- understand that growing up involves physical, psychological and emotional changes (knowledge);
- acknowledge that puberty is a natural part of adolescence(attitudinal);
- be able to embrace puberty with a positive and optimistic attitude (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Puberty is the stage when one's reproductive system develops, and reproductive functions mature

- understand the development of the reproductive system and the maturation of reproductive functions during puberty, including menarche and first ejaculation (knowledge);
- list the major physical, psychological and emotional changes that take place during puberty (knowledge);
- have positive and pleasant feelings about the changes that occur during puberty (attitudinal);
- be able to access scientific and reliable information about puberty through credible sources (skill).

Key idea: Maintain good personal hygiene during puberty

- describe good personal hygiene and sanitation practices during puberty (knowledge);
- appreciate the importance of personal hygiene during puberty (attitudinal);
- develop a plan for maintaining good personal hygiene during puberty (skill);
- ▶ be able to seek professional advice, diagnosis and treatment when abnormalities occur in organs and parts of the body, including the reproductive organs (skill).

Key idea: Acne is a normal physiological phenomenon that occurs during puberty

- know what acne (pimple) is (knowledge);
- learn about the causes of acne (knowledge);
- recognize that acne is a normal physiological phenomenon that occurs during puberty (attitudinal);
- comprehend the correct ways to clean one's face and adopt regular hygiene habits (skill);
- ▶ be able to cope with the emotional distress caused by acne and seek professional advice, diagnosis or treatment when needed (skill).

Key idea: Menstruation is a normal and natural part of a girl's physical development and should not be treated with secrecy or stigma

 describe the menstrual cycle and the various physical symptoms that girls may experience during this period, including discomfort (knowledge);

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- acknowledge that gender inequality may contribute to girls' feelings of shame and fear during menstruation (attitudinal);
- acknowledge that all girls during menstruation have the right to have access to qualified sanitary pads and other menstrual aids, clean water and private toilet facilities (attitudinal);
- be able to access, use and dispose of sanitary pads and other menstrual products through formal channels (skill);
- demonstrate positive and supportive strategies for girls to feel comfortable during their menstruation (skill).

Key idea: During puberty, adolescents may experience a variety of physical responses

- understand that erections in male adolescents are normal with or without sexual stimulation or for no specific reasons (knowledge);
- understand that vaginal wetness in female adolescents is normal regardless of sexual stimulation or for no specific reason (knowledge);
- know the concepts of nocturnal emission and erotic dream (knowledge);
- acknowledge that nocturnal emission and erotic dream are normal (attitudinal);
- acknowledge that having erections, emission, vaginal wetness or other sexual responses are a normal part of puberty (attitudinal);
- be able to cope with penile erection, seminal emission, and vaginal wetness in correct ways (skill);
- be able to effectively communicate with parents/guardians and trusted adults when having problems or doubts related to pubertal physiological reactions such as penile erection, seminal emission, and vaginal wetness (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Puberty is a time of sexual maturation that leads to major physical, cognitive, emotional, and social changes that can be exciting as well as stressful throughout adolescence

- understand that puberty occurs at different time for different people, and has different effects on boys and girls (knowledge);
- compare what changes occur in boys and girls during puberty that are the same or different (knowledge);
- analyze the physical, cognitive, emotional and social changes that occur during adolescence (knowledge);
- acknowledge that these physical, cognitive, emotional and social changes are a normal part of adolescence (attitudinal);
- acknowledge that teasing, shaming or stigmatizing others based on the changes of puberty is hurtful and may have long-lasting psychological impacts (attitudinal);
- acknowledge that puberty presents greater challenges for children who do not conform to traditional gender norms, transgender children, or intersex children, among others (attitudinal);
- ▶ be able to manage these physical, cognitive, emotional, and social changes that occur during adolescence in appropriate ways (skill).



Key concept 6: The Human Body and Development

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Hormones play a major role in a person's physical and emotional changes over one's lifetime

- analyze the role hormones play in one's physical and emotional changes over one's lifetime (knowledge);
- recognize that hormones are important in influencing physical changes and emotional development throughout a person's life (attitudinal);
- be able to seek professional help when hormones are having adverse physical and emotional effects on a person (skill).

Topic 6.4 Body Image

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: All bodies are special and unique, and everyone should respect their own bodies

- acknowledge that all bodies are special and unique (knowledge);
- respect one's own body (attitudinal);
- be able to express how one feels about their own body (skill).

Key idea: Every person's body, including persons with disabilities, is unique and should be respected

- explain how the bodies of boys, girls, men and women are alike and different (knowledge)
- describe how one's body will change over time (knowledge);
- illustrate examples of how people in different cultures may view their bodies differently (knowledge);
- acknowledge that every person's body is unique, although there may be differences in body size, function, and physical characteristics (attitudinal);
- acknowledge that every person's body, including persons with disabilities, should be respected (attitudinal);
- be able to express what one likes about their body (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: A person's physical appearance does not determine their worth as a human being

- explain that physical appearance is determined by heredity, environment, and lifestyle habits, etc. (knowledge);
- acknowledge that a person's physical appearance does not determine their worth as a human being (attitudinal);
- show acceptance of a variety of physical appearances, including among peers (attitudinal);
- be able to seek effective help when one is confused about physical appearance (skill).



Key concept 6: The Human Body and Development

Key idea: There are different understandings and standards of "beauty" and "attractiveness" when it comes to a person's physical appearance

- understand the similarities and differences in the criteria for judging "beauty" and "attractiveness" (knowledge);
- know that society's standards of "beauty" and "attractiveness" are shaped when people reflect on them (knowledge);
- acknowledge that what people perceive as "attractive" in terms of physical appearance changes over time, and the understanding of what is "attractive" in terms of physical appearance varies from culture to culture (attitudinal);
- be able to perceive how consumption culture influences people's understanding of "beauty" and "attractiveness" in the family, school, community and society, and respond in appropriate ways (skill);
- ▶ be able to perceive the effects of a single standard of "beauty" on children and young people, including inferiority and oppression, in the family, school, community and society, and respond in appropriate ways (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: People's feelings about their bodies can affect their health, body image and behavior

- discuss the benefits of feeling good about their bodies (knowledge);
- describe how a person's physical appearance can affect how others feel about and behave towards them, and compare how this differs for men and women (knowledge);
- analyze the common ways people try to change their physical appearance and assess the positive and negative effects of these methods on the body (knowledge);
- analyze how gendered standards of "beauty" can drive people to want to change their physical appearance (knowledge);
- explain the various disorders that people can struggle with connected to their body image (knowledge);
- acknowledge that changing one's physical appearance through drugs and other means may have a negative impact on themselves (attitudinal);
- be able to seek and access relevant services when distressed by body image (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Unrealistic standards about bodily appearance can be challenged

- analyze particular cultural and gender stereotypes and how they can affect people's body image and their personal relationships (knowledge);
- recognize that unrealistic standards about bodily appearance can be harmful (attitudinal);
- be able to reflect on one's own body image and how it can affect self-esteem, sexual decision-making and subsequent sexual behavior (skill);
- be able to challenge unrealistic standards about physical appearance (skill).

Key Concept: 7. Sexuality and Sexual Behavior

- 1. The Sexual Life Cycle
- 2. Sexual Behavior and Sexual Response



Key concept 7: Sexuality and Sexual Behavior

Topic 7.1 The Sexual Life Cycle

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Expressions of language and behavior play an important role in intimacy between people

- ▶ learn about the words used to describe physical feelings, as well as words and behaviors that express affection and closeness to others (knowledge);
- ► recognize that different ways of language description and behaviors will affect the intimacy among people (attitudinal);
- be able to express feelings for others using appropriate language and behavior (skill).

Key idea: Follow social etiquette norms when making physical contact with others

- learn about the norms of social etiquette for physical contact (knowledge);
- know that the norms of physical contact vary from culture to culture (knowledge);
- respect the norms of social etiquette for physical contact (attitudinal);
- be able to maintain appropriate physical contact in social etiquette (skill).

Key idea: Sexuality permeates all stages of life and has a lifelong impact on everyone's wellbeing

- know the manifestations of sex in childhood (knowledge);
- know the manifestations of sex that will occur during puberty (knowledge);
- know that sexuality accompanies every stage of a person's life from birth to death, and is related to a person's lifelong happiness (knowledge);
- acknowledge that the manifestation of sexuality at each stage of the life cycle is beautiful (attitudinal);
- be able to consider how sexuality is related to the well-being of every person throughout life (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Human beings are born with the capacity to enjoy their sexuality throughout their life

- understand that sexuality involves emotional and physical attraction to others (knowledge);
- ▶ describe ways that human beings feel pleasure from physical contact throughout their life (knowledge);
- perceive that sexuality is an important part of human health (attitudinal);
- be able to understand and express different sexual feelings in appropriate ways (skill);
- be able to talk about sexuality with the right person in appropriate ways (skill).



Key concept 7: Sexuality and Sexual Behavior

Key idea: It is natural to be curious about sexuality and important to ask a trusted adult questions about sexuality such as sexual feelings

- know that people are curious about sex from an early age (knowledge);
- ▶ acknowledge that it is natural to be curious and have questions about sexuality (attitudinal);
- be able to ask trusted adults or professionals questions about sexual feelings (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Sexual feelings, fantasies and desires are natural and occur throughout life, although people do not always choose to act on those feelings

- know how people express their sexuality (knowledge);
- state that sexual feelings, fantasies and desires are natural and occur throughout life (knowledge);
- explain why not all people choose to act on their sexual feelings, fantasies and desires (knowledge);
- recognize that interest in sex may change with age and can be expressed throughout life (attitudinal);
- respect the different ways that people express sexuality across cultures and settings (attitudinal);
- be able to appropriately manage emotions related to sexual feelings, fantasies and desires (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Sexuality is complex and includes biological, psychological, spiritual, ethical, social and cultural dimensions that evolve over the lifespan

- explain and analyze the complexity of sexuality and how it is multifaceted and includes biological, psychological, spiritual, ethical, social and cultural dimensions (knowledge);
- acknowledge that sexuality is a nature part of being human and can enhance human health, well-being and dignity (attitudinal);
- ▶ be able to reflect on one's own sexuality and factors that influence it, and respond in appropriate ways (skill).

Topic 7.2 Sexual Behavior and Sexual Response

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: People can show love for others through touching and other intimate behavior

- learn about different ways that people show love and care for others (knowledge);
- recognize that expressions of love that are consensual bring pleasure and happiness (attitudinal);
- be able to express love to relatives and friends in age-appropriate ways (skill).

Key concept 7: Sexuality and Sexual Behavior

Key idea: It's very important to understand what "appropriate touching" and "inappropriate touching" are

- ▶ know what "appropriate touching" and "inappropriate touching" are (knowledge):
- recognize that there are some ways of touching children that are bad (attitudinal);
- be able to respond appropriately if someone is touched by others in a bad way (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: People have a sexual response cycle, whereby sexual stimulation can produce a physical response

- know male and female responses to sexual stimulation (knowledge);
- understand that during puberty boys and girls become more aware of their responses to sexual attraction and stimulation (knowledge);
- recognize that it is natural and nice to have sexual attraction (attitudinal);
- ▶ be able to use appropriate words to describe one's own perceptions and feelings about sexual attraction and stimulation (skill).

Key idea: Sexual fantasies and dreams during puberty are natural

- know that sexual fantasies are a way to relieve sexual desire and are a normal psychological phenomenon (knowledge);
- know that it is normal to have or not to have erotic dreams (knowledge);
- recognize that sexual fantasies and erotic dreams are personal privacy (attitudinal);
- acknowledge that one should not share their sexual fantasies and dreams with others or pry into others' experience with this without permission (attitudinal);
- be able to accept sexual fantasies and dreams without fear, remorse, or inferiority (skill).

Key idea: Masturbation is natural and does not cause harm to the body.

- know that boys and girls might begin to masturbate during puberty or sometimes even earlier (knowledge);
- learn that masturbation is a safe way to relieve sexual desire (knowledge);
- know that masturbation itself does not cause physical or emotional harm, but should be done in private (knowledge);
- ▶ understand that people's understanding and perception of masturbation can vary in different societies and cultures (knowledge);
- recognize that masturbation is personal privacy and should be respected (attitudinal);
- acknowledge that masturbation should be done in a way that ensures hygiene, safety and privacy (attitudinal);
- be able to identify inappropriate ways of masturbation and protect oneself from harm (skill).



Key concept 7: Sexuality and Sexual Behavior

Key idea: Responsible sexual intercourse requires adequate physical and mental preparation

- ▶ know that sexual behavior is divided into two categories: autoerotic behavior involving only oneself and sexual behavior with others (knowledge):
- know what sexual intercourse is (knowledge);
- ▶ understand that having sexual intercourse implies responsibility, including responsibility for one's own health, for the new life it might lead to, and for the family (attitudinal);
- acknowledge that a person needs to be physically and mentally mature before having sexual intercourse (attitudinal);
- be able to assess responsible sexual intercourse (skill).

Key idea: It is important to make informed decisions about sexual intercourse, including deciding whether to postpone the first sexual intercourse

- ▶ know that abstinence means choosing not to have sexual intercourse with others (knowledge);
- ▶ learn that abstinence is a wise decision to prevent unintended pregnancy and HIV infection (knowledge);
- compare the pros and cons of early and late first sexual intercourse (knowledge);
- recognize that delaying the first sexual intercourse is an informed decision (attitudinal);
- recognize that personal decisions on sexual intercourse will influence one's life planning (attitudinal);
- be able to make informed decisions regarding sexual intercourse (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: The sexual response cycle is about how the body reacts physically to sexual stimulation

- ▶ understand that sexual stimulation involves physical and psychological aspects, and people respond in different ways, at different times (knowledge);
- acknowledge that sexual response can be impacted by various factors (attitudinal);
- be able to actively seek professional help when experiencing problems with sexual response (skill).

Key idea: Every society, culture and generation have different perceptions about sexual behaviors and it's important to know the facts about sexual behavior

- differentiate perceptions from facts when exposed to information about sexual behavior (knowledge);
- acknowledge the importance of knowing the facts about sexual behavior (attitudinal);
- be able to critically view the different perceptions about sexual behavior (skill).

Key idea: It is important to make informed decisions about sexual behavior

- learn about the steps to making informed decisions (knowledge);
- know the restrictions on the civil capacity of minors under China's law and the provisions on the sexual protection of minors (knowledge);

Key concept 7: Sexuality and Sexual Behavior

- recognize that informed sexual decision-making is important to one's health, well-being and dignity (attitudinal);
- recognize that one's decision to be sexually active is personal, which can change over time (attitudinal);
- be able to make informed decisions about their sexual behavior (skill).

Key idea: There are ways to avoid or minimize sexual intercourse that can impact negatively on one's health and well-being

- know what risks may be associated with sexual intercourse (knowledge);
- explain what one can do reduce the risks associated with sexual intercourse (knowledge);
- learn about the significance of reducing the risks of sexual intercourse for life planning (knowledge);
- explain that condoms and other contraceptives can reduce the risks of sexual intercourse (knowledge);
- ▶ understand that non-penetrative sexual behaviors will not lead to unintended pregnancy, can reduce the risks of STIs, including HIV, and can be pleasurable (knowledge);
- ► recognize that people can choose appropriate actions to reduce risks associated with sexual intercourse and realize life plan (attitudinal);
- be able to reduce the risks associated with sexual intercourse through appropriate actions (skill).

Key idea: Transactional sexual activity, the exchange of money or goods for sexual favors³ can pose risks to one's health and well-being, and is also illegal and criminal

- learn about the transactional sexual behavior and its illegality (knowledge);
- analyze the social context of the existence of transactional sexual activity (knowledge);
- describe risks that may arise from transactional sexual activity (knowledge);
- acknowledge that transactional sexual activity, the exchange of money or goods for sexual favors, exacerbates unequal power relations, and limits the power of both parties to negotiate safer sex (attitudinal);
- be able to decisively refuse transactional sexual activity through appropriate means (skill).



Key concept 7: Sexuality and Sexual Behavior

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Sexual behavior brings pleasure and comes with associated responsibilities for one's health and well-being

- summarize key elements of sexual pleasure and responsibility (knowledge);
- understand that many adults have different periods in their life without sexual contact with others (knowledge);
- explain why effective communication helps enhance sexual pleasure (knowledge);
- ▶ illustrate how gender norms and gender stereotypes influence people's expectations and experience of sexual pleasure (knowledge);
- ► recognize that understanding the body's sexual response can help one understand their body and identify if it is functioning properly (attitudinal);
- ▶ acknowledge that both sexual partners are equally responsible for preventing unintended pregnancy and STIs, including HIV (attitudinal);
- ▶ be able to communicate effectively with one's partner about their sexual needs and pleasure and seek help when necessary (skill).

Key idea: Sexual decision-making requires prior considerations of risk-reduction strategies to prevent unintended pregnancy and STIs, including HIV

- identify strategies that help prevent unintended pregnancy and reduce the risks of STIs (knowledge);
- acknowledge that sound decision-making can reduce unintended pregnancy and STIs, including HIV infections (attitudinal);
- ▶ be able to consider and apply risk reduction strategies to prevent unintended pregnancy and STIs, including HIV (skill).

Key Concept: 8. Sexual and Reproductive Health

- 1. Pregnancy
- 2. Pregnancy Prevention
- 3. Sexually Transmitted Infections (STIs), including HIV
- 4. HIV and AIDS stigma, Treatment and Support





Key concept 8: Sexual and Reproductive Health

Topic 8.1 Pregnancy

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Pregnancy is a natural biological process and can be planned

- know that people can plan and control whether to have children or not, when to have children, and how many children they have (knowledge);
- learn that people can control whether or not to have children by taking some measures (knowledge);
- recognize that the plan of every person and every family to have children needs to be respected (attitudinal);
- be able to express respect for individuals and family plans for pregnancy and childbirth (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: It is important to understand the basic features of pregnancy

- know the common signs of pregnancy (knowledge);
- describe different tests available to confirm a pregnancy (knowledge);
- learn about the health risks associated with early marriage, early pregnancy and early childbirth (knowledge):
- recognize that pregnancy at an early age can have negative health and social consequences (attitudinal);
- be able to identify a trusted adult to talk to if experiencing signs of pregnancy (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: There are health risks associated with too early child-bearing and closely spaced births

- > get to know what too early child-bearing is, and explain the associated health risks (knowledge);
- learn about what child-spacing is, describe the benefits of proper child-spacing, and explain the health risks associated with short child-spacing (knowledge);
- acknowledge the importance of delaying and appropriately spacing pregnancies (attitudinal);
- show empathy to people who gives birth too early (attitudinal);
- acknowledge that adults have the right to decide the frequency and spacing of their own childbirth (attitudinal);
- be able to reflect on the causes of too early child-bearing (skill);
- be able to avoid early childbearing by taking conscious actions (skill).

Key concept 8: Sexual and Reproductive Health

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Some behaviors promote a healthy pregnancy and some do the opposite

- know the factors that promote or threaten a healthy pregnancy process (knowledge);
- ▶ know that one should go to hospital to establish a maternal and child health file and have regular prenatal checkups once knowing that she is pregnant (knowledge);
- know what prenatal behaviors promote or threaten a healthy pregnancy process (knowledge);
- acknowledge that ensuring a healthy pregnancy process is a shared responsibility of family members (attitudinal);
- be able to develop an action plan to ensure a healthy pregnancy process (skill);
- be able to access scientific prenatal services when needed (skill).

Key idea: Adoption is an option when someone is not ready or able to become a parent

- learn about the risks and benefits of adoption (knowledge);
- learn about China's laws and regulations regarding adoption (knowledge);
- know the legal procedures that need to be followed to establish an adoption relationship (knowledge);
- acknowledge that giving a child up for adoption is an option for people who are not ready or able to become parents (attitudinal);
- ▶ be able to analyze the pros and cons of giving a child up for adoption and make a choice that is beneficial to the child according to law (skill).

Topic 8.2 Pregnancy Prevention

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: People can avoid having children through contraception

- know that pregnancy can be prevented through contraception (knowledge);
- know that not all couples have children of their own (knowledge);
- learn that some people can plan not to have children (knowledge);
- recognize that not every family has children (attitudinal);
- ▶ be able to show respect for families who do not have children or who have children in different ways (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Modern contraception can help people prevent unintended pregnancy or plan pregnancy

know that not having sexual intercourse is the most effective form of avoiding unintended pregnancy (knowledge);

Key concept 8: Sexual and Reproductive Health

- ▶ learn about contraceptives, condoms and other ways to prevent unintended pregnancy (knowledge);
- ▶ know the steps to using male and female condoms correctly (knowledge);
- recognize the importance of using contraception to improve sexual health (attitudinal);
- be able to use condoms correctly (skill).

Key idea: Gender roles and peer norms may influence decisions about contraceptive use

- understand how gender roles and peer norms may influence decisions about contraceptive use (knowledge);
- recognize that deciding to use a condom or other contraceptives is the responsibility of both sex partners (attitudinal);
- recognize that preventing unintended pregnancy is the responsibility of both men and women (attitudinal);
- ▶ be able to consider how one perceives contraception and how it is affected by gender roles and peer norms and respond in appropriate ways (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: Using effective contraception can prevent unintended pregnancy

- learn that unintended pregnancy can be caused by various reasons (knowledge);
- know that consistently abstaining from sexual intercourse is the most effective way to prevent unintended pregnancy (knowledge);
- know that consistent and correct use of condoms and modern contraception can prevent unintended pregnancy (knowledge);
- acknowledge that respecting a sexual partner's proposal to use a condom when having sex is a responsible act for both partners (attitudinal);
- be able to correctly choose and use condoms to prevent unintended pregnancy (skill).

Key idea: Different forms of contraception have different effectiveness, efficacy, benefits and adverse effects

- ▶ learn about effective methods of preventing unintended pregnancy and their associated efficacy (knowledge);
- know that people can choose the contraception that meets their needs (knowledge);
- know that using mix of contraceptives not only prevents unintended pregnancy but also prevents STIs (knowledge);
- know that sterilization is a permanent method of contraception (knowledge);
- ▶ know that natural contraceptive methods are not as reliable as modern methods but, in the absence of modern methods, natural methods are better than nothing and may be considered with advice from a health professional (knowledge);
- describe the effectiveness, benefits, and adverse effects of different contraceptives;

Rey concept 8: Sexual and Reproductive Health

- know that emergency contraception can prevent unintended pregnancy (knowledge);
- ▶ illustrate that IUDs, implants, and injectables are long-acting and reversible contraceptive methods that are also suitable for young people (knowledge);
- recognize the important role of scientific contraception in preventing unintended pregnancy (attitudinal);
- be able to choose healthy contraception (skill).

Key idea: Young people who are sexually active and could benefit from contraception should be able to access it without significant barriers, regardless of financial means, marital status, biological sex, gender identity or sexual orientation

- know where condoms and contraceptives can typically be accessed locally although young people may still face barriers that limit their access (knowledge);
- ▶ know the multiple channels to access contraception (knowledge);
- acknowledge that no sexually active young person should be refused access to contraceptives or condoms on the basis of their financial capacity, marital status, biological sex, gender identity, gender expression or sexual orientation (attitudinal);
- ▶ be able to make efforts to remove barriers that limit local young people's access to condoms and other contraception for local young people (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Contraceptive use can help young people who are sexually active to prevent unintended pregnancy, or plan their child-bearing, with benefits for individuals and societies

- ▶ learn about personal benefits and possible side effects and/or risks of available modern methods of contraception (knowledge);
- ▶ learn about factors that influence the choice of the most appropriate method or mix of contraceptives among the sexually active (knowledge);
- acknowledge the importance of using contraception correctly, including condoms and emergency contraception (attitudinal);
- be able to demonstrate steps of using different contraceptives (skill);
- ▶ be able to develop a plan for using a preferred method of modern contraception as and when they may need it (skill).

Key idea: Unintended pregnancy occur, and all young people should be able to access the services and protection necessary for their health and well-being

- ▶ learn about the relevant laws and policies in China, and analyze how they protect the rights of adolescent mothers to continue and complete their education, with access to reproductive health services without discrimination (knowledge);
- know that unsafe abortion poses serious health risks to women and girls (knowledge);

Key concept 8: Sexual and Reproductive Health

- acknowledge that excluding or expelling an adolescent girl from school because of pregnancy is a violation of human rights (attitudinal);
- acknowledge that once a decision is made to terminate an unintended pregnancy, a safe abortion must be performed at a credible health facility (attitudinal);
- recognize that even if a pregnancy is early or unintended, the pregnant woman or girl should have access to good quality, safe and comprehensive health care and support services (attitudinal);
- ▶ Be able to support a friend or loved one who experiences intended or unintended pregnancy, or who has a child, with regards to their education, health and wellbeing.

Topic 8.3 Sexually Transmitted Infections (STIs), including HIV

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: Learn about infectious diseases

- know what an infectious disease is (knowledge);
- know the types of infectious diseases (knowledge);
- know how an infectious disease is transmitted (knowledge);
- recognize that infectious diseases can be prevented (attitudinal);
- be able to live a healthy style to avoid getting sick with an infectious disease (skill).

Key idea: The immune system protects the body from illness and helps people stay healthy

- learn that humans have immune systems that can protect them from illness (knowledge);
- know the different ways that people can keep healthy (knowledge);
- recognize that a healthy lifestyle helps to boost immunity (attitudinal);
- be able to develop a personal life plan that is conducive to health (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Learn about STIs

- know what STI is (knowledge);
- know the types of STIs (knowledge);
- know how STIs are transmitted (knowledge);
- know that some STIs can be detected and cured (knowledge);
- recognize the serious consequences of STIs (attitudinal);
- recognize that STIs can be prevented (attitudinal);
- be able to cope with the threat of STIs in daily life (skill).

Key idea: People can acquire STIs, including HIV, as a result of having unprotected sexual intercourse with someone who already has an STI, and they can reduce their vulnerability to infections by cutting off the transmission routes of STIs

know what HIV and AIDS is (knowledge);

Key concept 8: Sexual and Reproductive Health

- know why HIV cannot be transmitted through daily contact (knowledge);
- recognize that there are a number of ways to reduce the vulnerability to STIs (attitudinal);
- be able to protect oneself from STIs in daily life (skill).

Key idea: HIV can be transmitted in various ways, including through unprotected sexual intercourse with someone infected with HIV

- know the different ways that HIV can be transmitted (knowledge);
- know that the majority of people acquire or transmit HIV through unprotected penetrative sexual intercourse with people living with HIV (knowledge);
- acknowledge that an effective way to prevent HIV transmission is to cut off any route of transmission (attitudinal);
- be able to protect oneself from HIV infection in daily life (skill).

Key idea: There are a number of ways to reduce the vulnerability to STIs, including HIV

- know how to take different approaches to reduce the risk of acquiring or transmitting HIV before and after exposure to the virus (knowledge);
- describe at what age and where the vaccine for genital human papillomavirus (HPV) can be administered, if such a vaccine for the prevention of cervical cancer and other diseases is available locally (knowledge);
- acknowledge that resolute measures to reduce the vulnerability to STIs, including HIV, are absolutely necessary (attitudinal);
- be able to obtain condoms through formal channels and use them properly (skill);
- ▶ be able to counter unwanted sexual pressure through skills such as communication, negotiation, and refusal; or assert the intention to practice safer sex, including the consistent and correct use of condoms or other contraceptives (skill).

Key idea: Testing is the only way to know for sure whether someone has STIs, including HIV, and the treatment is available for HIV and most STIs

- know that testing and treatment for most common STIs, including HIV, are available in one's community (knowledge);
- identify ways to be supportive of someone who may want to get tested (knowledge);
- recognize the important role of HIV testing in reducing HIV transmission (attitudinal);
- acknowledge the importance of early detection and early antiviral treatment of HIV infection (attitudinal);
- acknowledge the importance of safe and supportive environment for people to get tested for HIV (attitudinal);
- be able to access a location or site nearby for HIV testing and treatment services (skill);
- be able to find an HIV testing service for help as needed (skill).

Key concept 8: Sexual and Reproductive Health

Learning objectives for the junior high school stage (12-15 years)

Key idea: All STIs can be prevented, treated or managed

- ▶ know the different ways that people acquire STIs, including HIV infection (knowledge);
- know that there is a window period and incubation period for HIV infection, and describe the differences between HIV-infected persons and AIDS patients (knowledge);
- ▶ know that not having sexual intercourse is the most effective means of preventing STIs, including HIV (knowledge);
- ▶ learn that there are specific ways for the sexually active to reduce the vulnerability to STIs, including HIV (knowledge);
- ▶ learn that the sexual intercourse in certain settings with high incidence of STIs, including HIV, and between individuals with age-disparate/intergenerational relationships can increase the vulnerability to STIs, including HIV (knowledge);
- recognize the importance of safe sexual intercourse (attitudinal);
- be able to refuse unsafe sexual intercourse in appropriate ways (skill);
- be able to use condoms in a consistent and correct manner (skill).

Key idea: Some sexual health services can help people prevent HIV infection, assess their vulnerability to HIV and access testing and treatment⁴ in different ways

- learn about ways to access health systems to get tested for HIV, and services for people living with HIV (knowledge);
- learn about different types of HIV tests available and how these tests are performed (knowledge);
- know what voluntary medical male circumcision (VMMC) is and how it can reduce men's vulnerability to HIV (knowledge);
- know what Pre-exposure Prophylaxis (PrEP) and Post-exposure Prophylaxis (PEP) are, if locally available, and know that they are considered as ways to reduce the likelihood of acquiring HIV before or after a potential exposure to HIV (knowledge);
- acknowledge that everyone has the right to voluntary, informed and confidential HIV testing and should not be required to disclose their HIV status (attitudinal);
- acknowledge the importance of testing for assessing the vulnerability to HIV and accessing treatment as needed (attitudinal);
- be able to be supportive of a friend or a family member who wants to get tested for HIV (skill).

^{4.} For example, sexual health services can offer HIV testing, treatment, provision of condoms, and some may provide PrEP and PEP or VMMC, and some other services can help people assess their vulnerability to HIV and access testing and treatment as needed.

Key concept 8: Sexual and Reproductive Health

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: Communication, negotiation and refusal skills can help young people to counter unwanted sexual pressure or reinforce the intent to practice safer sex

- know that people's negotiation skills can be impacted by social norms, power inequality, personal beliefs and confidence in their decision-making right (knowledge);
- recognize the importance of communication, negotiation, and refusal skills in enhancing safer sexual intercourse (attitudinal);
- ▶ be able to apply effective communication, negotiation, and refusal skills to counter unwanted sexual pressure and employ strategies of safer sexual intercourse (skill).

Key idea: For young people who are sexually active, many factors can influence the decision about which strategy to use to reduce the vulnerability

- analyze all potential factors that may influence the decision of young people who are sexually active to reduce their vulnerability to infection (knowledge);
- acknowledge that exclusion and discrimination against certain groups in society increases their vulnerability to STIs, including HIV (attitudinal);
- be able to develop and implement a personal plan for health and well-being (skill);
- ▶ be able to improve the health and well-being of certain groups through the elimination of exclusion and discrimination in society (skill);
- be able to access condoms in different ways and use them in a correct manner (skill).

Topic 8.4 HIV and AIDS Stigma, Treatment, Care and Support

Learning objectives for the lower elementary school stage (6-9 years)

Key idea: People can have an illness and still look healthy

- ▶ know that even though someone has an illness, they can still look or feel healthy (knowledge);
- recognize that someone who looks healthy is not necessarily free of disease (attitudinal);
- be able to perceive whether one is in good health or not (skill).

Key idea: Everyone, whether they have an illness or not, needs love, care and support

- know that people need love, care, and support from others regardless of their health conditions (knowledge);
- recognize that people need love, care, and support whether they are sick or not (attitudinal);
- be able to express love, care and support to people with different health conditions (skill).

Learning objectives for the upper elementary school stage (9-12 years)

Key idea: Know that there are effective medical treatments for HIV, and people who live with HIV have equal rights with those who don't

Key concept 8: Sexual and Reproductive Health

- know that HIV is an infectious disease that can be effectively treated (knowledge);
- know that some children are born with HIV (knowledge);
- acknowledge that people living with HIV should be treated with equal respect and care (attitudinal);
- be able to express care for people living with HIV while protecting their privacy (skill).

Key idea: People living with HIV have equal rights and can live productive lives

- know that people living with HIV can live a normal life with proper care, treatment and support (knowledge);
- know that people living with HIV can also have children of their own (knowledge);
- acknowledge that people living with HIV are entitled to equal access to love, respect, care and support, as well as to timely treatment (attitudinal);
- be able to show respect, care and support for people living with HIV (skill).

Key idea: It is important for people living with HIV to be able to talk about their HIV status in a safe and supportive environment

- learn about the benefits and possible challenges for people living with HIV to talk openly about their HIV status (knowledge);
- know that some people were born with HIV, and others acquire HIV during their lifetime (knowledge);
- ▶ know that with care, respect and support, people living with HIV can manage their condition through effective medical treatment (knowledge);
- acknowledge that everyone has a responsibility to ensure a safe and supportive environment for people living with HIV (attitudinal);
- be able to create a safe and supportive environment for people living with HIV (skill).

Key idea: A person living with HIV has unique needs for care and treatment, some of which may come with possible side effects

- know why a person living with HIV has unique needs for care and treatment, including some side effects that may arise in the process (knowledge);
- know that treatment for HIV is a lifelong commitment, and can often come with side effects and other challenges, including the required careful attention to nutrition (knowledge);
- learn about the issues that require careful attention in the treatment of children living with HIV (knowledge);
- recognize that special attention must be given to the care and treatment required by people living with HIV (attitudinal);
- ▶ be able to provide information about how people living with HIV can access care and treatment services (skill).

Key concept 8: Sexual and Reproductive Health

Key idea: HIV and AIDS can affect the family structure, family roles and responsibilities

- ▶ learn that HIV is not a barrier for building intimate relationships or enjoying family or sexual life, as people with different HIV statuses can live together and be sexual partners without risk of acquiring HIV, and can also have children born free of HIV (knowledge);
- get to know how HIV and AIDS can affect families, including the family structure and the roles and responsibilities of family members (knowledge);
- know that women living with HIV can stay healthy and deliver healthy children with support from their families and communities as well as with formal and professional services and treatment (knowledge);
- acknowledge that everyone has a responsibility to support people living with HIV (attitudinal);
- be able to support people living with HIV in different ways (skill).

Learning objectives for the junior high school stage (12-15 years)

Key idea: With the appropriate care, respect and support, people living with HIV can lead fully productive lives free from discrimination

- know that discrimination against HIV-infected people by any institution or individual is illegal (knowledge);
- know that the rights and interests of HIV-infected persons, AIDS patients and their families, in marriage, employment, medical care and schooling, are protected by law (knowledge);
- acknowledge that with treatment and support, some people who have been living with HIV since birth can also live healthy and productive lives (attitudinal);
- be able to speak out against discrimination people living with HIV (skill).

Key idea: Everyone, including people living with HIV, has the equal right to express sexual feeling and love for others, including entering into marriage or long-term commitment, based on the principle of informed consent

- understand why everyone, including people living with HIV, has the right to express sexual feelings and love for others (knowledge);
- acknowledge that everyone, including people living with HIV, has the right to express sexual feelings and love for others (attitudinal);
- ▶ be able to support the right of everyone, including people living with HIV, to express sexual feelings and love for others (skill);
- be able to support everyone, including people living with HIV, to frankly disclose their infection status of STIs, including HIV, while exercising their right to express sexual feelings and love for others (skill).

Key concept 8: Sexual and Reproductive Health

Key idea: Support groups and programmes run or participated by people living with HIV can be helpful

- get to know how support groups and programmes run or participated by people living with HIV can be helpful, and describe the services that are available (knowledge);
- acknowledge and support the assistance provided by support groups and programmes run or participated by people living with HIV (attitudinal);
- be able to access local HIV support groups and programmes (skill).

Key idea: Centers for AIDS Prevention and Control and local Centers for Disease Control and Prevention can provide free HIV and AIDS counseling and testing services

- ▶ learn about responsibilities of the National Center for AIDS/STD Prevention and Control, China CDC (knowledge);
- learn about local institutions for HIV and AIDS voluntary counseling and testing and institutions for HIV confirmatory testing (knowledge);
- acknowledge and support antiviral treatment carried out by local designated hospitals (attitudinal);
- be able to identify formal local institutions that provide HIV and AIDS counseling, testing and treatment (skill).

Learning objectives for the senior high school stage and above (15-18 years and above)

Key idea: With the appropriate care, respect and support, people living with HIV can lead fully productive lives

- know the causes and impacts of stigma and discrimination against people living with or affected by HIV (knowledge);
- ▶ know the efforts made by people living with HIV to lead fully productive lives (attitudinal);
- ▶ identify leading activists living with HIV from around or within the country, and describe their contributions to people's awareness about HIV and protecting other people living with HIV (skill);
- be able to advocate for rights of everyone, including people living with HIV, to live free of stigma and discrimination (skill).

Key idea: China's policies on AIDS prevention and control will help people attach more importance to and effectively participate in AIDS prevention and control actions

- learn about China's policies on AIDS prevention and control (knowledge);
- recognize that learning about China's policies on AIDS prevention and control will help people make full use of policy resources and better protect themselves and others (attitudinal);
- be able to consider how to promote the implementation of China's policies on AIDS prevention and control through ramping up publicity and education efforts (skill).



References

Chinese journals and articles:

- [1] 鲍慧莺, 冯瑗. 香港学校推行性教育的情况[J]. 青年研究, 1991(7):44-47.
- [2] 本刊编辑部,潘绥铭,刘丽青,等.羞答答的玫瑰如何开?——关于青少年的性教育[J].人口研究,2002(6):20-28.
- [3] 蔡畅,汤后林,陈方方,李东民,吕繁.我国 2010 ~ 2019 年新报告青年学生 HIV/AIDS 基本特征 及趋势分析 [J]. 中华流行病学杂志,2020,41(9):1455-1459.
- [4] 蔡赐河,马军,黄志达,董彬,黄思哲,王丽梅,郭晓英,李锋华,陈超军.广东省中山市5~19 岁学生青春期身高增长规律的研究[J].中华流行病学杂志,2012(7):717-721.
- [5] 蔡泳,施榕,沈理笑,等.上海市重点高中学生艾滋病同伴教育效果评价[J].中国学校卫生,2006,27 (3):199-200.
- [6] 曹文振, 唐昆. 青少年青春期性行为影响因素研究[J]. 青年研究, 2020(6):43-56,92.
- [7] 曹云飞, 陈容, 郑璐璐, 张宇, 苟萍. 性心理健康视角下对青春期学生系统开展性教育的实效性 [J]. 中国学校卫生, 2021, 42 (11):1744–1746, 1750.
- [8] 陈大光, 陈晶琦. 中专女生童年期目睹校园暴力经历及其与心理问题的关联[J]. 中国学校卫生,2009,30(8):721-723.
- [9] 陈昌琦,叶广俊.小学六年级及实中一年级女生青春期性教育干预研究[J].中华医学杂志,1997,77 (1):11-14.
- [10] 陈建新,郭佩文,薛巧凤.澳门青少年性相关行为的形成机制研究——基于性知识获取渠道的调节效应分析[J].青年探索,2020(4):92-104.
- [11] 陈建新,郭佩文.澳门青少年性教育的效果及优化路径——基于性相关行为形成机制的多群组结构模型分析[J].当代青年研究,2021(2):108-115.
- [12] 陈晶琦, DUNNE MP, 王兴文. 某中学高中女生儿童期性虐待发生情况调查 [J]. 中国学校卫生, 2002 (2):108-110.
- [13] 陈晶琦 ,DUNNE M P. 儿童期性虐待经历对女生心理的影响 [J]. 中国公共卫生 ,2003 (9):124-125.
- [14] 陈晶琦,李祥虹,王兴文.高中学生2062名预防艾滋病健康教育需求评价[J].中国学校卫生,2003 (4):374-375.
- [15] 陈晶琦, 王兴文, DUNNE M P.239 名高中男生儿童期性虐待调查 [J]. 中国心理卫生杂志, 2003 (5):345-347.

- [16] 陈晶琦, 韩萍. 学校卫生人员对儿童性虐待问题的认识 [J]. 中国性科学, 2004(6):11-13,15.
- [17] 陈晶琦,李秀珍,丁莉莉,韩萍,陈海华.家长对儿童性虐待的认识及与子女交流状况调查[J].中国学校卫生,2004(4):390-392.
- [18] 陈晶琦,刘伟.学校卫生工作人员对学校性教育态度和需求分析[J].中国学校卫生,2004 (1):70-71,73.
- [19] 陈晶琦. 学校如何开展青春期性健康教育[J]. 中国学校卫生, 2005 (1):41-42.
- [20] 陈晶琦. 学校预防艾滋病教育对高中生知识态度及性行为的影响 [J]. 中国性科学,2006 (2):12-14.
- [21] 陈晶琦,何舒青,王粉燕,王永红,张浩然.关注农村地区学生预防艾滋病教育:392 名农村初中学生预防艾滋病知识调查研究报告[J].中国性科学,2007(12):3-6,14.
- [22] 陈晶琦,何舒青,王粉燕,王永红,胥健,李婷.流浪儿童预防艾滋病教育需求评价[J].中国生育健康杂志,2008(3):163-166.
- [23] 陈晶琦. 小学二年级学生预防性侵犯教育效果评价[J]. 中国学校卫生, 2012, 33(2):148-150.
- [24] 陈晶琦, 张曼, 肖晚晴, 王付曼, 马亚婷, 张文静, 李景壹, 罗晓玲. 北京市 1200 名初一年级学生预防性侵犯教育需求评价 [J]. 中国性科学, 2012,21 (11):71-74.
- [25] 陈晶琦,张文静,李景壹,罗晓玲.北京市三所学校初一学生预防性侵犯教育影响评价[J].中国儿童保健杂志,2013,21 (1):23-26.
- [26] 陈晶琦, 杜晓娜, 张曼. 农村小学四年级学生预防性侵犯教育影响评价 [J]. 中国性科学,2013,22 (2):68-72.
- [27] 陈晶琦, 冯亚男, 孔艳秋, 李向梅, 赵晓侠, 李景壹, 张文静, 罗晓玲, 陈大光, 邱辰.1161名小学生父母预防儿童性侵犯知识态度及亲子间交流状况调查[J]. 中国性科学, 2014,23(6):105–109.
- [28] 陈晶琦,徐韬,宫丽敏,王惠珊,焦富勇,潘建平,黄晓燕,刘文利.中国儿童性虐待的流行病学研究现状:测量工具、流行现状及危险因素分析[J].中国妇幼卫生杂志,2014,5(4):71-74.
- [29] 陈晶琦, 孔艳秋, 李向梅, 李景壹, 张文静, 冯亚男, 赵晓侠, 陈大光, 于卜一, 金怡晨, 邱辰. 小学生家长预防儿童性侵犯教育影响评价[J]. 中国性科学, 2015,24(7):107–111.
- [30] 陈晶琦,姜颖颖,金怡晨,马爽,吕林景,邱辰.某农村地区小学生家长预防儿童性侵犯知识和教育活动状况调查[J].中国性科学,2017,26(12):128-131.
- [31] 陈晶琦,金怡晨,姜颖颖,马爽,吕林景,邱辰.亲子互动自主阅读材料对小学生预防性侵犯知识和技能的影响[J].中国性科学,2017,26(9):128-131.
- [32] 陈晶琦,金怡晨,姜颖颖,马爽,邱辰.某农村地区小学生预防性侵犯知识和技能调查[J].中国性科学,2017,26 (8):150-153.
- [33] 陈晶琦, 冯亚男, 金怡晨, 赵晓侠, 李景壹. 某农村地区学校预防性侵犯教育对儿童知识和技能的影响[J]. 中国学校卫生, 2019, 40 (1):39-41.

- [34] 陈晶琦,陈铂,吴玥娇,郭苏影,邱辰.126名小学教师预防儿童性侵犯教育培训及开展相关教育情况调查研究[J].中国妇幼卫生杂志,2020,11(6):5-8,20.
- [35] 陈茂林, 王竹林. 社会规范差异与跨文化交际[J]. 南阳师范学院学报(社会科学版),2004 (4):118-120.
- [36] 陈曼曼,杨招庚,苏彬彬,李艳辉,高迪,马莹,马涛,董彦会,马军.中山市儿童青少年青春期身高生长突增规律[J].北京大学学报(医学版),2021,53(3):506-510.
- [37] 陈曼曼, 高迪, 李艳辉, 杨招庚, 王西婕, 邹志勇, 马军. 低年级小学生男女性特质和父母教养方式的关联[J]. 中国学校卫生, 2022, 43 (2):176-180.
- [38] 陈强, 熊霞鹂, 陈思礼, 喻娴. 在少数民族大学生中开展艾滋病预防和生殖健康教育的效果评估 [J]. 现代预防医学, 2013, 40 (5):887-890.
- [39] 陈天麒,马迎华.青少年艾滋病防控工作面临的挑战与防控策略分析[J].中国病毒病杂志,2018,8(3):170-176.
- [40] 陈伟. 性教育中国家、父母、儿童的宪法关系——以性教育读本争议为例 [J]. 苏州大学学报(法学版),2022,9(1):123-135.
- [41] 程艳, 楼超华, 涂晓雯, 杨建华, 赵双玲, 高尔生. 在 HIV 高发农村地区高级中学开展安全套教育的效果研究[J]. 中国卫生统计,2007(3):290-291.
- [42] 程艳,楼超华,高尔生.生活技能培训对艾滋病高发地区高中学生相关知识和态度的影响[J].中国计划生育学杂志,2010(6):344-348.
- [43] 崔念,李民享,邓莹.向农村未婚青年提供生殖健康信息和服务的干预研究评估[J].中国计划生育学杂志,2004,12(9):537.
- [44] 崔闻心,高迪思,朱璠,郭雪儿,刘思辰,李远骋,马迎华.青年学生男男性行为者中大众意见领袖开展同伴干预效果[J].中国学校卫生,2020,41(12):1781-1785.
- [45] 邓明昱.全面的性教育——全方位、全年龄的性教育[J].中国性科学,2014,23(7):1.
- [46] 董鸿扬. 论社会规范[J]. 学术交流, 1988(5):105-109.
- [47] 董文兰,王芳芳,韩宏.中学生生殖健康教育干预效果评价[J].中国公共卫生,2004,20 (11):1404-1404.
- [48] 杜晓娜, 陈晶琦, 张曼. 农村 388 名小学生预防艾滋病知识态度行为分析 [J]. 中国学校卫生,2010,31 (5):604-605.
- [49] 杜晓娜, 陈晶琦, 张曼. 河南某农村地区小学四年级学生预防艾滋病教育效果评价 [J]. 中国学校卫生,2012,33(2):153-155.
- [50] 段爱旭, 余小鸣. Child-To-Child 健康教育模式简介 [J]. 中国学校卫生, 2006(5):435-436.
- [51] 范朵. 别让"偏见"成为学校性教育的绊脚石[J]. 江苏教育, 2021(Z8):122-123,127.
- [52] 范朵. 成长的烦恼: 初中生青春期性困惑与性教育[J]. 青春期健康,2021(2):85-87.

- [53] 樊莉蕊,秦发举.1991-2016年广州市15~24岁青少年HIV/AIDS流行特征[J]. 热带医学杂志,2017,17(7):988-990.
- [54] 方刚. 女性主义教学理念的应用——一次社会性别参与教学的实验与体会 [J]. 暨南学报(哲学社会科学版),2005(4):119-124,144.
- [55] 方刚. 从男性气概的改造到促进男性参与[J]. 妇女研究论丛,2007(6):5-10.
- [56] 方刚. 台湾校园里的性别教育[J]. 中国社会导刊,2007(2):21-22.
- [57] 方刚. 将性别教育引入学校性教育的思考[J]. 中国性科学, 2007 (10):6-7,13.
- [58] 方刚."性信息传输"与性教育内容多元化构想[J]. 新学术,2008(1):121-123.
- [59] 方刚.大学性教育模式的思考——禁欲型性教育与综合型性教育之辩[J].中国青年研究,2008 (7):72-75,67.
- [60] 方刚. 男性气质多元化与"拯救男孩"[J]. 中国青年研究, 2010(11):17-20,106.
- [61] 方刚. 基于性人权与性别平等的高校性教育[J]. 中国青年研究,2012(6):92-95,62.
- [62] 方刚. 赋权型性教育: 让学生学会管理性——中学性教育传统观念的颠覆与现状分析[J]. 人民教育,2013(21):34-37.
- [63] 方刚. 赋权型性教育: 一种高校性教育的新模式[J]. 中国青年研究, 2013 (10):92-95.
- [64] 方刚. 简析高校心理健康教材社会性别意识之缺失 [J]. 妇女研究论丛,2013 (4):75-78.
- [65] 方刚. 全民关注性侵犯背后的隐忧与出路[J]. 中国性科学,2014,23(2):111-112.
- [66] 方刚,董晓莹.中学性教育的不足与努力方向——基于对"全国中学性教育优秀教案评比"的分析[J].中国性科学,2015,24(2):95-98.
- [67] 方刚.干预,促进改变—"促进社会规范改变的工具与数据:终止针对妇女、女童暴力的亚太论坛" 综述 [J]. 山东女子学院学报,2016(4):25-28.
- [68] 方刚. 校园性别暴力: 新的定义与新的研究视角[J]. 中国青年研究, 2016(3):76-80.
- [69] 方刚. 将赋权理论应用于性教育的思考与实践[J]. 中小学心理健康教育,2018(13):13-16.
- [70] 方刚. 互联网时代的性教育,用"赋权"取代"规训"[J]. 教育家,2020(17):13-14.
- [71] 冯嘉玉, 晏涵文, 高松景. 台湾偏乡地区性教育介入之成效分析 以花莲县国民中学为例[J]. 台湾性学学刊, 2015, 21(1):99-113.
- [72] 付连国,阳益德,马军,王海俊,宋逸,胡佩瑾,李晓卉,吴丽晶,孟祥睿.中国青春期女生月经初潮较早与身体素质的关系[J].中华预防医学杂志,2013,47(8):707-711.
- [73] 高迪,李艳辉,杨招庚,王西婕,马军,邹志勇.厦门市部分低年级小学生性别角色类型现况[J]. 中国学校卫生,2019,40(9):1333-1336.
- [74] 高迪,李艳辉,王西婕,杨招庚,陈曼曼,马莹,马军,邹志勇.厦门市小学生性别角色与家庭因素的关联[J].中国学校卫生,2022,43(2):171–175.

- [75] 高迪思,吴静,张文静,陈天麒,崔闻心,胡翼飞,马迎华.男男性行为青年学生艾滋病知识与行为现况[J].中国学校卫生,2019,40(3):359–363.
- [76] 高尔生,楼超华,王波,沈燕,王筱金,涂晓雯.社区干预项目对未婚青(少)年生殖健康知识和性相关态度的影响[J].复旦学报(医学版),2004(1):46-52.
- [77] 高松景,武静蕙,晏涵文,刘洁心,虞顺光.台北市国高中(职)学生「两性平等教育」评量之横断性研究[J].台湾性学学刊,2003,9(2):37-61.
- [78] 高松景, 晏涵文, 刘洁心. 台北市中小学「两性平等教育」评量之纵贯性研究[J]. 台湾性学学刊, 2004,10(2):1-17.
- [79] 高宇,张树成,贺斌,赵晖,王介东.我国男性首次遗精年龄影响因素的文献分析 [J]. 中国计划生育学杂志,2009,17(11):653-658.
- [80] 苟萍, 胡珍. 论多元文化背景下的大学生性道德教育[J]. 教育探索, 2014(11):111-112.
- [81] 苟萍,李红.论未成年人性侵害防范教育的责任主体缺位[J].教育与教学研究,2017,31 (1):31-37.
- [82] 苟萍. 青春期恋爱教育审视 [J]. 江苏教育,2017 (96):21-23.
- [83] 苟萍, 唐红英. 构建性教育师资培养体系是当务之急[J]. 教育家, 2019 (25):33-34.
- [84] 苟萍,徐海燕,马骋.性教育师资职前培养现状分析[J].教育与教学研究,2021,35(4):89-96.
- [85] 顾桉娜, 王卓然, 季景涛, 彭涛. 健康行为理论在青少年安全性行为研究中的应用 [J]. 中国性科学, 2010,19(3):9-11,14.
- [86] 顾向应,吴尚纯.青少年避孕服务指南[J].中华妇产科杂志,2020(2):83-90.
- [87] 郭利娜, 余小鸣, 安维维, 王嘉. 北京市流动儿童健康知、信、行现况调查 [J]. 中国儿童保健杂志, 2011,19 (7):603-605.
- [88] 郭凌风, 刘文利. 小学全面性教育中的社会规范教育[J]. 江苏教育, 2017 (96):24-26.
- [89] 郭凌风, 刘文利. 儿童身体尊严教育[J]. 江苏教育, 2018 (32):43-44.
- [90] 郭凌风,方世新,李雨朦,刘爽,刘文利.性教育课程改善小学生同性恋态度效果评价[J].中国学校卫生,2019,40 (10):1478-1481.
- [91] 郭凌风, 赖珍珍, 李雨朦, 刘爽, 刘文利. 全面性教育课程对大学生性知识态度干预效果分析 [J]. 中国学校卫生, 2019, 40(12):1808–1811.
- [92] 郭凌风, 刘文利. 全面性教育中的多元性倾向教育[J]. 江苏教育,2019(72):42-45.
- [93] 郭凌风, 刘文利. 小学生性发展及其对性教育的启示[J]. 江苏教育, 2019 (80):39-42.
- [94] 郭凌风,刘文利.性少数群体校园暴力与欺凌的危险和保护因子[J].中国学校卫生,2019,40 (1):156-160.

- [95] 郭凌风, 肖瑶, 芦鸣祺, 刘文利. 基于全面性教育的初中生性知识态度和行为调查 [J]. 中国学校卫生,2020,41 (10):1455-1458.
- [96] 郭凌风,方世新,王国强,刘文利.群际接触干预同性恋态度研究:出柜时机的影响与生理性别差异[J].中国临床心理学杂志,2021,29(5):897-902,909.
- [97] 郭凌风,刘文利,李雨朦,刘爽.全面性教育对基于性别的校园欺凌的预防作用[J].教育科学研究,2021(4):72-78.
- [98] 郭凌风,刘文利.全面性教育视角下中国义务教育阶段课程标准与教材分析[J].中国学校卫生,2021,42(3):325-328.
- [99] 郭蕊,何倩,时俊新,等.初一学生毒品与艾滋病认知 动机 情商 抵御技能模式干预效果评价 [J].中国学校卫生,2008,29(4):309–311.
- [100] 郭帅军,余小鸣,孙玉颖.中国青少年高危性行为的 Meta 分析 [J]. 中国性科学,2012,21 (10):69-71,79.
- [101] 郭苏影,陈晶琦.听障儿童母亲预防儿童性侵犯认识及亲子交流状况[J].中国学校卫生,2019,40 (7):1024-1027.
- [102] 郭苏影, 陈晶琦. 预防儿童性侵犯教育对听障儿童母亲知识和亲子交流的影响 [J]. 中国性科学,2019,28 (9):139-142.
- [103] 郭向前, 袁铮, 王莉, 彭晓辉. 智障青少年不良性交往及其干预对策[J]. 中国性科学, 2004 (10):22-24,40.
- [104] 郭雪儿,崔闻心,朱璠,刘思辰,李远骋,陈天麒,高迪思,马迎华.青年学生男男性行为者性伴特征与性行为前物质使用的关联[J].中国学校卫生,2020,41(12):1791-1794.
- [105] 韩萍,陈晶琦.幼儿园和小学教师对儿童性侵犯问题认识的定性研究[J].现代预防医学,2009,36 (18):3450-3451,3453.
- [106] 何春艳,涂晓雯,楼超华,高尔生.上海市中学新生遭受性骚扰状况调查[J].中国学校卫生,2009,30 (11):1028-1030.
- [107] 何海艳,吴学华,林琳,等.秦巴山区高年级小学生性骚扰/性侵犯认知状况及应对方式调查[J]. 现代预防医学,2018,45(23):4315-4318.
- [108] 何舒青, 陈晶琦. 安徽 2 所农村中学初中生预防艾滋病健康教育效果评价 [J]. 中国学校卫生,2012,33 (5):541-542,545.
- [109] 何晓英, 尤敏, 许泓. 少女妊娠与避孕[J]. 中国计划生育和妇产科, 2019,11 (11):14-16.
- [110] 胡塔静, 左霞云, 廉启国, 王子亮, 余春艳, 涂晓雯, 程艳, 楼超华. 六省城乡 6 ~ 14 岁小学生性相关知识水平与知识获得状况调查[J]. 中国儿童保健杂志, 2015,23 (12):1338-1341.
- [111] 胡晓雯,谢静波,尤小芳,等.上海市初中生生殖健康干预活动效果评价[J].上海预防医学,2015,27(9):547-550.

- [112] 胡晓宇. 青少年友好服务的由来和发展[J]. 性教育与生殖健康, 2007(4):4.
- [113] 胡玉坤,刘文利.进入国际发展议程前沿的"青年"——概念、多元政策议题与优先关注目标[J]. 当代青年研究,2012,6:14–18.
- [114] 胡珍,吴银涛.大学生性道德教育有效对话的理论探讨[J].教育与教学研究,2017,31(7):56-64.
- [115] 黄翠萍,余惠莺,罗文秀,尹一桥,罗家俊.探讨澳门初中生性知识现状及建议[J].中国性科学,2018.27(11):150-153.
- [116] 黄盈盈. 他山之石: 外国"青少年生殖健康教育"综述[J]. 当代青年研究,2002(1):34-37.
- [117] 黄盈盈,潘绥铭.中国少男少女的爱与性——基于 2010 年 14 \sim 17 岁全国总人口的随机抽样调查 [J].中国青年研究,2012 (7):55-61.
- [118] 黄盈盈,潘绥铭.中国少年的多元社会性别与性取向——基于 2010 年 14 ~ 17 岁全国总人口的随机抽样调查 [J].中国青年研究,2013 (6):57-63.
- [119] 黄盈盈,潘绥铭."单性别成长"的独生子女婚恋状况的对照研究——全国 14 ~ 30 岁总人口随机抽样调查分析[J].中国青年研究,2014(6):51-56,101.
- [120] 黄盈盈.性/别框架下的"性与生殖健康"[J].探索与争鸣,2014(9):32-34.
- [121] 黄盈盈. 跨国视野下的"西方性学"[J]. 妇女研究论丛, 2021(6):72-86.
- [122] 黄泽鹏, 杨连朋, 雷晖倩, 等. 中小学生暴力角色对校园施暴行为认知情况分析 [J]. 中国学校卫生, 2015, 36 (10):1458-1461.
- [123] 简丽娟, 晏涵文. 台北市高中职学生接触色情媒体经验与相关因素之研究[J]. 台湾性学学刊, 2012,18(2):075-097.
- [124] 姜辉, 刘德风. 适度自慰排泄压力 [J]. 健康必读, 2008 (4):40.
- [125] 蒋媛,张颖萍.贵阳市云岩区青少年性健康现状调查及干预效果评价[J].中国妇幼保健,2013,28 (4):659-662.
- [126] 孔文琦,潘勇平,马迎华.北京市东城区 2 所中学预防艾滋病同伴教育效果评价 [J]. 中国学校卫生,2010,31(2):218-219.
- [127] 赖珍珍,胡玥,刘文利,马迎华.小学三年级流动儿童性教育课程效果评价[J].中国学校卫生,2015,36(8):1150-1153,1157.
- [128] 劳炳雄.北海市高中生艾滋病性病同伴教育效果分析[J].中国学校卫生,2010,31(7):850-852.
- [129] 雷开春, 杨雄. "90后"高中生心理健康与学业成绩关系调查[J]. 现代教学, 2011(Z1):19-21.
- [130] 雷园婷, 马军, 胡佩瑾, 董彬, 张冰, 宋逸. 2014年中国西南地区 13个少数民族学生首次遗精、月经初潮现况及其与营养状况关联的研究[J]. 中华预防医学杂志, 2019(5):492–496.
- [131] 李春燕, 唐昆. 青少年性与生殖健康促进措施[J]. 中国计划生育学杂志, 2016,24 (9):580-583.
- [132] 李红艳.全面性教育的国际政策与实践[J]. 江苏教育, 2017 (96):7-12, 17.

- [133] 李红艳, 马军, 刘文利. 亚太地区各国性教育现况与前瞻——亚太地区全面性教育利益相关方对话会议纪实[J]. 教育家, 2018 (37):40-43.
- [134] 李佳洋, 刘文利. 全面性教育中儿童情绪调节能力的培养[J]. 江苏教育, 2019(48):40-42.
- [135] 李佳洋, 刘文利. 性少数群体与多元性倾向教育[J]. 江苏教育, 2020(56):23-25, 28.
- [136] 李佳洋,刘文利.澳门学校性教育课程实施推广策略经验及启示[J].中国学校卫生,2020,41 (10):1446-1449.1454.
- [137] 李佳洋, 刘文利. 父母在防治校园欺凌中的角色与责任[J]. 江苏教育, 2020(8):22-25.
- [138] 李佳洋, 刘文利. 家庭中的性别刻板印象及应对策略[J]. 江苏教育, 2020(32):30-33.
- [139] 李佳洋, 刘文利. 性别刻板印象与社会性别平等教育[J]. 江苏教育. 2020 (48):27-29.
- [140] 李佳洋, 刘文利. 全面性教育中的生命诞生教育[J]. 江苏教育, 2020 (72):35-37.
- [141] 李佳洋, 刘文利. 二孩家庭父母如何应对养育挑战[J]. 江苏教育, 2020 (80):25-28.
- [142] 李佳洋, 刘文利. 全面性教育中的劳动教育 [J]. 江苏教育, 2020 (96):29-30,33.
- [143] 李佳洋, 刘文利. 家庭性教育, 从出生开始[J]. 家教世界, 2021 (2):7-9.
- [144] 李佳洋, 刘文利. 性教育读本中的家庭性教育理念解读[J]. 江苏教育, 2021 (16):26-29.
- [145] 李佳洋,刘文利.参与式教学在全面性教育课程中的优势分析[J]. 江苏教育,2021 (25):24-26, 29.
- [146] 李佳洋, 刘文利. 参与式教学在全面性教育课程中的实践[J]. 江苏教育, 2021 (33):28-30.
- [147] 李佳洋, 刘文利. 性教育纳入家庭教育的积极作用[J]. 江苏教育, 2021(50):26-27.
- [148] 李佳洋, 刘文利. 全面性教育中的儿童营养教育[J]. 江苏教育, 2021 (85):28-29,40.
- [149] 李佳洋,刘文利.《未成年人学校保护规定》中的性教育内容分析[J].江苏教育,2021(93):34-35.
- [150] 李佳洋, 刘文利. 青春期儿童父母性教育状况调查研究[J]. 中华家教, 2022(1):42-49.
- [151] 李灵,董奇,张红川,王昌海.青少年健康危害行为影响机制的研究进展与教育启示[J].教育科学,2005(6):57-59.
- [152] 李宪辰, 左霞云, 楼超华, 廉启国, 程艳, 涂晓雯. 小学生身体接触性性侵犯遭遇情况及其影响 因素分析 [J]. 中国学校卫生, 2014, 35 (11):1682-1684.
- [153] 李艳辉, 杨招庚, 董彬, 董彦会, 王西婕, 马军. 月经初潮/首次遗精与户外活动时间对学生视力的影响[J]. 中国学校卫生, 2018, 39 (10):1532-1535.
- [154] 李艳辉, 董彬, 邱爱明, 陈雪琳, 董彦会, 王西婕, 杨招庚, 高迪, 邹志勇, 马军. 男生营养状况与青春期启动的关联性[J]. 中国学校卫生, 2020,41(6):807-810.
- [155] 李燕琴,郑全庆,路平,等.农村中学生性与生殖健康短期干预效果评价[J].中华预防医学杂志,2002,36(2):142-143.

- [156] 李游,余小鸣.青少年非意愿怀孕的研究现状及预防对策[J].环境卫生学杂志,2005 (4):243-247.
- [157] 李游,余小鸣,宫露霞,侯洪春,宋青,程亚莉,许俐,孔美荣,李元,王嘉,石晓燕.非意愿妊娠青少年父母教养方式研究[J].中国妇幼保健,2007(25):3541-3543.
- [158] 李雨朦, 关京, 刘文利. 如何上好性教育起始课[J]. 教育家, 2019 (25):31-32.
- [159] 李雨朦,郭凌风,刘文利,刘敬云,孙冬君,王陆雷,余婉婷.初中生青春期性心理健康课程干预效果分析[J].中国学校卫生,2019,40(12):1835-1837.
- [160] 李雨朦,刘文利.立足学校进行全面性教育的优势分析[J].中国性科学,2020,29(1):141-144.
- [161] 李雨朦, 刘文利. 让性说得出口[J]. 江苏教育, 2019 (8):36-39.
- [162] 李雨朦, 刘文利. 如何让小学生理解婚姻和生育自由[J]. 江苏教育. 2019 (16):40-42.
- [163] 李雨朦, 刘文利. 新西兰健康教育经验及其启示[J]. 新课程评论, 2019,36(Z1):180-187.
- [164] 李雨朦,刘文利.中国学校性教育研究和社会资源支持发展脉络[J].中国学校卫生,2020,41 (10):1463-1467.
- [165] 李雨朦,刘文利.中国学校性教育政策发展变迁的特点[J].中国学校卫生,2020,41 (10):1459-1462,1467.
- [166] 廉启国,余春艳,毛燕燕,王尚明,左霞云,涂晓雯,楼超华,周维谨.遭受校园欺凌与不良心理健康结局的关联[J]. 江苏预防医学,2021,32(4):386-389,392.
- [167] 连淑芳. 内隐刻板印象中反刻板印象信息的干预研究[J]. 心理学探新,2013,33(6):525-531.
- [168] 廖琼梅, 晏涵文, 高松景, 李思贤, 郭静静. 高中生两性交往生活技能交互式多媒体教学介入研究[J]. 台湾性学学刊, 2010,16(2):61-72.
- [169] 林建, 唐伟. 网络社交偶遇型性行为与艾滋病传播风险[J]. 甘肃社会科学, 2016 (3):163-167.
- [170] 林琬生,杨光宇,王培花,曹若湘,段佳丽,马军,江崇民,胡承康,甄志平,关明杰.中日两国青少年儿童身高比较研究[J].中国生育健康杂志,2006(5):265-270.
- [171] 刘畅,孙云晓,方刚.性教育,我们在跟互联网抢时间[J].婚姻与家庭(性情读本),2014 (10):7-11.
- [172] 刘德风,姜辉,洪锴,赵连明,柳建明,马潞林,徐李燕.我国现阶段人群中自慰行为的状况及相关分析[J].中国男科学杂志,2010,24(5):26-29.
- [173] 刘华锦,叶正茂.大学生性教育状况的调查与分析[J].内蒙古师范大学学报(教育科学版),2013,26(5):80-83.
- [174] 刘敬云,刘文利.基于性知识和性别刻板印象的小学性教育效果评价[J].中国学校卫生,2019,40 (3):350-354.
- [175] 刘敬云,刘文利.青春期的体像烦恼及其应对策略[J].江苏教育,2019(24):41-43.

- [176] 刘敬云,刘文利.全面性教育中的生活技能教育及其测评[J].江苏教育,2019(40):43-44,51.
- [177] 刘敬云,刘文利.小学性健康教育课程对减少艾滋病歧视的效果评价[J].中国健康教育,2019,35 (12):1108-1121.
- [178] 刘梦孜, 上官芳芳, 王怡, 周婧, 张玫玫, 李雪莉. $6 \sim 11$ 岁女生青春发动时相与问题行为的关系 [J]. 中国神经精神疾病杂志, 2019, 45 (3):161–165.
- [179] 刘爽, 刘文利. 对"大宝"进行生命教育的有利契机[J]. 江苏教育, 2018(40):55,57.
- [180] 刘爽, 刘文利. 父母对儿童性教育的有效方式[J]. 江苏教育, 2018 (24):56-57.
- [181] 刘爽, 刘文利. 全面性教育中的社会性别平等教育[J]. 江苏教育, 2018(48):48-51.
- [182] 刘爽,刘敬云,王丽红,刘文利.特殊儿童性教育课程干预及效果评估[J].中国学校卫生,2019,40 (11):1720-1724.
- [183] 刘文利, 爱德华兹. 城市父母对孩子性教育实践的调查[J]. 当代青年研究, 2006(9):76-80.
- [184] 刘文利, 爱德华兹. 城市父母对青少年子女性教育知识和态度的调查 [J]. 中国青年研究, 2007 (5):48-52.
- [185] 刘文利 . "双重荷兰人": 荷兰性健康教育 [J]. 中国性科学 ,2007 (2) :33-35.
- [186] 刘文利. 法国青少年性健康教育面面观[J]. 中国青年研究,2007(1):86-88.
- [187] 刘文利. 美国媒体和保健系统对青少年性健康的影响 [J]. 中国性科学,2007(7):3-5.
- [188] 刘文利,美国社区对青少年性健康的支持[J],中国性科学,2007(10):43-44.
- [189] 刘文利. 美国公立学校性教育计划与评估[J]. 中国性科学,2008(6):18-20.
- [190] 刘文利. 美国家庭对青少年的性教育[J]. 中国性科学,2008(1):13-15.
- [191] 刘文利. 中国青少年性教育的历史回顾和发展概述 [J]. 中国青年研究,2008 (12):9-12,22.
- [192] 刘文利 .1988-2007: 我国青少年性教育研究综述 [J]. 中国青年研究 ,2008 (3) :50-57.
- [193] 刘文利. 荷兰学校性教育模式及对我们的启示 [J]. 生物学通报, 2008 (1):55-57.
- [194] 刘文利.推动学校性教育健康发展是历史使命,完善家庭性教育引导意识是父母责任[J].中国教师,2011(21):28-31.
- [195] 刘文利. 儿童性教育: 一个全民必须高度关注的教育领域[J]. 人民教育,2013(22):21-23.
- [196] 刘文利. 家庭性教育——父母必须要尽的责任[J]. 家庭教育,2014,477(10):40-41.
- [197] 刘文利. 学校如何关注儿童的"性安全"——义务教育阶段儿童性教育全面缺失的反思[J]. 福建教育,2014,986(48):11-12.
- [198] 刘文利, 苏余芬, 徐韬. 我国预防儿童虐待的最佳实践: 来自政府机构的试点项目经验[J]. 实用预防医学,2015,22(2):254-257.

- [199] 刘文利,魏重政.面对校园欺凌,我们怎么做[J].人民教育,2016,744(11):13-16.
- [200] 刘文利.家庭性教育,不只是生理卫生[J].家庭教育,2016,519(7):41-50.
- [201] 刘文利. 小学全面性教育实践[J]. 江苏教育,2017 (96):13-17.
- [202] 刘文利,魏重政,刘超.从脑与认知神经科学视角看儿童道德发展和教育[J].人民教育,2017,758 (1):68-71.
- [203] 刘文利,元英.我国中小学性教育政策回顾(1984~2016)[J].教育与教学研究,2017,256 (7):44-55.
- [204] 刘文利.全面性教育的十大特点[J].教育家,2018(41):34-35.
- [205] 刘文利. 性教育课堂, 开讲啦[J]. 教育家, 2018 (33):43.
- [206] 刘文利. 关注儿童性教育[J]. 江苏教育,2018 (16):54-55.
- [207] 刘文利. 用爱滋养生命—谈儿童性教育及其课程建设[J]. 新课程评论, 2018, 20(2):71-79.
- [208] 刘文利, 李雨朦. 父母是孩子性教育的启蒙老师[J]. 教育家, 2019 (29):14-16.
- [209] 刘文利, 李雨朦. 关于性教育的提案, 教育部是这样答复的[J]. 教育家, 2019(13):52-54.
- [210] 刘文利, 刘爽. 论我国普及中小学性教育的展望与实现[J]. 教育科学研究, 2019 (7):83-90.
- [211] 刘文利. 学校性教育要走出认识误区[J]. 教育家,2019(29):8-10.
- [212] 刘文利,李雨朦.研发本土全面性教育指南 推动中国学校性教育发展[J].中国学校卫生,2020,41 (10):1441-1445.
- [213] 刘文利. 开展全面性教育, 预防儿童性侵害[J]. 教育家, 2020(17):10-12.
- [214] 刘文利. 预防校园欺凌, 全面性教育大有可为[J]. 教育家, 2020 (1):37-38.
- [215] 刘文利, 芦鸣祺. 美国中小学健康教育概括及其启示[J]. 教育与教学研究, 2021,35 (5):66-80.
- [216] 刘文利. 学校开展全面性教育是实现儿童健康、福祉与尊严的必由之路[J]. 人民教育,2021 (5):47-50.
- [217] 刘文利, 李佳洋. 如何促进儿童积极的情绪发展[J]. 教育家, 2021 (29):69-71.
- [218] 刘晓东,赵辉.1000名中等职业学校学生性健康教育效果[J].中国校医,2011,25(7):505-506.
- [219] 刘艳君,上官芳芳,王怡,盛雪竹,张玫玫.北京市中小学生家长艾滋病知识知晓水平与性教育态度调查分析[J].中国健康教育,2019,35(11):997-1001,1011.
- [220] 龙迪.人际支持,抚平孩子心里的伤口[J].教育家,2019(29):17-18.
- [221] 龙璐,聂绍发,王敏,等.艺术类高校大学生生殖健康教育干预效果评价[J].中国公共卫生,2010,26(12):1568-1569.

- [222] 楼超华,丁永刚,高尔生.高中学生性与生殖健康教育效果的研究[J].中国公共卫生,2002,18 (6):645-646.
- [223] 楼超华,沈燕,涂晓雯,高尔生.社区性与生殖健康教育和服务项目对青(少)年性相关态度的影响[J].生殖与避孕,2003(5):283-290,298.
- [224] 楼超华, 沈燕, 王波, 等. 性教育和生殖健康服务对促进上海市郊未婚青年避孕的效果 [J]. 复旦学报: 医学版, 2004,31(2):149–154.
- [225] 楼超华,左霞云,尹逊丽,余春艳,王子亮,王金桃,崔念,涂晓雯.未婚妊娠女性心理状况及人工流产决定过程[J].中国公共卫生,2016,32(3):262-265.
- [226] 卢国斌, 王忆军, 欧萍, 等.2003 ~ 2006 年哈尔滨市中学生性教育效果评价 [J]. 中国妇幼保健,2010,25(32):4663-4666.
- [227] 芦鸣祺, 刘文利. 家庭性教育是预防儿童性侵害的重要防线[J]. 江苏教育, 2018 (96):44-46.
- [228] 芦鸣祺, 刘文利. 全面性教育发展的国际经验及启示[J]. 新课程评论, 2018 (Z1):176-185.
- [229] 芦鸣祺, 刘文利. 参与式教学使全面性教育更加有效[J]. 江苏教育, 2019 (88):41-43.
- [230] 芦鸣祺, 刘文利. 家庭性教育是预防儿童性侵的首道防线 [J]. 教育家, 2019 (29):11-13.
- [231] 芦鸣祺, 刘文利. 全面性教育中的价值观教育[J]. 江苏教育, 2019 (96):40-42.
- [232] 芦鸣祺, 刘文利. 全面性教育中预防性别暴力的教育[J]. 江苏教育, 2019 (32):39-43.
- [233] 芦咏莉,董奇,邹泓.社会榜样、社会关系质量与青少年社会观念和社会行为关系的研究[J]. 心理发展与教育,1998 (1):1-6.
- [234] 芦咏莉, 董奇. 中小学如何开展心理健康教育[J]. 中小学管理, 1999(6):26-27.
- [235] 芦咏莉, 王成全, 董奇. 学校心理健康教育的内容[J]. 中小学管理, 1999(Z1):34-36.
- [236] 罗冬梅, 闫晓晋, 胡佩瑾, 张京舒, 宋逸, 马军.1990 ~ 2010 年中国女性早婚和生育的地区不平等性[J]. 北京大学学报(医学版),2020,52(3):479-485.
- [237] 罗纳, 王淑香, 余小鸣. 海淀区中学生性行为现况及相关因素研究[J]. 中华预防医学杂志, 2006 (5):371-372.
- [238] 马骋, 张秀娟, 包兴欢, 高琴. 儿童性安全教育的困境与出路[J]. 教育与教学研究, 2017, 31 (7):65-70.
- [239] 马骋, 苟萍. 儿童性安全教育呼唤家校合作 [J]. 教育家, 2020 (21):45-46.
- [240] 马军. 我国儿童青少年面临的主要健康问题及应对策略 [J]. 北京大学学报(医学版),2013,45 (3):337-342.
- [241] 马军.中国儿童青少年主要健康问题及应对策略[J].中国学校卫生,2015,36(6):801-804.
- [242] 马军. 儿童生长发育与营养[J]. 中国儿童保健杂志, 2018,26(9):932-934.

- [243] 马军. 关注性健康教育 促进儿童青少年健康 [J]. 教育家, 2018 (41):31-33.
- [244] 马军,马迎华.为生命安全与健康筑牢防线——《生命安全与健康教育进中小学课程教材指南》解读[J].基础教育课程,2021 (23):10-13.
- [245] 马爽,陈晶琦,吕林景,武俊珍,郭苏影.青少年童年期同伴躯体暴力受害与健康危险行为的关联[J].中国学校卫生,2018,39(4):566-569.
- [246] 马亚婷, 余小鸣, 卫薇, 李游. 男性青少年对生殖健康服务的利用及影响因素分析 [J]. 中国儿童保健杂志, 2008(2):152-154.
- [247] 马亚婷, 余小鸣. 国内外学校健康教育标准及实施现况分析[J]. 中国学校卫生, 2010, 31 (10):1278-1280.
- [248] 马迎华.推进中国青少年学生艾滋病综合防控策略的实施[J].中国学校卫生,2017,38 (9):1281-1284.
- [249] 马迎华.中国青少年学生艾滋病防控的关键要素[J].中国学校卫生, 2020,41 (12):1761-1766.
- [250] 马玉霞, 陈晶琦, DUNNE M P. 梁艺怀, 程亚杰, 吴春眉, 陈铂. 儿童期被徒手打经历对青少年心理健康的影响 [J]. 中国学校卫生, 2005 (12):1001-1003.
- [251] 茅群霞,吴尚纯.我国农村地区青少年生殖健康状况[J].中国计划生育学杂志,2015,23 (9):645-648.
- [252] 茅群霞,吴尚纯,李来宝,胡丽娜,常青,杨华,黄丽丽,梁艳.我国部分地区青少年人工流产相关服务现状调查[J].中国计划生育学杂志,2019,27(12):1579-1584.
- [253] 茅群霞,吴尚纯,叶汉风,袁彦玲,吴美荣,丛捷,李来宝,王晨.云南和河北部分农村贫困地区低龄留守儿童性与生殖健康认知情况[J].中国计划生育学杂志,2019,27(4):428-431.
- [254] 茅群霞,刘庆,张维宏,张巧,刘晓红,王建梅,刘明星,程丽娜.人工流产与继发性不孕相关性的研究-基于多中心病例对照研究的结果[J].生殖医学杂志,2021,30(6):721-727.
- [255] 孟祥睿,王海俊,付连国,董彬,马军.中国 11 ~ 15 岁青春期男生遗精发生与身体形态发育的关系[J].中华预防医学杂志,2013,47 (8):695-699.
- [256] 聂慧敏,余小鸣,谭雪庆,王宇晴,王嘉.美国学校性教育相关课程标准及政策分析[J].中国学校卫生,2018,39(8):1124-1127.
- [257] 聂慧敏,余小鸣,宋玉珍,曹型远,李晓东,闫绍惠,彭卫红,汤佳,石琰琴,张庭浩.学生家长教师对全面性教育内容的需求分析[J].中国学校卫生,2019,40(12):1803-1807,1811.
- [258] 聂慧敏,余小鸣,谭雪庆,王宇晴,石琰琴,张庭浩,宋玉珍,曹型远,夏明娟,闫绍惠,李晓东,汤佳,彭卫红.中小学生性知识态度及相关影响因素分析[J].中国学校卫生,2019,40(4):515-518,522.
- [259] 聂慧敏, 余小鸣. 中外性教育相关政策指南比较[J]. 中国学校卫生, 2019,40(5):649-653.
- [260] 潘绥铭. 禁欲主义的"防艾"逻辑[J]. 观察与思考,2005(2):54.

- [261] 潘绥铭, 黄盈盈, 李楯. 中国艾滋病"问题"解析[J]. 中国社会科学, 2006(1):85-95,207.
- [262] 潘绥铭. 中国性教育的特有问题[J]. 生命世界, 2007(3):38-41.
- [263] 潘绥铭, 黄盈盈. 我国 14~17岁青少年性教育效果的实证分析 [J]. 中国青年研究,2011 (8):5-9.
- [264] 潘绥铭.中国青少年:先有爱才有性——2010年青少年性爱观调查[J].健康管理,2011,2 (10):90-93.
- [265] 彭凡辉, 王慧. 校外青少年艾滋病相关知识、态度及危险行为干预研究 [J]. 齐齐哈尔医学院学报, 2012,33 (20):2736-2738.
- [266] 彭涛. 基于社会性别视角的青少年性教育[J]. 中国性科学, 2012,21 (8):67-68,75.
- [267] 皮兴灿,王曦影.多元视野下的中国男性气质研究[J].青年研究,2017 (2):85-93,96.
- [268] 齐文娟, 胡塔静, 李红艳, 楼超华, 廉启国, 左霞云, 涂晓雯. 听力障碍学生生殖健康知识状况调查[J]. 中华生殖与避孕杂志, 2018, 38 (11):905-910.
- [269] 任恩顺. 社会公正、社会规范与犯罪[J]. 公安大学学报. 1995(5):72-76.
- [270] 任培丽, 蒋凯, 徐莉娟, 等. 商丘市大学生生殖健康教育干预效果评价[J]. 中国学校卫生, 2013, 34 (8):929-931.
- [271] 任培丽,徐莉娟,王蘅.商丘女大学生生殖健康干预效果及教育需求分析[J].中国妇幼保健,2013,28(30):4992-4995.
- [272] 阮芳赋. 从医学看性教育[J]. 青年研究,1985(2):38-43.
- [273] 邵昌玉, 胡珍. 当代大学生恋爱观现状及对策研究[J]. 教育与教学研究,2013,27(5):58-60,78.
- [274] 史静寰.教材与教学:影响学生性别观念及行为的重要媒介[J].妇女研究论丛,2002,(2):32-36.
- [275] 石晓燕,余小鸣,段春明,游新,王嘉.校外青少年艾滋病防治服务利用因素研究[J].现代预防 医学,2007(11):2031-2033,2038.
- [276] 石晓燕,余小鸣,段春明,王嘉,游新,高素红,李游.校外青少年艾滋病相关知识态度及危险 行为调查 [J]. 中国艾滋病性病,2008 (1):52-54.
- [277] 宋健. 宽松生育政策环境下的出生人口性别比失衡[J]. 人口与计划生育,2018,249(5):15-18.
- [278] 宋文珍. 预防和控制儿童意外伤害的基本对策[J]. 中国儿童保健杂志,2006(4):325.
- [279] 宋文珍.以科学发展观为指导落实儿童优先战略[J].中国妇运,2009(9):30-33.
- [280] 宋文珍. 流动儿童权利保护思考与研究 [J]. 中国妇运, 2010(6):16-17, 20.
- [281] 宋文珍. 加快建立适度普惠型的儿童福利制度[J]. 中国妇运,2013(6):35-37.
- [282] 宋文珍. 用制度保护我们的孩子[J]. 求是,2013(5):55-56.

- [283] 宋文珍. 加强合作 共同预防和控制儿童伤害[J]. 中国妇运,2014(7):18-21.
- [284] 宋文珍. 让儿童优先成为国家战略[J]. 中国妇运,2014(6):20-23.
- [285] 宋文珍. 从三个视角打通女童保护最后一公里[J]. 中国妇运,2016(11):28-29.
- [286] 宋文珍. 探索解决留守儿童问题的新途径[J]. 中国妇运,2016(3):15-17.
- [287] 宋文珍. 新时代儿童权利保护的价值取向[J]. 中国妇运,2018(6):21-22.
- [288] 宋文珍. 筑牢未成年人保护的法治基石[J]. 少年儿童研究, 2021 (8):42-44.
- [289] 宋逸, 马军, 胡佩瑾, 张冰. 中国 11 ~ 18 岁汉族男生首次遗精年龄的地域分布及 10 年变化分析 [J]. 中华预防医学杂志, 2011 (6):522-526.
- [290] 宋逸, 马军, 胡佩瑾, 张冰. 中国 9 ~ 18 岁汉族女生月经初潮年龄的地域分布及趋势分析 [J]. 北京大学学报(医学版),2011,43(3):360–364.
- [291] 宋逸,马军,胡佩瑾,张冰.中国9~18岁少数民族女生月经初潮与形态发育关系研究[J].中国学校卫生,2011,32(2):131–133.
- [292] 宋逸,胡佩瑾,张冰,马军.中国 18 个少数民族 11 ~ 18 岁男生首次遗精年龄调查 [J]. 中华预防医学杂志,2012 (3):209-213.
- [293] 宋逸,季成叶,胡佩瑾,等.我国城、乡高中生性行为发生的比较[J].北京大学学报(医学版),2013,45(3):376-381.
- [294] 宋逸,张冰,胡佩瑾,马军.2010年中国 26 个少数民族 9 ~ 18 岁女生月经初潮年龄现状分析与比较[J].北京大学学报(医学版),2014,46(3):360-365.
- [295] 宋逸,胡佩瑾,张冰,马军.1985年至2010年中国18个少数民族17岁学生身高趋势分析[J]. 北京大学学报(医学版),2015,47(3):414-419.
- [296] 宋逸, 闫晓晋, 张京舒, 马宁, 刘云飞, 胡佩瑾, 马军.1985 ~ 2014 年中国汉族 18 岁青少年身高长期趋势的性别差异变化[J]. 中华流行病学杂志, 2021,42 (5):801-806.
- [297] 孙江平,胡翼飞,吴迪,宋文珍.联合国文件《适合儿童生长的世界》中 AIDS 预防控制目标与中国有关目标的比较分析 [J].中国艾滋病性病,2004(5):374-376.
- [298] 孙莉,张建新,魏嗣琼,等.职业高中学生性病艾滋病健康教育方式探讨[J].中国学校卫生,2003,24(4):369-371.
- [299] 孙玉颖, 余小鸣, 朵林, 薛珲, 孙江平. 云南省 149 名青少年吸毒者艾滋病防治服务利用现状调查 [J]. 中国艾滋病性病, 2013,19 (5):340-343.
- [300] 唐知然,王静,童立,覃念,李义义,彭晓辉.青少年性教育科普畅销书的特征分析[J].中国性科学,2013,22(7):82-86.
- [301] 陶树果. 大学生 LGBT 群体现状分析及其对策探究[J]. 高教论坛,2021(1):68-72.
- [302] 童小军,赵静,朱晓宇.青少年援助交际行为访谈报告[J]. 当代青年研究,2010 (9):21-29.

- [303] 田伟,王铮,闫丽珍,等.复合家庭类型细分方案——以河北省为例[J].西南师范大学学报(自然科学版),2016,41(12):60-67.
- [304] 涂晓雯,程艳,楼超华,高尔生.中学生家长对家庭性教育的看法及影响因素分析[J].中国卫生统计,2005(2):76-79.
- [305] 涂晓雯, 楼超华, 高尔生. 未婚青少年性与生殖健康社区干预的可持续性分析[J]. 中国计划生育学杂志, 2006,14(3):150-153.
- [306] 涂晓雯, 楼超华, 高尔生. 社区干预项目对未婚年轻人性行为的长期影响 [J]. 复旦学报(医学版),2006,33(2):192-196.
- [307] 涂晓雯, 胡塔静, 李红艳, 楼超华. 残障青少年获取性教育与生殖健康服务的定性研究 [J]. 中国学校卫生, 2018, 39(8):1165-1168, 1172.
- [308] 涂晓雯, 胡塔静, 楼超华, 廉启国. 父母对残障青少年性教育的态度和看法[J]. 国际生殖健康/ 计划生育杂志, 2018,37(5):357-359,371.
- [309] 涂晓雯, 齐文娟, 廉启国, 左霞云, 毛燕燕, 楼超华, 周维谨. 嘉兴市某县小学高年级学生性与生殖健康知识水平及获取途径[J]. 中国学校卫生, 2019,40(11):1633-1637.
- [310] 万幸, 余小鸣. 国内外残疾青少年性与生殖健康研究进展[J]. 中国性科学, 2016, 25 (1): 126–129.
- [311] 万正维, 胡珍. 新世纪大学生性教育变迁的趋势研究及建议[J]. 教育与教学研究,2013,27 (8):23-28,81.
- [312] 王道阳, 张更立, 姚本先, 大学生性别角色观的差异[J], 心理学报, 2005, 37 (5):658-664.
- [313] 王付曼, 陈晶琦, 肖晚晴, 马亚婷, 张曼. 小学生同伴暴力发生现状及与暴力信念和相关技能的关系[J]. 中国心理卫生杂志, 2011, 25(6):449-453.
- [314] 汪亮,余翠萍,黄阿毛,蒋妮,沈浩巍,潘明安,夏苏建,王声湧.粤、港、澳三地大学生对同性恋的认知调查[J].中国公共卫生,2004(8):78-79.
- [315] 王璐, 余小鸣. 校外青少年预防艾滋病健康教育效果的评价研究[J]. 中国艾滋病性病,2016,22 (7):532-535,542.
- [316] 王萍,潘新娟,吕姝焱,等.洛阳市中学生性与生殖健康教育干预研究[J].中国学校卫生,2014,35 (12):1796-1799.
- [317] 王曦影, 王怡然. 新世纪中国青少年性教育研究回顾与展望[J]. 青年研究, 2012 (2):48-57,95.
- [318] 王曦影,杨梨.同伴教育、学校社工与青年领导力:预防校园欺凌之行动研究[J].社会建设,2018,5(3):16-31.
- [319] 王曦影, 仇雪郦. 表演"传统"和展现"开放": 北京跨国恋情中的女性经验 [J]. 华东理工大学学报 (社会科学版),2020,35 (3):1-16.
- [320] 王曦影,王琦.抵抗、风格与收编:青少年恋爱亚文化[J].人口与社会,2021,37(3):86-96.

- [321] 王曦影,张林林.中国21世纪性教育干预研究系统综述[J].中国学校卫生,2021,42 (1):146-152.
- [322] 王晓英 .60 名青少年流产者性健康教育及保健服务调查 [J]. 职业卫生与应急救援 ,2016,34 (2):136-138.
- [323] 王燕玲,常春,钮文异,等.高中生艾滋病和安全性行为同伴教育近期效果评价[J].中国学校卫生,2002,23(4):329-331.
- [324] 王怡欣, 马迎华, 张冰, 李恬静, 周佳. 中国部分省市大学生艾滋病知识来源及知晓情况分析 [J]. 中国学校卫生, 2017, 38 (5):657-659, 662.
- [325] 卫薇,余小鸣,宫露霞,冯琼,宋青.女性青少年自我控制能力及其相关因素分析[J].中国学校卫生,2008(3):220-221,223.
- [326] 魏伟.同性伴侣家庭的生育:实现途径、家庭生活和社会适应[J].山东社会科学,2016 (12):75-82.
- [327] 魏伟, 高晓君. 中国同性育儿家庭中的隔代照料 [J]. 中国研究, 2020 (1):63-85,255.
- [328] 魏鑫艺, 苟萍. 谁说"男孩不吃亏"[J]. 教育家, 2020 (25):38-39.
- [329] 魏鑫艺. 迈进青春, 走向成熟——小学六年级青春期性教育教学实践 [J]. 青春期健康,2021,19 (10):80-83.
- [330] 魏重政,刘文利.性少数学生心理健康与遭受校园欺凌之间关系研究[J].中国临床心理学杂志,2015,23(4):701-705.
- [331] 温勃,董彦会,杨招庚,李艳辉,董彬,马军.中国 11 ~ 18 岁青春期男生首次遗精年龄与睡眠时间的关系 [J].中国学校卫生,2018,39(8):1140-1143.
- [332] 温勃,董彦会,杨招庚,王西婕,李艳辉,董彬,邹志勇,马军.中国 9 \sim 14 岁青春期女生睡眠时间与月经初潮的关系 [J].中国儿童保健杂志,2019,27 (7):701–705.
- [333] 吴阶平. 开展青春期性知识和性道德教育刻不容缓[J]. 中国心理卫生杂志,1987,7(1):3-7.
- [334] 吴少芸, 杨玉华, 林银妹. 综合干预对东莞市未婚青年生殖健康的影响 [J]. 广东医学, 2012, 33 (14):2169-2171.
- [335] 吴小英. 市场化背景下性别话语的转型[J]. 中国社会科学,2009,(2):163-176.
- [336] 吴晓燕,张玫玫.发达国家中小学性教育概述[J].基础教育参考,2012(19):6-8,20.
- [337] 吴玥娇,陈晶琦,马爽.青少年童年期遭受同伴网络暴力与健康危险行为的关联[J].中国学校卫生,2019,40(8):1227-1229.
- [338] 吴玥娇,陈晶琦,吕林景,郭苏影,王海雪,金怡晨.河南省某地区小学教师对预防儿童性侵犯问题的认识及实践情况[J].中国性科学,2020,29(12):144-147.
- [339] 吴玥娇,陈晶琦.东北某市8所小学预防儿童性侵犯工作的定性研究[J].中国生育健康杂志,2021,32(5):423-426.

- [340] 席海洋, 左霞云, 余春艳, 廉启国, 涂晓雯, 闫丽, 楼超华. 上海市青春期早期青少年性别刻板印象及其影响因素[J]. 中国学校卫生, 2020,41(8):1185-1188, 1192.
- [341] 席海洋,左霞云,余春艳,廉启国,钟向阳,涂晓雯,楼超华.上海市青春期早期青少年异性恋认同及其影响因素分析[J].中国学校卫生,2020,41(1):78-81,85.
- [342] 肖迪,李孟儒,彭涛.校园欺凌行为的性别视角分析[J].哈尔滨医科大学学报,2020,54 (6):672-677.
- [343] 肖瑶, 刘文利. 全面性教育中的爱情教育[J]. 江苏教育, 2018 (72): 46-47, 49.
- [344] 肖瑶, 芦鸣祺, 刘文利, 秦韶正. 脑科学研究成果对青少年性教育的启示 [J]. 中国学校卫生,2020,41 (10):1594-1600.
- [345] 谢静波, 胡晓雯, 谭晖, 等. 以参与式学习为主的大学生生殖健康教育效果评价 [J]. 中国学校卫生, 2014, 35 (10):1465-1468.
- [346] 谢起理. 高中三年级学生的艾滋病知识、态度和社会行为调查[J]. 预防医学情报杂志,2017,33 (7):660-664.
- [347] 徐海燕, 苟萍. 初中生学习焦虑与青春期性心理健康关系研究 [J]. 教育与教学研究,2018,32 (7):36-40,126.
- [348] 许洁霜,钱序.我国青少年生殖健康政策回顾和发展趋势分析[J].中国卫生政策研究,2013,6 (2):49-55.
- [349] 徐韬, 焦富勇, 潘建平, 陈晶琦, 黄晓燕, 刘文利, 宫丽敏, 王惠珊. 中国儿童虐待流行病学研究的文献系统评价研究[J]. 中国儿童保健杂志, 2014, 22(9):972-975.
- [350] 徐亚吉, 胡珍. 浅议基于社会性别的中职生性教育[J]. 中国性科学, 2012, 21(6):43-44, 49.
- [351] 徐轶群,季成叶,马军,潘勇平.青春发育后期男生代谢综合征及各成分流行状况[J].中国学校卫生,2007(5):398-399,401.
- [352] 晏涵文, 刘洁心, 李思贤, 冯嘉玉. 台湾国小、国中、高中职学校性教育成果调查研究 [J]. 台湾性学学刊, 2009, 15(2):65-80.
- [353] 阳益德, 马军, 付连国, 王海俊, 董彬, 宋逸, 尚晓瑞, 刘芳宏, 张子龙. 中国青春期女生月经初潮较早与形态发育的关系[J]. 中华预防医学杂志, 2013,47(8):712-717.
- [354] 杨波,庄臻丽,杨祖艳,等.保山女大学生生殖健康认知现状及干预效果调查分析[J].中国现代 医生,2017,55 (26):119-122.
- [355] 杨梨,王曦影.家庭性教育影响因素的国外研究进展[J].中国学校卫生,2018,39 (11):1756-1760.
- [356] 杨梨,王曦影.同伴群体中力量不对等机制的形成与运作——基于高中校园欺凌的案例研究[J]. 中国研究,2020(1):121-136,256-257.
- [357] 杨梨,王曦影:"灰色地带"校园欺凌:青少年主体视角下的新解读[J].中国青年社会科学,2021,40 (4):11.

- [358] 杨梨,王曦影,国外残障学生欺凌干预研究综述与展望[J],社会工作与管理,2021,21(3):23-29.
- [359] 杨梨,王曦影.农村青少年校园欺凌的群体文化与底层再生产[J].教育学报,2021,17 (4):133-147.
- [360] 杨静昀,张彩秀,晏涵文,刘心洁.戏剧教育介入于国小高年级学生性知识、性态度、性健康生活技能自我效能之效果探讨——以南投县国小为例[J].健康促进与卫生教育学报,2012 (37):1-22.
- [361] 杨晓煦,郭菁兰,郭耘,等.石河子大学学生性与生殖健康教育效果评价[J].中国学校卫生,2006,27(7):579-580.
- [362] 杨雄.中国城市中学生的性意识与性行为[J].上海社会科学院学术季刊,2001(2):137-146.
- [363] 杨雄. 弱势青少年生存状况与社会支持[J]. 社会科学,2004(5):64-73.
- [364] 杨雄. 生命教育与青少年发展[J]. 当代青年研究,2005(1):1-5.
- [365] 杨雄,陈建军.关于中国儿童安全现状的若干思考[J]. 当代青年研究,2005(11):1-8.
- [366] 杨雄.家长要注意培养孩子的自我保护能力[J].家庭教育,2005(2):10.
- [367] 杨雄.青少年性行为"滞后释放"现象的实证解释[J]. 社会科学, 2006(5):92-105.
- [368] 杨雄.青少年性行为"滞后释放"现象[J].中国性科学,2008(1):33-37.
- [369] 杨雄,董小苹,魏莉莉.中国青少年对智障学生的态度调查[J].青年研究,2008(7):1-7.
- [370] 杨雄, 郝振. 上海市儿童权利家庭保护的现状与挑战[J]. 社会科学, 2008(6):82-88, 190-191.
- [371] 杨雄. 应将家庭教育纳入国家中长期教育规划[J]. 上海教育, 2009 (8):6.
- [372] 杨雄. 防止众多城市青少年"被网瘾"[J]. 上海教育,2010(6):31.
- [373] 杨雄.家庭"三角关系"对儿童发展的影响及政策实施[J]. 当代青年研究,2011(7):1-7.
- [374] 杨雄 . "男子中学"不是解决"男孩危机"的根本出路 [J]. 上海教育 ,2012(13):38.
- [375] 杨云娟, 王永兴, 刘宏, 等. 云南省大学生非婚性行为及多性伴性行为现况 [J]. 中国学校卫生,2016,37 (10):1464-1466.
- [376] 叶强. 论作为基本权利的家庭教育权[J]. 财经法学,2018(2):75-94.
- [377] 叶振淼, 王大勇, 赵丽娜, 张鹤美, 苏德华, 陈向阳, 汪若秋. 温州市 15 ~ 24 岁青年学生艾滋病流行特征及相关知识行为调查分析 [J]. 实用预防医学, 2019, 26 (11):1356-1359.
- [378] 应笑,涂晓雯,楼超华,左霞云,高尔生.中学生性及生殖健康教育干预效果评价[J].中国公共卫生,2008(5):633-634.
- [379] 余春艳, 廉启国, 钟向阳, 张家帅, 涂晓雯, 楼超华, 左霞云. 冲动性对青少年观看色情片的影响 [J]. 中国学校卫生, 2021, 42 (3): 422-425.

- [380] 余惠莺, 黄翠萍, 尹一桥. 澳门中学生性教育现状与对策初探[J]. 中国性科学, 2014, 23 (9):85–87.
- [381] 余惠莺,黄翠萍,罗文秀,尹一桥,罗家俊.全面的性教育课程对对提升澳门初中生性知识的成效[J].中国性科学,2018,27(9):132-135.
- [382] 余惠莺,黄翠萍,尹一桥,罗文秀,罗家俊.探讨澳门性教育发展趋势[J].中国性科学,2019,28 (1):140-143.
- [383] 余美侨,静进,麦锦城,陈亚军,张雯,彭仰华,刘步云,暴芃,马军.广州市小学女童初潮痛经发生现况[J].中国学校卫生,2014,35(4):564-566.
- [384] 余小鸣. 澳大利亚学校健康教育一瞥 [J]. 中国学校卫生,2000(4):335-336.
- [385] 余小鸣. 澳大利亚青少年生殖健康促进现状 [J]. 中国学校卫生,2001(1):92-93.
- [386] 余小鸣.对新加坡和马来西亚青春期生殖健康的考察与思考[J].中国妇幼保健,2001(4):53-54.
- [387] 余小鸣. 青春期生殖健康与保健[J]. 中国初级卫生保健, 2001 (11):28-29.
- [388] 余小鸣,潘勇平,王嘉,籍红,杨溢,杨书祥.京津两市中学生青春期发育与性行为比较[J].中国学校卫生,2002(4):292-294.
- [389] 余小鸣,林琳,王嘉,张佳持,赵国志.北京郊县中学生自我指向性暴力行为及相关因素[J].中国生育健康杂志,2004(1):37-40.
- [390] 余小鸣,张佳持,宫露霞,张淑平,卓乐雯,曾芳玲,杨勤,徐育松,王梅,于海莲.中国4城市青少年生殖健康就诊意愿及影响因素分析[J].中国预防医学杂志,2004(5):16–19.
- [391] 余小鸣. 青春期心理发展及健康促进对策[J]. 中国儿童保健杂志, 2005,13(4):3.
- [392] 余小鸣. 青少年的性指导与性教育[J]. 实用妇产科杂志, 2005(12):718-720.
- [393] 余小鸣. 学校健康教育的发展及挑战[J]. 中国健康教育,2005,21 (5):377-380.
- [394] 余小鸣, 阮明杰, 石晓燕, 罗娜, 王书香, 王嘉. 北京市城区中学生性态度取向及与性行为的交互作用[J]. 中国儿童保健杂志, 2006(6):554-556.
- [395] 余小鸣,王书香,罗娜,阮明杰,王嘉,石晓燕.北京市城区中学生性意识及与性行为的相关研究[J].中国学校卫生,2006(5):434-435.
- [396] 余小鸣, 张芯, 杨土保, 王书梅, 朱广荣, 石晓燕, 柴海鹰, 周绍英, 张兵, 王嘉. 中国中小学校健康教育研究(1): 学生健康知识态度行为现况[J]. 中国学校卫生, 2007(1): 7–9.
- [397] 余小鸣,张芯,朱广荣,石晓燕,杨土保,王书梅,柴海鹰,周绍英,张兵,王嘉.中小学校健康教育研究(2):学生健康知信行相关影响因素[J].中国学校卫生,2007(2):107-108,110.
- [398] 余小鸣, 张芯, 石晓燕, 周绍英, 杨土保, 王书梅, 朱广荣, 柴海鹰, 张兵, 王嘉. 中小学校健康教育研究(3): 学校健康教育需求[J]. 中国学校卫生, 2007(3): 203-205.

- [399] 余小鸣,李游,宫露霞,侯洪春,程亚丽,李元,许俐,王嘉,石晓燕.未婚妊娠少女应对方式及 其与心理健康状况的关系[J].中国心理卫生杂志,2008(2):142-143.
- [400] 余小鸣, 卫薇, 高素红, 袁博成, 王嘉. 青少年生殖健康知信行与心理社会能力及关联分析 [J]. 中国儿童保健杂志, 2009, 17 (5):500-502, 505.
- [401] 余小鸣,卫薇,高素红.青少年未婚妊娠的多因素分析[J].中国妇幼保健,2010,25(1):70-73.
- [402] 余小鸣,卫薇,宫露霞,等.未婚怀孕青少年综合干预效果分析[J].中国学校卫生,2010,31 (2):154-156.
- [403] 余小鸣,郭帅军,徐震雷,王璐.中国青少年性与生殖健康教育现况及效果的系统评价[J].中国性科学,2012,21(4):41-44.
- [404] 余小鸣,张译天,黄思哲,段佳丽,万幸.青少年意外伤害与健康危险行为的关联研究[J].中华行为医学与脑科学杂志,2017,26(2):163-166.
- [405] 余小鸣,张芯,谭雪庆,王宇晴,聂慧敏,张庭浩,石琰琴,郭帅军.学校性教育政策的国际间比较[J].中国学校卫生,2018,39(8):1135-1139,1143.
- [406] 余小鸣. 国际比较视野下的学校性教育发展[J]. 教育家,2019(17):49-51.
- [407] 元英,刘文利,黄志军.芬兰中小学新教师入职培训的背景、特点及启示[J].教学与管理,2019,767(4):80-83.
- [408] 元英, 刘文利. 澳大利亚家校合作评估及其启示[J]. 教学与管理, 2019 (28):79-82.
- [409] 元英,刘文利.改革开放以来我国中小学健康教育的发展历程、特征与启示[J].河北师范大学学报/教育科学版,2019,21 (2):105-112.
- [410] 元英, 刘文利. 基于核心素养的芬兰初中健康教育课程标准研究[J]. 中小学教师培训,2019,391 (2):73-78.
- [411] 袁瑗,陈敏讷,唐昆,孙昕霙.七年级学生性教育课程包有效性评估[J].中国学校卫生,2021,42 (7):1020-1023,1028.
- [412] 岳盼,刘文利.美国两大性教育模式的效果比较与政策发展[J].比较教育研究,2014,36 (1):75-80,92.
- [413] 张冰,季成叶,宋逸,张芯,廖文科,马军.学校预防艾滋病健康教育视听材料评价[J].中国学校卫生,2006(1):71-72.
- [414] 张红川, 王耘, 孙燕青, 王昌海, 董奇. 初中阶段青少年健康行为的因素结构特点分析 [J]. 心理 发展与教育,2001(2):19-25.
- [415] 张红霞,高源.中专学生性病、艾滋病和安全性行为同伴教育近期效果评价[J].中国校医,2002,16(1):1-4.
- [416] 张佳持,余小鸣.青少年生殖健康服务的利用及其影响因素[J].中国生育健康杂志,2004 (3):187-190.

- [417] 张家帅, 左霞云, 余春艳, 廉启国, 钟向阳, 涂晓雯, 楼超华. 性别角色态度与青少年抑郁的关联[J]. 中国学校卫生, 2022, 43 (2):181-184, 189.
- [418] 张京舒, 闫晓晋, 胡佩瑾, 罗冬梅, 马宁, 马军, 宋逸.1985 ~ 2014 年中国汉族 13 ~ 18 岁学生体质健康达标优良率变化趋势及相关因素分析 [J]. 中华预防医学杂志, 2020, 54 (9):981-987.
- [419] 张柳,王曦影.家庭暴力的社会生态学个案研究[J].中国研究,2020(1):223-240,260.
- [420] 张曼, 陈晶琦. 南乐县 2 所小学一年级学生家长预防儿童性侵犯知识态度行为调查 [J]. 中国学校卫生,2011,32 (3):277-279.
- [421] 张玫玫, 那毅. 浅谈性价值观——当前我国性教育的重要课题[J]. 中国性科学,2004 (11):25-26.
- [422] 张玫玫. 多元视野中的性健康教育[J]. 人口与发展,2010,16(4):59-62.
- [423] 张玫玫.解析我国当代所需的儿童性教育[J].中国教师,2011(21):24-27.
- [424] 张玫玫.关于中小学性教育模式的研究——《北京市中小学性教育模式研究》项目阶段性成果[J]. 基础教育参考,2012(19):3-5.
- [425] 张玫玫. 性教育是一项庞大的工程 [J]. 中国性科学,2012,21(2):1.
- [426] 张玫玫. 让性教育追赶上成长的脚步——谈当前我国未成年人性教育的误区[J]. 人民教育,2013 (18):35-37.
- [427] 张玫玫,李莉,中小学性健康教育中的四个热点问题[J],中小学德育,2014(11):64-66,74.
- [428] 张玫玫.70 年来中国青少年性教育变迁[J]. 中国性科学, 2019,28 (12):3.
- [429] 张玫玫. 性教育, 家长是第一责任人[J]. 大众健康, 2021 (1):112.
- [430] 张庭浩, 余小鸣, 石琰琴. 我国义务教育阶段课程中性教育内容框架分析 [J]. 中国学校卫生, 2017, 38 (8):1127-1130.
- [431] 张庭浩, 余小鸣, 石琰琴, 王嘉. 运用典则相关法探究家长对学生性教育相关知识、态度的影响 [J]. 中国性科学, 2018, 27 (12):147–151.
- [432] 张文静,马迎华,高迪思,王怡欣,彭华参.中国部分省市大学生性教育现状与性行为影响因素分析[J].中国学校卫生,2018,39(6):814-817.
- [433] 张文静,黄晓玲,高迪思,陈天麒,崔闻心,郭雪儿,胡翼飞,吴静,崔岩,马迎华.青年学生 男男性行为人群 HIV 相关知识认知现状及 HIV 感染影响因素分析 [J]. 中国公共卫生,2019,35 (12):1-5.
- [434] 张文静, 王怡欣, 吴静, 胡翼飞, 高迪思, 陈天麒, 崔闻心, 马迎华. 艾滋病高危青年学生大众意见领袖干预模式效果评价[J]. 中国学校卫生, 2019, 40 (4):527-530.
- [435] 张芯,马军,余小鸣.改革开放30年我国学校卫生与健康教育发展成就[J].中国学校卫生,2009,30(5):385-391,393.

- [436] 张兴慧,陈福美,张彩,王耘.中小学生日常情绪体验与亲子依恋、同伴依恋的关系[J].中国心理卫生杂志,2018,32(9):753-759.
- [437] 张志红,曹小明,张文浩,等.性教育对青少年性知识水平的影响[J].中国计划生育学杂志,2003,11 (10):599-603.
- [438] 赵乾程,张洪亮,唐文豪,姜辉.人类精子库的发展应用及伦理学思考[J]. 医学与哲学,2021,42 (5):28-31.
- [439] 郑晓瑛,陈功.中国青少年生殖健康可及性调查基础数据报告[J].人口与发展,2010,16 (3):2-16.
- [440] 郑雨佳,余春艳,左霞云,廉启国,楼超华,涂晓雯.母亲对青少年暴露于亲密镜头的反应与初中生观看色情片的关联[J].中国学校卫生,2021,42(5):671-674.
- [441] 钟年.家庭类型研究及中国的家庭类型[J].社会科学动态,1999(6):34-35.
- [442] 周珺, 刘文利. 儿童应对"非意愿性关注"的策略[J]. 江苏教育,2018 (88):44-45.
- [443] 周庆芝,张江生,冯琪,等.开展参与式性健康教育唤醒流动人口青少年的自我保护意识[J].中国性科学,2006,15(1):38-40.
- [444] 朱璠, 李远骋, 吴静, 崔闻心, 郭雪儿, 刘思辰, 马迎华. 青年学生男男性行为者预防艾滋病综合能力及影响因素[J]. 中国学校卫生, 2020,41 (10):1450-1454.
- [445] 朱广荣, 季成, 吐易伟, 马丽. 中国性教育政策回顾研究[J]. 中国性科学, 2005,14(3):1-3.
- [446] 朱广荣, 余小鸣, 王嘉, 郭赟, 徐想顺, 张兵. 小学健康教育现状及不同模式的比较研究 [J]. 中国健康教育,2005,21(9):3.
- [447] 庄丽丽, 马迎华, 吕晓静, 等. 高中生以生活技能为基础的艾滋病教育效果评估 [J]. 中国学校卫生, 2011, 32 (12):1429-1431.
- [448] 邹艳辉, 王晖. 我国家庭发展及特殊家庭类型研究[J]. 人口与健康, 2019(3):37-42.
- [449] 邹志勇, 马军, 王海俊, 付连国, 董彬, 阳益德. 中国 7 ~ 17 岁青春期女生月经初潮较早与血压水平的关系[J]. 中华预防医学杂志, 2013,47(8):726-730.
- [450] 左霞云,涂晓雯,楼超华,高尔生.中学生与父母性知识沟通状况及影响因素分析[J].中国公共卫生,2007(2):148-150.
- [451] 左霞云,涂晓雯.亲子性问题沟通对青少年性行为和态度影响因素的研究进展[J].中国计划生育学杂志,2007(1):56-58.
- [452] 左霞云, 楼超华, 涂晓雯. 亲子间交流性相关问题的研究[J]. 国际生殖健康/计划生育杂志, 2011, 30 (6):493-496.
- [453] 左霞云, 廉启国, 涂晓雯, 程艳, 程静, 白铁玲, 王金桃, 沈会懿, 楼超华. 中国青少年与父母交流性相关话题的状况分析[J]. 中国计划生育学杂志, 2013, 21(3):170-173, 180.

- [454] 左霞云, 廉启国, 程艳, 涂晓雯, 王子亮, 余春艳, 楼超华. 青少年性别角色与性别刻板印象调查[J]. 中国性科学, 2013, 22(8):71-75.
- [455] 左霞云, 廉启国, 毛燕燕, 楼超华, 张妍, 张树成, 罗珊, 涂晓雯, 周维谨. 中学生性情境中的自我效能及其与家庭因素的关联性[J]. 中国学校卫生, 2017, 38(2):212-215.

Chinese books:

- [456] 曹诗权.未成年人监护制度研究[M].北京:中国政法大学出版社,2004.
- [457] 曹贤余. 儿童最大利益原则下的亲子法研究 [M]. 北京: 群众出版社, 2015.
- [458] 陈英和. 认知心理学[M]. 北京: 北京师范大学出版社, 2013.
- [459] 邓明昱. 性心理学探索[M]. 上海: 上海科学技术出版社,1989.
- [460] 邓明昱. 中国性学[M]. 广州: 广东人民出版社, 1990.
- [461] 邓明昱, 邓明. 实用性医学 [M]. 纽约: 国际华人医学家心理学家联合会, 1998.
- [462] 董奇, 林崇德. 当代中国儿童青少年心理发育特征: 中国儿童青少年心理发育特征调查项目总报告[M]. 北京: 科学出版社. 2011.
- [463] 胡家辉,邓明昱.儿童、少年性知识启蒙:性生理、性心理、性卫生、性疾病问答[M].沈阳:辽宁科学技术出版社,1991.
- [464] 方刚. 性权与性别平等: 学校性教育的新理念与新方法[M]. 北京: 东方出版社,2012.
- [465] 方建移, 张英萍, 学校教育与儿童社会性发展[M]. 杭州: 浙江教育出版社, 2005.
- [466] 费孝通. 生育制度 [M]. 天津: 天津人民出版社,1981.
- [467] 冯源.儿童监护模式的现代转型与国家监护的司法承担[M].北京:法律出版社,2020.
- [468] 苟萍. 初中性教育教师用书[M]. 成都: 四川大学出版社,2019.
- [469] 苟萍,小学性教育教师用书[M].成都:四川大学出版社,2019.
- [470] 顾军,未成年人犯罪的理论与司法实践[M],北京:法律出版社,2010.
- [471] 管华. 儿童权利研究: 义务教育阶段儿童的权利与保障 [M]. 北京: 法律出版社,2011.
- [472] 国家卫生计生委家庭司 . 中国家庭发展报告 2015[M]. 北京 : 中国人口出版社 ,2016.
- [473] 何海澜. 善待儿童——儿童最大利益原则及其在教育、家庭、刑事制度中的运用[M]. 北京: 中国法制出版社,2016.
- [474] 胡珍, 苟萍, 李扁. 向青春迈进——社会性别与小学性教育[M]. 北京: 科学出版社, 2013.
- [475] 胡珍,吴银涛,李扁,罗登远.与青春同行——社会性别与中学性教育[M].北京:科学出版社,2013.

- [476] 胡珍.从主流走向多元——新世纪大学生性文明发展与研究[M].北京:科学出版社,2015.
- [477] 胡珍, 苟萍, 马骋, 曹云飞, 黄云峰. 恋爱婚姻家庭——大学生性教育教材 [M]. 北京: 科学出版社,2016.
- [478] 胡珍.有德有幸福——大学生性道德教育实效性研究及实践[M].成都:四川大学出版社,2017.
- [479] 黄教珍,张停云.社会转型时期青少年犯罪的心理预防和教育对策[M].北京:法律出版社.2008.
- [480] 江汉声, 晏涵文. 性教育[M]. 台北: 性林文化事业公司, 1995.
- [481] 李春漫,怎样预防儿童性侵害[M].北京:中国青年出版社,2014.
- [482] 李兰娟,任红.传染病学[M].8版.北京:人民卫生出版社,2013.
- [483] 李银河. 性别问题[M]. 青岛: 青岛出版社,2007.
- [484] 李银河. 性的问题[M]. 呼和浩特: 内蒙古大学出版社, 2009.
- [485] 李银河.同性恋亚文化[M].呼和浩特:内蒙古大学出版社,2009.
- [486] 李膺. 青少年性教育[M]. 济南: 山东人民出版社, 2006.
- [487] 李震山. 多元、宽容与人权保障——以宪法未列举权之保障为中心[M]. 台北: 台湾元照出版有限公司,2005.
- [488] 林崇德. 发展心理学[M]. 杭州: 浙江教育出版社, 2019.
- [489] 林明杰.家庭暴力与性侵害的问题与对策[M].台北:台湾元照出版有限公司,2013.
- [490] 林燕卿. 性别教育[M]. 台中: 华格那企业有限公司, 2015.
- [491] 林燕卿, 性与性别教育的解析和实践[M]. 新北: 心理出版社股份有限公司, 2019.
- [492] 刘文利. 大学生性健康教育读本 [M]. 北京: 清华大学出版社, 2013.
- [493] 刘文利,龙迪,张雪梅.守护童年一春蕾计划•护蕾行动 儿童手册[M].北京:中国妇女出版 社,2014.
- [494] 刘文利,龙迪,张雪梅.守护童年一春蕾计划 护蕾行动 家长手册 [M]. 北京:中国妇女出版社,2014.
- [495] 刘文利,张雪梅,朱晓宇,焦健,陈涛.儿童暴力伤害预防与处置工作指引[M].北京:中国妇女出版社,2014.
- [496] 刘文利, 苏余芬. 预防儿童性侵害系列读物(6~12岁): 我的身体我做主[M]. 北京: 中国妇女出版社,2015.
- [497] 刘文利, 苏余芬. 预防儿童性侵害系列读物(13~18岁): 身体告诉我的那些事儿 [M]. 北京: 中国妇女出版社, 2015.
- [498] 刘文利(主编). 珍爱生命—小学生性健康教育读本(全12册)[M]. 北京: 北京师范大学出版社,2010-2017.

- [499] 龙正凤, 侵犯未成年人性权利犯罪与防治研究[M], 北京: 知识产权出版社, 2020.
- [500] 潘绥铭, 黄盈盈. 性社会学[M]. 北京: 中国人民大学出版社, 2011.
- [501] 潘绥铭,黄盈盈.性之变一21世纪中国人的性生活[M].北京:中国人民大学出版社,2013.
- [502] 庞丽娟, 陶沙. 教师与儿童发展 [M]. 北京: 北京师范大学出版社, 2003.
- [503] 彭聃龄. 普通心理学[M]. 北京: 北京师范大学出版社, 2019.
- [504] 阮芳赋. 性知识手册[M]. 北京: 人民卫生出版社, 1988.
- [505] 阮芳赋.性的报告——21世纪版性知识手册[M].北京:中医古籍出版社,2002.
- [506] 阮芳赋, 彭晓辉. 人的性与性的人[M]. 北京: 北京大学医学出版社, 2007.
- [507] 阮芳赋. 新性知识手册[M]. 昆明: 云南人民出版社, 2012.
- [508] 桑标. 儿童心理学[M]. 北京: 开明出版社, 2012.
- [509] 桑标. 儿童发展[M]. 上海: 华东师范大学出版社, 2014.
- [510] 宋英辉, 苑宁宁. 中华人民共和国未成年人保护法释义[M]. 北京: 中国法制出版社,2020.
- [511] 佟丽华. 未成年人法学. 学校保护卷[M]. 北京: 法律出版社,2007.
- [512] 王宁霞, 黄海燕, 董欢. 未成年人性侵害现状分析与对策研究[M]. 北京: 九州出版社, 2020.
- [513] 王卫平, 孙锟, 常立文. 儿科学 [M].9 版. 北京: 人民卫生出版社, 2018.
- [514] 王曦影, 萨支红. 性别平等的全面性教育案例手册[M]. 北京: 中国经济出版社, 2019.
- [515] 王曦影. 促进性别平等预防性别暴力: 青年同伴教育者培训手册(橙志手册)[M]. 北京: 中国社会出版社,2021.
- [516] 王雪峰. 教育转型之镜——20世纪上半叶中国的性教育思想与实践[M]. 北京: 社会科学文献出版社,2006.
- [517] 王雪梅. 儿童权利论: 一个初步的比较研究[M]. 北京: 社会科学文献出版社, 2018.
- [518] 王勇民, 儿童权利保护的国际法研究[M], 北京: 法律出版社, 2010.
- [519] 王宇明. 感染病学[M].2版.北京:人民卫生出版社,2010.
- [520] 吴阶平. 性医学[M]. 北京: 科学技术文献出版社,2009.
- [521] 吴银涛, 苟萍, 徐海燕. 社会性别与性教育[M]. 成都: 四川大学出版社, 2019.
- [522] 武俊青,李玉艳,赵瑞.青少年性与生殖健康教育:现状和干预效果评价[M].北京:社会科学文献出版社,2021.
- [523] 谢幸,孔北华,段涛.妇产科学[M].9版.北京:人民卫生出版社,2018.
- [524] 许佑生. 性启萌 青少年性教育读本[M]. 台北: 大辣出版股份有限公司, 2017.

- [525] 徐晓阳,黄勋彬.性医学[M].北京:人民卫生出版社,2007.
- [526] 晏涵文. 对抗 AIDS 从你我做起 爱滋防治教育手册 [M]. 台北: 杏陵医学基金会,2003.
- [527] 晏涵文.性、两性关系与性教育,第二版[M].台北:心理出版社,2011.
- [528] 杨素萍,中国——新加坡性教育比较研究[M],北京:北京理工大学出版社,2021.
- [529] 杨雄.澳门青少年性意识与性教育[M].澳门:澳门基金会,1998.
- [530] 杨雄.青春期与性——中国大城市青少年性意识性行为跟踪研究[M].上海:上海大学出版社,2010.
- [531] 叶强. 论国家对家庭教育的介入[M]. 北京: 北京大学出版社,2018.
- [532] 尹力. 教育法学[M]. 北京: 人民教育出版社, 2012.
- [533] 张杨.西方儿童基本权利理论及其当代价值研究[M].北京:中国社会科学文献出版社,2016.
- [534] 郑杭生. 社会学概论新修[M]. 北京: 中国人大学出版社.2019.

Books translated into Chinese:

- [535] 达蒙,勒纳.儿童心理学手册[M].林崇德,李其维,董奇,译.上海:华东师范大学出版社,2015.
- [536] 金赛. 金赛性学报告 [M]. 潘绥铭, 译. 北京: 中国青年出版社, 2013.
- [537] 霭理士.性心理学[M].潘光旦,译注.上海:生活·读书·新知三联书店,1987.
- [538] 凯查杜里安. 性学观止[M]. 胡颖翀, 译.6 版. 北京: 世界图书出版公司,2009.
- [539] 伯克.伯克毕生发展心理学:从0岁到青少年[M].陈会昌,译.4版.北京:中国人民大学出版社,2018.
- [540] 伯克.婴儿儿童和青少年[M].桑标,译.上海:上海人民出版社,2014.
- [541] 雅博, 萨亚德, 斯特朗, 德沃尔特. 认识性学 [M]. 爱白文化教育中心, 译. 北京: 世界图书出版公司, 2012.
- [542] 盖格农.性社会学——人类性行为[M]. 李银河,译.呼和浩特:内蒙古大学出版社,2009.
- [543] 谢弗,基普.发展心理学[M].邹泓,译.8版.北京:中国轻工业出版社,2009.

Chinese reports:

- [544] 联合国教科文组织,联合国人口基金,联合国儿童基金会,上海市计划生育科学研究所.中国初级中学全面性教育实施现状研究[R].巴黎:联合国总部,2018.
- [545] 玛丽斯特普中国.基础性教育指南[R].2019.

- [546] 萨支红,王曦影."性别平等的全面青少年学校性教育干预及研究"项目报告[R].2012.
- [547] 萨支红,王曦影.性别平等的学校性教育干预对改变青少年性知识、性态度、性决策技巧和性行为的效果[R].中国性研究,2013,1:79–100.
- [548] 世界卫生组织,联合国儿童基金会,联合国教科文组织,等.2020年关于预防暴力侵害儿童行为的全球状况报告:执行摘要[R].日内瓦:世界卫生组织,2020年.

English journals and articles:

- [549] BHANA D,MOOSA S,XU Y, et al. Men in early childhood education and care: On navigating a gendered terrain[J/OL]. European Early Childhood Education Research Journal, 2022, [2022-05-08]. DOI:10.1080/1350293X.2022.2074070
- [550] BIAN L,LESLIE S J,CIMPIAN A. Gender stereotypes about intellectual ability emerge early and influence children's interests[J]. Science,2017,355(6323):389-391.
- [551] CHEN J Q,DUNNE M P,HAN P. Child sexual abuse in Henan province, China: associations with sadness, suicidality, and risk behaviors among adolescent girls[J]. Journal of Adolescent Health, 2006, 38(5):544-549.
- [552] [602] CHEN J Q,DUNNE M P,HAN P. Prevention of child sexual abuse in China: knowledge, attitudes, and communication practices of parents of elementary school children[J].Child Abuse & Neglect,2007,31(7):747-755.
- [553] CHEUNG M,LEUNG C A,CHEN X, et al. Brief report: child sexual abuse inquiries in Hong Kong,2000–2017[J].International Journal of Sexual Health,2019,31(1):71-76.
- [554] COHEN J N,BYERS E S,SEARS H A. Factors affecting Canadian teachers' willingness to teach sexual health education[J].Sex Education,2012,12(3):299-316.
- [555] DONGB, ZOU Z, SONG Y, et al. Adolescent health and healthy China 2030:a review[J]. Journal of Adolescent Health, 2020, 67(5): S24-S31.
- [556] EAGLY A H,STEFFEN V J. Gender stereotypes stem from the distribution of women and men into social roles[J]. Journal of Personality and Social Psychology,1984,46(4):735-754.
- [557] ESER M,ÇELIKÖZ N. Impacts of parental attitude towards sexual identity development on child's sexual identity development[J]. Procedia-Social and Behavioral Sciences,2009,1(1):1408-1413.
- [558] FABES R A,EISENBERG N. Young children's coping with interpersonal anger[J]. Child Development, 1992, 63(1):116-128.
- [559] FANG Z,CERNA-TUROFF I,ZHANG C, et al. Global estimates of violence against children with disabilities: an updated systematic review and meta-analysis[J]. The Lancet Child & Adolescent Health, 2022, 6(3): 313-323.

- [560] FINKELHOR D. The prevention of childhood sexual abuse[J]. The Future of Children, 2009, 19(2):169-194.
- [561] FORNICAOLA E,PETERSON Z D. An exploratory study of sexual aggression tactics as a function of perpetrator gender and victim gender[J/OL].International Journal of Sexual Health,2022,[2022-05-10]. https://doi.org/10.1080/19317611.2022.2053027
- [562] FRAYSER S G. Defining normal childhood sexuality: an anthropological approach[J]. Annual Review of Sex Research,1994,5(1): 173-217.
- [563] GOLDFARB E S,LIEBERMAN L D. Three decades of research: the case for comprehensive sex education[J].Journal of Adolescent Health,2021, 68(1):13-27.
- [564] GOLDMAN R J,GOLDMAN J D G. How children perceive the origin of babies and the roles of mothers and fathers in procreation: a cross-national study[J]. Child Development,1982:491-504.
- [565] GREENE A,KORCHMAROS J D. Engaging parents and caregivers of system-involved youth in a sexual health intervention[J]. Children and Youth Services Review,2022,137:106451.
- [566] GRISSMER D,GRIMM K J,AIYER S M, et al. Fine motor skills and early comprehension of the world: two new school readiness indicators[J]. Developmental psycholo gy,2010,46(5):1008-1017.
- [567] GUO S,ARMSTRONG R,WATERS E, et al. Quality of health literacy instruments used in children and adolescents: a systematic review[J]. BMJ Open,2018,8(6):e020080.
- [568] GUO S,CHEN J,YU B, et al. Knowledge, attitude and practice of child sexual abuse prevention among parents of children with hearing loss: a pilot study in Beijing and Hebei Province, China[J]. Journal of child sexual abuse,2019,28(7):781-798.
- [569] GUO S,DAVIS E,YU X, et al. Measuring functional, interactive and critical health literacy of Chinese secondary school students: reliable, valid and feasible?[J]. Global Health Promotion,2018,25(4):6-14.
- [570] GUO S,YU X,DAVIS E, et al. Adolescent health literacy in Beijing and Melbourne: a cross-cultural comparison[J]. International Journal of Environmental Research and Public Health,2020,17(4):1242.
- [571] HAMILTON M C, ANDERSON D,BROADDUS M, et al., Gender stereotyping and underrepresentation of female characters in 200 popular children's picture books: a twenty-first century update[J].Sex Roles,2006,55(11):757-765.
- [572] HASHIMOTO N,SHINOHARA H,TASHIRO M, et al. Sexuality education in junior high schools in Japan[J]. Sex Education,2012,12(1):25-46.
- [573] HEGAZI A, PAKIANATHAN M. LGBT sexual health[J]. Medicine, 2018, 46(5):300-303.

- [574] HONG L,HE X,XUE L, et al. Comprehensive sexuality education improves primary students' explicit and implicit attitudes toward homosexuality[J]. International Journal of Sexual Health,2022,[2022-05-13].https://doi.org/10.1080/19317611.2022.2067282
- [575] HONIG A. Psychosexual development in infants and young children[J]. Young Children,2000,55(5):70-77.
- [576] HUANG C Y,LEE S,YEN W J, et al. Nursing intervention on sexual health: a multilevel behavioral survey of senior nursing students in clinical practice[J]. International Journal of Sexual Health,2013,25(4):273-280.
- [577] HUDDY L,TERKILDSEN N. Gender stereotypes and the perception of male and female candidates[J]. American journal of political science, 1993,37(1):119-147.
- [578] INSEL T R. Rethinking schizophrenia[J]. Nature, 2010, 468 (7321): 187-193.
- [579] IZDEBSKI Z,DEC-PIETROWSKA J,KOZAKIEWICZ A, et al. What one gets is not always what one wants—young adults' perception of sexuality education in Poland[J]. International Journal of Environmental Research and Public Health,2022,19(3):1366.
- [580] JI Y,REISS M J. Cherish Lives? Progress and compromise in sexuality education textbooks produced in contemporary China[J/OL]. Sex Education, 2021, [2022-05-11]. https://doi.org/10.1080/14681811.2021.1955670
- [581] JIANG W,HA L. Smartphones or computers for online sex education? A contraception information seeking model for Chinese college students[J]. Sex Education, 2020, 20(4):457-476.
- [582] JIN Y,CHEN J,JIANG Y, et al. Evaluation of a sexual abuse prevention education program for school-age children in China: a comparison of teachers and parents as instructors[J]. Health Education Research,2017,32(4):364-373.
- [583] JIN Y,CHEN J,YU B. Knowledge and skills of sexual abuse prevention: a study on schoolaged children in Beijing, China[J]. Journal of child sexual abuse,2016,25(6):686-696.
- [584] JIN Y,CHEN J,YU B. Parental practice of child sexual abuse prevention education in China: Does it have an influence on child's outcome?[J]. Children and Youth Services Review,2019,96:64-69.
- [585] JIN Z,CAO W,WANG K, et al. Mental health and risky sexual behaviors among Chinese college students: a large cross-sectional study[J]. Journal of Affective Disorders,2021,287:293-300.
- [586] JIN Z,GUO F,WANG K, et al. Effects of an internet-based and teacher-facilitated sexuality education package: a cluster-randomized trial[J]. Children, 2021, 8(10):885.
- [587] JOLLY S. Positive approaches to sexuality and new normative frames: Strands of research and action in China and the USA[J]. Sex education, 2016,16(3):294-307.
- [588] KANTOR LM, SANTELLI JS, TEITLER J, et al. Abstinence-only policies and programs: an overview [J]. Sexuality Research and Social Policy, 2008, 5(3):6-17.

- [589] KAM C P I. Absence of girl images: The gender construct in personal and social education in Hong Kong[J]. Sex Education,2012,12 (5): 569-581.
- [590] KIVELA J,KETTING E,BALTUSSEN R. Cost analysis of school-based sexuality education programs in six countries[J]. Cost effectiveness and resource allocation,2013,11(1):17.
- [591] KOLLMAYER M,SCHULTES M T,SCHOBER B, et al. Parents' judgments about the desirability of toys for their children: Associations with gender role attitudes, gender-typing of toys, and demographics[J]. Sex Roles, 2018, 79(5):329-341.
- [592] KONTULA O. The evolution of sex education and students' sexual knowledge in Finland in the 2000s[J]. Sex education,2010,10(4):373-386.
- [593] KREITLER H, KREITLER S. Children's concepts of sexuality and birth[J]. Child Development, 1966, 37(2): 363-378.
- [594] KWOK D K. Training educators to support sexual minority students: Views of Chinese teachers[J]. Sex Education,2019,19(3):346-360.
- [595] LEFTWICH H K,ALVES M O. Adolescent pregnancy[J].Pediatric Clinics of North America,2017,64(2):381-388.
- [596] LEI Y,LUO D,YAN X, et al. The mean age of menarche among Chinese schoolgirls declined by 6 months from 2005 to 2014[J]. Acta Paediatrica, 2021,110(2):549-555.
- [597] LEWIS M,BORKENHAGEN M C,CONVERSE E, et al. What might books be teaching young children about gender?[J]. Psychological Science,2020,33(1):33-47.
- [598] LI Y,GAO D,CHEN M, et al. Association between healthy lifestyle pattern and early onset of puberty: based on a longitudinal follow-up study[J/OL].British Journal of Nutrition,2022,[2022-05-12]. DOI:10.1017/S0007114522000563
- [599] LIANG H,TANG K,CAO W, et al. Factors influencing the acceptability of HIV/AIDS voluntary counseling and testing: a quantitative study of 41 336 female university students in China[J]. Sexual Health,2021,18(1):119-121.
- [600] LIANG J Y,BOWCHER W L. Legitimating sex education through children's picture books in China[J]. Sex Education,2019,19(3):329-345.
- [601] LIANG J Y,TAN S,O'hALLORAN K. Representing sexuality and morality in sex education picture books in contemporary China[J]. Social Semiotics,2017,27(1):107-126.
- [602] LIANG Y J,O'HALLORAN K,TAN S. Where do I come from? Metaphors in sex education picture books for young children in China[J]. Metaphor and Symbol,2016,31(3):179-193.
- [603] LIN H,ZHAO L,WU H, et al. Sexual life and medication taking behaviours in young men: An online survey of 92 620 respondents in China[J]. International Journal of Clinical Practice,2020,74(1):e13417.

- [604] LIN Y L,LIN Y C. Effectiveness of the sexual attitude restructuring curriculum amongst Taiwanese graduate students[J]. Sex Education,2018,18(2):140-156.
- [605] LIU C,CAO W,MENG X, et al. The role of interpersonal relationships and household socioeconomic status in the association between sexual orientation and health: a moderated mediation analysis[J]. LGBT Health, 2021,8(8):554-562.
- [606] LIU J,CALZAVARA L,MENDELSOHN J B, et al. Impact evaluation of a community-based intervention to reduce risky sexual behaviour among female sex workers in Shanghai, China[J]. BMC Public Health,2015,15:147.
- [607] LIU T,FULLER J,HUTTON A, et al. Factors shaping parent–adolescent communication about sexuality in urban China[J]. Sex Education,2017,17(2):180-194.
- [608] [658] LIU W,DENNIS J M,Edwards C P. Chinese parents' involvement in sexuality education for adolescents[J]. International Journal of Sexual Health,2015,27(4):485-507.
- [609] [659] LIU W,SU Y. School-based primary school sexuality education for migrant children in Beijing, China[J]. Sex Education,2014,14(5): 568-581.
- [610] LIU W,VAN CAMPEN K S,EDWARDS C P, et al. Chinese parents' perspectives on adolescent sexuality education[J]. International Journal of Sexual Health,2011,23(3):224-236.
- [611] LIU W,DENNIS J M,EDWARDS C P. Chinese parents' involvement in sexuality education for adolescents[J]. International Journal of Sexual Health,2015,27(4):485-507.
- [612] LIU W,EDWARDS C. Chinese parents' knowledge, attitudes, and practices about sexuality education for adolescents in the family[J/OL]. Faculty Publications, University of Nebraska-Lincoln,2003,[2022-06-14]. https://ql-applet.oss-cn-beijing.aliyuncs.com/Applet%2F2022-6-14%2F165516943123632.pdf?x-oss-traffic-limit=4194304&OSSAccessKeyId=LTAI5t5c Wm3bXp2xCPx8nNHe&Expires=1655428635&Signature=q6WjlW8420pwbRLeKn5JYDvQ bp0%3
- [613] LIU W,SU Y. School-based primary school sexuality education for migrant children in Beijing, China[J]. Sex Education,2014,14(5):568-581.
- [614] LOU C,ZHAO Q,GAO E S, et al. Can the Internet be used effectively to provide sex education to young people in China?[J].Journal of Adolescent Health,2006,39(5):720-728
- [615] LUOD, YAN X, XU R, et al. Chinese trends in adolescent marriage and fertility between 1990 and 2015: a systematic synthesis of national and subnational population data[J]. The Lancet Global Health, 2020, 8(7):e954-e964.
- [616] LYU F,LIU L,WANG X, et al. Investigation of the first spermatorrhea age of males in Jiangsu Province, China[J]. Health,2020,12(6): 523-531.
- [617] MARTIN K A,TORRES J M C. Where did I come from? US parents' and preschool children's participation in sexual socialisation[J].Sex Education,2014,14(2):174-190.

- [618] MARTIN K A. Making sense of children's sexual behavior in child care: an analysis of adult responses in special investigation reports[J]. Child Abuse & Neglect, 2014, 38(10):1636-1646.
- [619] MCKEE A,ALBURY K,DUNNE M, et al. Healthy sexual development: a multidisciplinary framework for research[J]. International Journal of Sexual Health,2010,22(1):14-19.
- [620] MIAO W,CHANL S. Social constructivist account of the world's largest gay social app: case study of Blued in China[J]. The Information Society,2020,36(4):214-225.
- [621] MOORE J E,KENDALL D G. Children's concepts of reproduction[J]. Journal of Sex Research,1971,7(1):42-61.
- [622] MOU Y,WU Y,WANG J, et al. Safer sex practice among female Chinese college students and its antecedents: a culture-centered approach[J]. International Journal of Sexual Health,2020,32(3):282-292.
- [623] NASER S C,CLONAN-ROY K,FULLER K A, et al. Exploring the experiences and responses of LGBTQ+ adolescents to school-based sexuality education[J]. Psychology in the Schools,2022,59(1):34-50.
- [624] POUWELS J L,VALKENBURG P M,BEYENS I, et al. Social media use and friendship closeness in adolescents' daily lives: an experience sampling study[J]. Developmental Psychology,2021,57(2):309.
- [625] QIAO J,WANG Y,LI X, et al. A Lancet Commission on 70 years of women's reproductive, maternal, newborn, child, and adolescent health in China[J]. The Lanc et,2021,397(10293):2497-2536.
- [626] RUTTER M. Normal psychosexual development[J]. Child Psychology & Psychiatry & Allied Disciplines,1970,11(4):259-283.
- [627] RYAN G. Childhood sexuality: A decade of study. Part I—Research and curriculum development[J]. Child Abuse & Neglect,2000,24(1):33-48.
- [628] SA Z,TIAN L,WANG X. Evidence for a comprehensive sexuality education intervention that enhances Chinese adolescents' sexual knowledge and gender awareness and empowers young women[J]. Sex Roles, 2021,85(5):357-370.
- [629] SANTTILA P,MOKROS A,HARTWIG M, et al. Childhood sexual interactions with other children are associated with lower preferred age of sexual partners including sexual interest in children in adulthood[J]. Psychiatry Research,2010,175(1-2):154-159.
- [630] SCHUHRKE B. Young children's curiosity about other people's genitals[J]. Journal of Psychology & Human Sexuality,2000,12(1-2):27-48.
- [631] SCULL T M,CARL A E,KEEFE E M, et al. Exploring parent-gender differences in parent and adolescent reports of the frequency, quality, and content of their sexual health communication[J]. The Journal of Sex Research,2022,59(1):122-134.

- [632] SLABY R G,FREY K S. Development of gender constancy and selective attention to samesex models[J]. Child Development,1975,46(4): 849-856.
- [633] SONG Y,MA J,AGARDH A, et al. Secular trends in age at menarche among Chinese girls from 24 ethnic minorities, 1985 to 2010[J]. Global Health Action,2015,8:26929.
- [634] SONG Y,MA J,LI L B, et al. Secular trends for age at spermarche among Chinese boys from 11 ethnic minorities 1995–2010:a multiple cross-sectional study[J]. BMJ Open,2016,6(2):e010518.
- [635] SPINNER L, CAMERON L, CALOGERO R. Peer toy play as a gateway to children's gender flexibility: the effect of (counter) stereotypic portrayals of peers in children's magazines[J]. Sex Roles, 2018, 79(5): 314-328.
- [636] STEIL R,FISCHER A,GUTERMANN J, et al. Mental imagery in adolescent PTSD patients after child abuse: a comparison with matched healthy controls[J]. BMC Psychiatry,2022,22(1): 64.
- [637] STILES J. Neural plasticity and cognitive development[J]. Developmental Neuropsychology,2000,18(2): 237-272.
- [638] SU R, GUO L,TANG H, et al. Comprehensive sexuality education weakens the effect of ingroup bias on trust and fairness[J]. Sex Education,2020,20(1): 33-45.
- [639] TANG D. Perspectives on same-sex sexualities and self-harm amongst service providers and teachers in Hong Kong[J]. Sex Education, 2014, 14(4): 444-456.
- [640] TIAN L,TANG S,CAO W, et al. Evaluation of a Web-based intervention for improving HIV/ AIDS knowledge in rural Yunnan, China[J]. Aids,2007,21(8): S137-S142.
- [641] UNIS B,NILSSON J,BJURESÄTER K. Sexual health promotion among Swedish adolescents–professionals' experiences[J]. International Journal of Sexual Health,2021,33(3):410-425.
- [642] VAN EIJK L,ZHU D,COUVY-DUCHESNE B, et al. Are sex differences in human brain structure associated with sex differences in behavior?[J]. Psychological Science,2021,32(8):1183-1197.
- [643] WANG B,HERTOG S,MEIER A, et al. The potential of comprehensive sex education in China: findings from suburban Shanghai[J]. International Family Planning Perspectives,2005,31(2): 63-72.
- [644] WANG X,HO P S Y. Violence and desire in Beijing: A young Chinese woman's strategies of resistance in father-daughter incest and dating relationships[J]. Violence Against Women,2007,13(12):1319-1338.
- [645] WANG X,HO P S Y. "Female virginity complex" untied: Young Chinese women's experience of virginity loss and sexual coercion[J]. Smith College Studies in Social Work,2011,81(2-3):184-200.

- [646] WANG X,LIU L,CHEN B, et al. The mediating effect of self-control on the relationship between exposure to violence and fighting among Chinese secondary school students[J/ OL]. Journal of School Violence,2021,[2022-05-02].https://doi.org/10.1080/15388220.2021.1 985325
- [647] WANG X,PETULA S Y H. My sassy girl: a qualitative study of women's aggression in dating relationships in Beijing[J]. Journal of Interpersonal Violence,2007,22(5): 623-638.
- [648] WEI C,LIU W. Coming out in Mainland China: A national survey of LGBTQ students[J]. Journal of LGBT Youth,2019,16(2):192-219.
- [649] WEYMOUTH B B,FOSCO G M,MAK H W, et al. Implications of interparental conflict for adolescents' peer relationships: a longitudinal pathway through threat appraisals and social anxiety symptoms[J]. Developmental psychology,2019,55(7): 1509.
- [650] WU Y,CHEN J,GUO S. Knowledge, attitudes, and practice of child sexual abuse prevention among primary school teachers: a study in a city of Guangdong Province of China[J]. Journal of Child Sexual Abuse,2021,30(8): 994-1005.
- [651] WU H,LIU W. Gender representation in primary English textbooks in Mainland China 1978 to 2003[J]. International Journal of Humanities and Social Science,2015,5(6):116-129.
- [652] XIAO Z. Investigating the role of individual characteristics, interpersonal sexual communication, media exposure, and gender differences on condom use among Chinese college students in human[J]. International Journal of Sexual Health, 2015, 27(4): 442-456.
- [653] XIAO Z. Psychosocial correlates of premarital sex among college students in Hunan province, China[J]. International Journal of Sexual Health,2012,24(4): 318-328.
- [654] XIAOG Z,WARWICK I,CHALIES S. Understanding novice teachers' perspectives on China's sexuality education: a study based on the national pre-service teacher education programme[J]. Sex Education,2020,20(3):252-266.
- [655] XU Y. Does the gender of a practitioner matter in early childhood education and care? Perspectives from Scottish and Chinese young children[J]. Children & Society,2020,34(5):354-370.
- [656] XU Y. Gender-diverse practitioners in early years education and care EYEC: A cross-cultural study of Scotland, Hong Kong, and Mainland China[J]. Early Years, 2020, 40(1):109-124.
- [657] XU Y,WARIN J,ROBB M. Beyond gender binaries: Pedagogies and practices in early childhood education and care (ECEC) [J].Early Years,2020,40(1):1-4.https://doi.org/10.108 0/09575146.2020.1728077
- [658] XU Y. Challenging gender stereotypes through gender-sensitive practices in early years education and care[J]. Early Education Journal, 2021 (93):10-12.

- [659] XU Y,SCHWEISFURTH M,READ B. Men's participation in early childhood education and care (ECEC): comparative perspectives from Edinburgh, Scotland and Tianjin, China[J/OL]. Comparative Education, 2022, [2022-05-06]. DOI:10.1080/03050068.2022.2062950.
- [660] YAN L,ZHU Q,TU X, et al. Bullying victimization and child sexual abuse among left-behind and non-left-behind children in China[J]. PeerJ,2018,6:e4865.
- [661] YU B,CHEN J,JIN Y, et al. The knowledge and skills related to sexual abuse prevention among Chinese children with hearing loss in Beijing[J]. Disability and Health Journal,2017,10(2):344-349.
- [662] YU C,LOU C,LIAN Q, et al. The pattern of romantic and sexual related experiences among Chinese young adolescents: an exploration with multi-group latent class analysis[J]. Reproductive Health,2021,18(1): 184.
- [663] YU X,WEI W,GONG L. Rebuilding psychosocial competence for unmarried adolescent pregnancies using an integrated intervention[J]. International Journal of Adolescent Medicine and Health,2010,22(4): 491-502.
- [664] YU X,YANG T,WANG S, et al. Study on student health literacy gained through health education in elementary and middle schools in China[J]. Health Education Journal,2012,71(4):452-460.
- [665] ZHANG W,CHEN J,FENG Y, et al. Evaluation of a sexual abuse prevention education for Chinese preschoolers[J]. Research on Social Work Practice,2014,24(4):428-436.
- [666] ZHANG W,CHEN J,FENG Y, et al. Young children's knowledge and skills related to sexual abuse prevention: a pilot study in Beijing, China[J]. Child Abuse & Neglect,2013,37(9):623-630.
- [667] ZHANG W,CHEN J,LIU F. Preventing child sexual abuse early: preschool teachers' knowledge, attitudes, and their training education in China[J]. SAGE Open,2015,5(1):2158 244015571187.
- [668] ZHANG Y,ZUO X,MAO Y, et al. Co-occurrence subgroups of child sexual abuse, health risk behaviors and their associations among secondary school students in China[J]. BMC Public Health,2021,21(1):1139.
- [669] ZHAO P,YANG L,SA Z, et al. Propriety, empowerment and compromise: challenges in addressing gender among sex educators in China[J]. Sex Education,2020,20(5):552-567.
- [670] ZHU Y,LIU C,Elley S. Relationships with opposite-gender peers: the 'fine line' between an acceptable and unacceptable 'liking' amongst children in a Chinese rural primary school[J/OL]. Children's Geographies,2021,[2022-04-30].https://doi.org/10.1080/14733285.2021.197 0717
- [671] ZOU S,CAO W,JIA Y, et al. Sexual and reproductive health and attitudes towards sex of young adults in China[J]. BMJ Sexual & Reproductive Health,2022,48(e1):e13-e21.

English books:

- [672] GOLDMAN R,GOLDMAN J. Children's Sexual Thinking: A Comparative Study of Children Aged 5 to 15 Years in Australia, North America, Britain and Sweden[M].Lawrence: Routledge & Kegan Paul,1982.
- [673] HAFFNER D W. From Diapers to Dating. A parent's guide to raising sexually healthy children[M].New York: Newmarket Press,1999.
- [674] BAO H. Queer China: Lesbian and gay literature and visual culture under postsocialism[M]. London:Routledge,2020.
- [675] BAO H. Queer media in China[M].London:Routledge,2021.
- [676] BRUESS C E,SCHROEDER E. Sexuality education: theory and practice[M]. Burlington: Jones & Bartlett Learning,2014.
- [677] CHRISMAN K,COUCHENOUR D. Healthy Sexuality Development: a Guide for Early Childhood Educators and Families[M]. Washington, D.C.: National Association for the Education of Young Children,2002.
- [678] HYDE J,DELAMATER J. Understanding human sexuality[M].14th ed. New York: McGraw-Hill Education,2020.
- [679] STOMBLER M,BAUNACH D M,BURGESS E O, et al.,2019.Sex matters: the sexuality and society reader[M].New York: W.W. Norton and Company.
- [680] The Sexuality Information and Education Council of the United States. Guidelines for Comprehensive Sexuality Education [M]. 3rd ed. New York National Guidelines Task Force.2004.
- [681] WANG X. Gender, dating and violence in urban China[M] Routledge,2017.

English reports:

- [682] HOLMES L G,SIECUS. Comprehensive sex education for youth with disabilities: A call to action[R].UNESCO,2021.
- [683] JOLLY S,OOSTERHOFF P,FAITH B, et al. A review of the evidence: sexuality education for young people in digital spaces[R]. Paris: UNESCO,2020.
- [684] KIRBY D, WELBOURN A, GORDON P, et al. Review of sex relationships and HIV education in schools[R]. Paris: UNESCO, 2008.
- [685] UNESCO. School-centered HIV and AIDS care and support in Southern Africa: technical consultation report [R].Paris:UNESCO,2008.
- [686] UNESCO. Cost and cost-effectiveness analysis of school-based sexuality education programmes in six countries[R].Paris:UNESCO,2011.

- [687] UNESCO. Review of the evidence on sexuality education. Report to inform the update of the UNESCO International technical guidance on sexuality education[R].Paris:UNESCO,2016.
- [688] UNESCO. International technical guidance on sexuality education[R]. Paris:UNESCO,2018.
- [689] UNFPA. Operational guidance for comprehensive sexuality education: a focus on human rights and gender[R/OL].(2014-12-01)[2022-06-05]. https://www.unfpa.org/publications/unfpa-operational-guidance-comprehensive-sexuality-education
- [690] WHO Regional Office for Europe and BZgA. Standards for sexuality education in Europe[R/OL].[2022-06-07]. https://www.bzga-whocc.de/en/publications/standards-for-sexuality-education/
- [691] WHO. Sexual and reproductive health of young people in Asia and the Pacific: a review of issues, policies and programmes[R/OL].[2022-06-08]. https://www.aidsdatahub.org/resource/sexual-and-reproductive-health-young-people-asia-and-pacific

Note: only parts of the references are listed in the Guideline



Appendices

Appendix 1

Chinese Laws, Regulations and Policy Documents Relating to Comprehensive Sexuality Education (In chronological order)

(The translations are for reference only)

1. Guidelines for Health Education in Primary and Secondary Schools

Issued by the Ministry of Education

Issued on December 2008

- I. Guiding Ideology, Objectives and Basic Principles
- 2. Health education refers to education focusing on promoting health. Planned health education shall be provided at school to cultivate students' awareness of individual and public health, teach them necessary health knowledge and skills, encourage them to consciously adopt and maintain healthy behaviors and lifestyle, and reduce or eliminate risk factors affecting health, laying a solid foundation for their life-long health.
- 3. School health education shall start with cultivating children and adolescents' health awareness and improve students' health status, with a focus on relevance and effectiveness. It shall combine health knowledge and skills, in spiral progression, and integrate health knowledge, awareness and behavior, grounded in the local conditions, and combine health education theories with the actual life of students. Besides, it aims to emphasize the key points, constantly teach and strengthen health knowledge in a progressive manner, improve health skills, and develop health awareness, health behaviors and lifestyle.
- II. Specific Objectives and Basic Contents of Health Education

Health education in primary and secondary schools includes five domains, namely health behaviors and lifestyle, disease prevention, mental health, growth and adolescent healthcare, as well as security and emergency and risk avoidance.

- (I) Level I (Grade 1-2 in Primary School)
- 1. Objectives

Know the impacts of personal hygienic habits on health, and master correct personal health knowledge preliminarily; acquire eye and tooth protection knowledge; know the impacts of

imbalanced diets on health, and develop good drinking and dietary habits; teach students to understand their own body and protect themselves; learn the skills to join peer groups and get along with others; have common sense of security in road traffic and play, master some simple ways to seek help during emergency; understand the impacts of environment on personal health, and establish the awareness of maintaining environmental health preliminarily.

2. Basic Contents

- (1) Health behaviors and lifestyle: No spitting and littering; cover the nose when coughing and sneezing; regular bathing, changing clothes, shampooing and nail clipping (including prevention of head lice); no sharing of towels, toothbrushes and other toiletries (including prevention of trachoma); no defecating indiscriminately, and washing hands before meals and after toilet; maintain the correct hand washing method; maintain correct sitting, standing and walking postures to prevent abnormal spinal curvature; maintain correct reading and writing postures; do eye exercises correctly; brush teeth every morning and evening, and gargle after meals; maintain the correct brushing method, and choose appropriate toothbrushes and toothpastes; prevent dental caries (know the causes of dental caries, pay attention to oral health, check teeth regular); drink a moderate amount of water in daily life, which is beneficial to health, and plain boiled water is recommended; have a good breakfast and three meals a day regularly; know the impacts of imbalanced diet on health; have milk, beans and soy products regularly, which is beneficial to growth and health; open window for ventilation regularly, which is beneficial to health; use the toilet in a civilized manner, maintain the toilet sanitation consciously; know that mosquitoes, flies, rats and cockroaches can transmit diseases.
- (2) Disease prevention: Vaccination can prevent some infectious diseases.
- (3) Mental health: Polite expressions in daily life and skills to get along with classmates.
- (4) Growth and adolescent healthcare: Life gestation, basic knowledge of growth, know "where I come from".
- (5) Security and emergency and risk avoidance: Know common traffic safety signs; know basic traffic rules for pedestrians; have road safety knowledge; Don't play dangerous games, pay attention to the safety in games; be careful in setting off firecrackers; don't play with fire, and be careful with electricity; be careful in using stationery and toys; keep away from wild animals, and don't tease pets; vaccinate domestic dogs, and call for help in case of emergency (first-aid: 120, fire alarm: 119, police: 110).
- (II) Level II (Grade 3-4 in Primary School)

1. Objectives

Further understand eye protection and myopia prevention knowledge, and learn to use the eyes reasonably; acquire the basic knowledge of food hygiene, and establish food hygiene awareness preliminarily; understand the effect of physical exercise on health, and learn to arrange extracurricular time reasonably; have a preliminary understanding of the harms of tobacco to health; acquire the basic knowledge and prevention methods of intestinal parasitic diseases, common

respiratory infectious diseases and malnutrition; identify risk factors that cause accidental injuries, be familiar with prevention and simple treatment methods of common accidental injuries; have the common sense of security in daily life, master simple skills to avoid risk and escape from dangers; understand the significance and value of life preliminarily, establish the awareness of protecting life.

2. Basic Contents

- (1) Health behaviors and lifestyle: Meet health requirements for reading and writing, watching TV and using computers; prevent myopia (understand the causes of myopia, learn to use the eyes reasonably, pay attention to eye health, take regular optic examinations); prevent eye trauma; don't eat unclean, spoiled food and those beyond the shelf life; clean raw vegetables and fruits before eating; understand main nutrients required by the human body; know that physical exercise can promote growth and prevent diseases; meet requirements for healthy sleeping; know that household garbage should be sorted; understand that tobacco contains various harmful substances to health, and avoid passive smoking.
- (2) Disease prevention: Understand the harms of roundworm, pinworm and other intestinal parasitic diseases to health and the prevention; know the harms of malnutrition and obesity to health and the prevention; understand infectious diseases (focus on chains of transmission); prevent common respiratory infectious diseases (influenza, chickenpox, mumps, measles, meningitis); prevent frostbite (according to local conditions); understand vaccinations required for students.
- (3) Growth and adolescent health: Understand that the human life cycle includes birth, development, maturity, aging and death; understand the functions of the main organs of the body preliminarily and learn about self-protection.
- (4) Security and emergency and risk avoidance: Know security knowledge of swimming and skating; don't abuse drugs and cosmetics; know how to escape and seek help in case of fire and earthquake; clean the wound immediately after an animal bite or scratch, seek medical treatment and take rabies vaccine injection timely; know the simple treatment of nose-bleeding and simple hemostasis method (finger press method, pressure dressing method).
- (III) Level III (Grade 5-6 in Primary School)

1. Objectives

Understand the significance of health and healthy lifestyle, and develop the health awareness preliminarily; understand the significance of nutrition to the growth and development of children and develop right ideas about nutrition; understand the knowledge of food health, develop healthy dietary habits; understand the harms of tobacco and smoking to health; understand the harms of drugs, and keep away from hard drugs; master the basic knowledge and prevention methods of common intestinal infectious diseases and insect-borne infectious diseases, have the awareness of health and disease prevention; understand the harms of iodine deficiency disease, schistosomiasis and other common endemic diseases, and know how to prevent them; understand the basic knowledge of adolescent physiology and development, and have basic relevant healthcare knowledge; have the common sense of security in daily life, and learn self-monitoring in exercise,

improve ability for self-protection.

2. Basic Contents

- (1) Health behaviors and lifestyle: Health refers to the sound physical and psychological conditions and social adaptation ability, rather than merely the absence of disease or weakness. A healthy lifestyle (including reasonable diets, moderate exercise, smoking cessation and alcohol limit, psychological balance) is beneficial to health; have cereals mainly and more fruits and potatoes in diets, balance the portion of meat and vegetables; eat moderately in daily life, no overeating or indiscriminate dieting, and appropriate snacks; pay attention to the production date, shelf life and whether the package is intact when buying packaged foods, don't buy food from unlicensed vendors; don't eat common foods that are easy to cause food poisoning (sprouted potatoes, uncooked lentils and soybean milk, poisonous mushrooms, fresh daylilies, puffer fish); don't pick and eat wild fruits and vegetables; understand the main points of self-monitoring during physical exercise (subjective feeling and objective examination indicators); take optic examination and optometry at the ophthalmology department of a regular hospital in case of abnormal vision, pay attention to the health requirements when wearing glasses; smoking and passive smoking may cause cancers, cardiovascular diseases, respiratory diseases and many other diseases; don't smoke or drink alcohol. Know the names of common hard drugs; understand the harms of hard drugs to individuals and families, have the common sense of self-protection and simple methods, keep away from hard drugs.
- (2) Disease prevention: Understand the harms of anemia to health and its prevention; prevent common intestinal infectious diseases (bacillary dysentery, typhoid and paratyphoid, hepatitis A); prevent malaria; prevent epidemic hemorrhagic conjunctivitis (pinkeye); know the harms iodine deficiency disease to human health; understand that iodized salt can prevent iodine deficiency disease; prevent schistosomiasis (according to local conditions).
- (3) Mental health: Keep confident and be independent.
- (4) Growth and adolescent healthcare: Understand the characteristics of growth in adolescence; differences between males and females in adolescence (specific expressions of secondary sex characteristics of males and females); menarche of female students and its significance (menstruation and its cycle calculation); the first spermatorrhea of male students and its significance; knowledge of healthcare during voice mutation; Personal health knowledge during adolescence. Methods and significance of body temperature and pulse measurement.
- (5) Security and emergency and risk avoidance: Have the common sense of safety during cycling; common danger alert signs (such as high tension wire, flammables, explosives, highly toxic substances, radioactive substances, biosafety), keep away from dangerous objects; causes and prevention of gas poisoning; prevention of electric shock and lightning stroke; prevention and treatment of heat stroke; self-treatment of light scalds, burns, cuts, punctures, bruises and contusion; improve the awareness of online safety.
- (IV) Level IV (Junior Secondary School)

1. Objectives

Understand the relationship between lifestyle and health, establish a civilized and healthy lifestyle; further understand the significance of balanced diets and reasonable nutrition, develop scientific and nutritious dietary habits; understand the significance of adequate sleep for growth and development of children; understand the basic knowledge of food poisoning prevention; further understand the prevention knowledge of common infectious diseases, enhance the disease prevention ability; understand the basic knowledge and prevention methods of HIV and AIDS, know well about the basic knowledge of hard drug prevention, enhance the protection against hard drugs and HIV; understand the characteristics of adolescent psychological changes, learn to maintain positive emotions and improve mental health; further understand the basic knowledge of adolescent development, master the adolescent healthcare and the prevention and treatment methods of common physiological problems in adolescence; understand what the sexual assault is, master prevention methods and skills; master simple knowledge of medication safety; learn the basic skills of self-rescue and mutual rescue, improve the emergency response ability; understand the advantages and disadvantages of Internet use, make reasonable use of the Internet.

2. Basic Contents

- (1) Health behaviors and lifestyle: Unhealthy lifestyle is harmful to health, and the occurrence of chronic non-infectious diseases (malignant tumors, coronary heart disease, diabetes, stroke) are related to unhealthy lifestyles; balanced diets are beneficial to health; adequate nutrients can meet growth and development needs in adolescence. Adequate sleeping is beneficial to the growth and health, (which shall be 10 hours for primary school students, 9 hours for junior secondary school students and 8 hours for senior secondary school students); understand common causes of food poisoning (such as bacteria, chemicals, poisonous animals and plants); report any livestock died of diseases, stay away from eating their meat; preserve foods properly, know that spoiled food can cause food poisoning; have the skills to refuse smoking and alcohol; understand the harms of hard drugs to individuals, families and the society; know the ways to refuse hard drugs; know that drug abuse is illegal, and refuse hard drugs.
- (2) Disease prevention: Understand the prevention of Encephalitis B; Prevention of scabies; Prevention of tuberculosis; Prevention of hepatitis (including hepatitis A, B (C) hepatitis); No discrimination hepatitis B patients and infected persons; basic knowledge of HIV and AIDS; harms of HIV and AIDS; methods to prevent HIV; differentiate between safe and unsafe behaviors, know how to reject unsafe behaviors; learn about the ways to ask for help; have the adolescent physiological and psychological knowledge relating to HIV and AIDS prevention; understand the relationship between drug abuse and HIV and AIDS; no discrimination against HIV-infected persons and AIDS patients.
- (3) Mental health: Understand the impact of negative emotions on health; basic methods to regulate emotions; establish self-identity, know and treat yourself objectively; determine reasonable learning goals according to your own learning ability and conditions; know the principles of inter-personal relations with the opposite-sex.

- (4) Growth and adolescent healthcare: Love and cherish the life; understand the characteristics and changing patterns of adolescent psychological development and respond to adolescent psychological changes; know the causes and prevention of acnes; have the common sense of healthcare during menstruation, and know the symptoms and treatment of dysmenorrhea; have the knowledge of choosing and wearing the right bra.
- (5) Security and emergency and risk avoidance: Seek medical treatment timely in case of illness; take medicine according to the doctor's advice, don't take medicine indiscriminately; don't take sedative hypnotics and other addictive drugs without doctor's advice or abuse them; don't take painkillers without doctor's advice; don't replace medicines with healthcare products; understand emergency treatment of toxic poisoning; emergency response to drowning; have the knowledge of simple emergency treatment of fracture (fixation, transfer); identify risk factors for sexual assault, protect yourself from sexual assault; prevent Internet addiction.
- (V) Level V (Senior Secondary School)

1. Objectives

Understand the Chinese dietary guidelines, have the knowledge of common food purchase, further understand the basic knowledge of HIV and AIDS prevention, respect HIV-infected persons and AIDS patients; learn to handle interpersonal relations appropriately, cultivate effective communication skills, master stress relief and other basic psychological adjustment skills; further understand adolescent healthcare knowledge, know the harms of premarital sex to physical and phycological health, establish a healthy and civilized sexual concept and sexual morality.

2. Basic Contents

- (1) Health behaviors and lifestyle: Understand the basic knowledge of food purchase; the content of the Chinese dietary guidelines.
- (2) Disease prevention: Understand the prevention knowledge and methods of HIV and AIDS; the epidemic trend of HIV and AIDS and its harm to the society and economy; the differences between HIV-infected persons and AIDS patients; window and incubation periods of HIV; have the knowledge of voluntary blood donation; don't discriminate against HIV-infected persons and AIDS patients.
- (3) Mental health: Understand the appropriate ways to vent emotions and pour out reasonably, see things objectively; understand the principles and methods in interpersonal communications, communicate with others in an active, sincere, fair, modest, generous manner; basic ways to relieve stress; the positive significance of competition; respond to failures and setbacks properly; common psychological problems and response during examination and other special periods.
- (4) Growth and adolescent healthcare: Love and cherish the life; understand common abnormal development in adolescence, seek for medical treatment timely in case of abnormality; premarital sex seriously impacts teenagers' physical and psychological health; avoid premarital sex.
- (5) Security emergency and risk avoidance: Understand the risks of socializing on the Internet.

2. Standards for Health Education in Primary and Secondary Schools

Issued by the Ministry of Health of the People's Republic of China, Standardization Administration of China

Issued in December 2011

3. Content of Education

- 3.1 Health education in primary and secondary schools includes five areas:
- Health behaviors and lifestyle;
- Disease prevention;
- Security and emergency and risk avoidance;
- Mental health;
- Growth and adolescent health.

Appendix A (Normative Appendix)

Level I (grade 1-2 of primary school)

Basic requirements for content of health education

A.2.5 Growth and adolescent healthcare

A. 2.5.1 Know and cherish the life

A. 2.5.2 Understand the common sense of life, know "where did I come from".

Appendix B (Normative Appendix)

Level II (grade 3-4 of primary school)

Basic requirements for content of health education

- B. 2.5 Growth and adolescent healthcare
- B. 2.5.1 Understand the human life cycle, including birth, growth, maturity, aging and death.
- B. 2.5.2 Have the knowledge about your body, pay attention to your body's development.

Appendix C (Normative Appendix)

Level III (grade 5-6 of primary school)

Basic requirements for content of health education

C. 2.3.5 Make reasonable use of the Internet

Make reasonable use of the Internet, enhance the awareness of online safety.

C.2.5 Growth and adolescent healthcare

C. 2.5.1 Measurement of body temperature and pulse

Master the measurement methods of body temperature and pulse and the significance

- C.2.5.2 Characteristics of physical and psychological development in adolescence
- C.2.5.2.1 Understand the growth and development characteristics in adolescence
- C.2.5.2.2 Understand the differences between males and females in adolescence (specific expressions of secondary sex characteristics of males and females)
- C.2.5.2.3 Understand the menarche of female students and its significance (menstruation and its cycle calculation)
- C.2.5.2.4 Understand the first spermatorrhea of male students and its significance
- C.2.5.3 Adolescent healthcare
- C.2.5.3.1 Pay attention to healthcare during voice mutation
- C.2.5.3.2 Pay attention to personal health during adolescence

Appendix D (Normative Appendix)

Level IV (junior secondary school)

Basic requirements for contents of health education

- D.2.2.5 Basic knowledge of HIV and AIDS prevention and treatment
- D.2.2.5.1 Master the basic knowledge of HIV and AIDS
- D.2.2.5.2 Understand the harms of HIV and AIDS
- D.2.2.5.3 Master the prevention methods of HIV and AIDS
- D.2.2.5.4 Differentiate between safe and unsafe behaviors
- D.2.2.5.5 Skills to reject unsafe behaviors
- D.2.2.5.6 Learn about the ways and methods to ask for help
- D.2.2.5.7 Have the adolescent physiological and psychological knowledge relating to HIV and AIDS prevention
- D.2.2.5.8 Know about drug abuse and HIV and AIDS
- 2.2.5.9 Don't discriminate against HIV-infected persons and AIDS patients.
- D.2.3.4 Prevent sexual assault
- D.2.3.4.1 Identify risk factors for sexual assault
- D.2.3.4.2 Protect yourself from sexual assault
- D.2.3.5 Make reasonable use of the Internet

Make reasonable use of the Internet resources, prevent Internet addiction

- D.2.4 Mental health
- D.2.4.1 Develop emotion regulation ability
- D.2.4.1.1 Understand that negative emotions impact the health
- D.2.4.1.2 Learn about the basic methods of regulating emotions
- D.2.4.2 Know about yourself

Establish self-identity, know and treat yourself objectively

D.2.4.3 Set goals reasonably

Cultivate the ability to set goals, determine reasonable learning goals according to your own learning ability and conditions

D.2.4.4 Interpersonal communications

Understand the principles of interpersonal relations with the opposite-sex

D.2.5 Growth and adolescent healthcare

D.2.5.1 Growth and development

Understand adolescent psychological development, respond to adolescent psychological changes appropriately

D.2.5.2 Adolescent healthcare

D.2.5.2.1 Understand the causes and prevention of acnes

D.2.5.2.2 Pay attention to healthcare during menstruation, symptoms and treatment of dysmenorrhea

D.2.5.2.3 Learn to select and wear the right bra.

Appendix E (Normative Appendix)

Level V (senior secondary school)

Basic requirements for content of health education

E.2.2 Prevention of diseases

E.2.2.1 Basic knowledge of AIDS prevention and treatment

E.2.2.1.1 Master AIDS prevention methods

E.2.2.1.2 Understand the epidemic trend of HIV and AIDS and its harm to the society and economy

E.2. 2.1.3 Understand the differences between HIV-infected persons and AIDS patients

E.2.2.1.4 Understand the window and incubation period of HIV

E.2.2.1.5 Understand the knowledge of voluntary blood donation

E.2.2.1.6 No discrimination against HIV-infected persons and AIDS patients

E.2.3 Security and emergency and risk avoidance

Understand the risks of socializing on the Internet, cultivate the ability to distinguish online information

E.2.4 Mental health

E.2. 4.1 Cultivate communication ability

E.2.4.1.1 Learn to vent emotions, pour out and see things objectively from the point of view of others

E.2.4.1.2 Handle conflicts in interpersonal communications correctly, communicate with others in an active, sincere, fair, modest, generous manner

E.2.4.2 Cultivate the stress relief ability

E.2.4.2.1 Learn about skills to relieve stress effectively

E.2.4.2.2 Understand the positive significance of competition

E.2.4.2.3 Respond to failures and setbacks appropriately

E.2.4.3 Emotion regulation

Understand the common psychological problems and response during examination and other special periods, cultivate the emotion regulation ability.

E.2.5 Growth and adolescent healthcare

E.2.5.1 Growth and development

E.2.5.1.1 Love and cherish the life

E.2.5.1.2 Understand the common abnormal development in adolescence, seek medical treatment timely in case of abnormality

E.2.5.2 Establish a sense of responsibility, abide by sexual morality

E.2.5.2.1 Premarital sex impacts teenagers' physical and psychological health seriously

E.2.5. 2.2 Avoid premarital sex

4. Opinions on the Prevention of Child Sexual Abuse

Issuers: The Ministry of Education, the Ministry of Public Security, the Central Committee of the Communist Youth League, the All-China Women's Federation

Issue date: September 2013

In recent years, under the correct leadership of the CPC Central Committee and the State Council, and with the joint efforts of party committees and governments at all levels and relevant departments including education, public security, the communist youth league, and the women's federation, positive progress has been made in the protection of children. The number of safety accidents and abnormal deaths among children has decreased year by year. However, there are also some new situations and problems in the work of child protection, which need to be studied and solved urgently, for example, the increase in the number of boarding schools makes the daily safety management of schools more difficult, and the left-behind children are prone to safety problems due to the lack of parental supervision, the adverse social atmosphere affects the physical and mental development of children, the intensive media coverage on child sexual abuse cases in some places since the beginning of this year has aroused great concern of the public. In order to effectively prevent the occurrence of child sexual abuse cases, further strengthen the protection of children, and ensure the harmony and stability of the education system, the following opinions are put forward.

First, scientifically provide education on the prevention of sexual abuse. Local education department, the communist youth league and the women's federation shall provide education on sexual knowledge and sexual abuse prevention through classroom teaching, lectures, class meetings, thematic activities, manual compilation and other forms, so as to raise awareness of sexual abuse crimes among teachers, students and parents. Widely publicize the "Child Protection Instructions for Parents" and "Child Protection Instructions" to educate students, especially female students, to improve their awareness and ability of self-protection, to understand the knowledge of sexual abuse prevention, to know what sexual abuse is, and how to seek help from others after

sexual abuse. Teach students, especially female students, to be vigilant and have company as much as possible when they go out. When leaving home, they must tell their parents the return time, who they are with, contact information, etc., and keep in mind their parents' phone numbers and 911 calls. Use all kinds of media to popularize relevant knowledge and set up student protection hotlines and websites where conditions permit.

Second, regularly carry out hidden trouble investigations. Education departments shall regularly organize forces to conduct dragnet checks on primary and secondary schools, comprehensively check whether there are loopholes in the school's daily safety management system and focus on checking whether there are any abnormal conditions among teaching staff and students, whether the students especially female students have any abnormal performance, such as a sudden decline in academic performance, mental trance, and absenteeism for no reason. Strengthen the investigation of schools and teaching sites in remote areas and mountainous areas, so as to ensure that no schools and students are left behind. Rectify the hidden dangers found in the investigation in time, carefully verify the clues and signs of sexual abuse, and report those involving crimes to the police and the higher authorities in time.

Third, fully implement the daily management system. Local education departments shall adhere to the principle that "the competent authority and the owner shall take the responsibility" and implement the responsibility of primary and secondary school principals as the first responsible person for campus safety management and student protection. Guide schools to establish a handover system for lower-grade students arriving at and leaving school, and students who leave school late shall not be handed over to unrelated personnel. Improve the system of students asking for leave and reporting back from leave, and strictly prohibit students from leaving school without permission. Strengthen the construction of manpower, material, and technical security precautions, and improve the safety supervision of key time periods and posts. Strictly implement the system of duty and inspection and strengthen the comprehensive management of public security around the campus. Strictly implement the registration system for external personnel and vehicles and the entry system for internal personnel and vehicles.

Fourth, strictly manage the girls' dormitory. Local education departments and boarding schools shall implement "closed" management over all girls' dormitories, and those who have not yet achieved "closed" management shall improve dormitory conditions as soon as possible. In principle, female management staff shall be employed in girls' dormitories. Without the permission of the dormitory manager, all men, including teachers and parents, are not allowed to enter the girls' dormitory. If the dormitory management staff finds suspicious people wandering around the girls' dormitory, they shall report to the school immediately and take corresponding preventive measures. Students must ask for leave from the school and inform their parents by phone when they leave school for home and can only leave the school after the dormitory manager agrees and registers. Carry out night roll calls of students and report the students who are not in the dormitory without cause.

Fifth, earnestly strengthen the management of teachers and staff. Education departments shall ensure the industry access system, implement the relevant regulations on the qualifications of principals, teachers, and staff and workers, strengthen the examination of the qualifications of

temporary employees, and resolutely remove and deny unqualified personnel from school posts. Strictly forbidden the employment of persons who have been deprived of political rights or undergone criminal punishment for intentional crimes or persons with a history of mental illness to serve as teaching staff. Bring teachers' moral education and legal education into the training content and assessment scope of teachers and staff, strengthen assessment and evaluation, and implement management responsibilities. Strengthen the assessment of the conduct of teachers and staff, and those who have bad conduct, insult students or have a bad influence shall have their teacher's qualification be revoked by the administrative department of education at or above the county level. Pay attention to the psychological and working conditions of the teaching staff, strengthen psychological counseling, prevent individual staff from extreme psychological problems, and prevent individual staff from bad behavior in a timely manner.

Sixth, keep close contact between family and school. Local education departments and women's federations shall, by means of home visits, parent-teacher meetings, and parent schools, remind parents to arrange as much time as possible to communicate with their children and earnestly fulfill their guardianship responsibility for their children, especially in the supervision, nursing and education of students after leaving school. Parents shall be made aware of the necessary knowledge of sex and sexual abuse prevention, and explain it to their children in an appropriate way. Schools shall keep in touch with families at any time, pay special attention to the families of left-behind children, and grasp the situation of children in a timely manner, especially when children are found to have abnormal performance, both families and schools shall communicate in time, deeply understand the performance of children, jointly analyze the causes of abnormalities and take timely measures. The school's parent association and parent school shall keep in close contact with the community's parent school to build an effective protection network among the school, family and community.

Seventh, properly handle sexual abuse cases involving primary and secondary school students. Local education departments shall establish a timely reporting system for sexual abuse cases involving primary and secondary school students. Once a student is found to have been sexually abused in school, the school or parents shall immediately report to the police and inform each other. The school shall promptly report to the competent department of education at a higher level. When reporting, the relevant personnel have the obligation to protect the legitimate rights and interests of minors, strictly protect the privacy of students, prevent the disclosure of information about students and their families, and avoid secondary harm. Education departments and schools shall actively cooperate with the communist youth leagues, women's federations, families and hospitals, provide assistance to sexually abused students and their families, and promptly carry out corresponding psychological counseling and family support to help them get out of the psychological shadow as soon as possible. If the students who have been sexually abused have the need to transfer to another school, the education department and schools shall make arrangements. Those who sexually abuse students shall be severely punished and never tolerated.

Eighth, strive to create a good social environment and a positive atmosphere of public opinion. Education departments and public security organs shall analyze the security situation in schools

and their surrounding areas, grasp the chaotic points of public security and outstanding problems, and vigorously rectify the hidden dangers in schools and their surrounding areas. Public security organs shall focus on investigating the hidden dangers in and around private schools, schools in urban and rural fringe areas, and boarding schools, and severely crack down on illegal and criminal activities of child sexual abuse. Strengthen the patrol around campus to prevent cases of sexual abuse of female students by social personnel. Local education departments shall coordinate relevant departments to further strengthen positive publicity and guidance on student protection work, prevent the media from over-reporting cases of sexual abuse against students, and create a good atmosphere for the whole society to care for the healthy growth of students.

Ninth, actively build a long-term mechanism. Education departments shall regard the education on sexual abuse prevention as an important part of safety education, carry out the education in the key periods, such as, at the beginning of the school year and before the holiday, and incorporate it into the training and education of new teaching staff and students. Communist youth league organizations shall regard the education on sexual abuse prevention as an important aspect of youth self-care education activities, rely on 12355 youth service platform, set up self-care education hotlines, and organize professional social workers, public welfare lawyers, and volunteers to carry out targeted self-care education, psychological counseling and legal consultation. Women's federations shall include sexual abuse prevention education in the key contents of family education and guidance services for girls, especially those left behind in rural areas, so as to safeguard the legitimate rights and interests of girls. Strengthen cooperation and strive to build a six-in-one working mechanism integrating education, public security, the communist youth league, women's federations, families, and society for the protection of primary and secondary school students, so as to achieve full coverage of safety supervision.

5. Outline of the Healthy China 2030 Plan

Issued by the CPC Central Committee and the State Council of China

Issued in October 2016

Chapter IV Intensification of Health Education

Section I Improvement of Nationwide Health Literacy

Efforts shall be made to promote a nationwide healthy lifestyle, strengthen guidance and intervention on healthy lifestyles for families and high-risk individuals, and launch healthy weight, oral health, bone health and other special campaigns, so as to cover all counties (cities and districts) by 2030. Specifically, appropriate technologies and supplies for a healthy life shall be developed and promoted. The core information release system for health knowledge and skills shall be established and the nationwide monitoring system for health literacy and lifestyle shall be improved. The health promotion and education system shall be established and improved to increase the health education service capability and popularize scientific knowledge on health since childhood. Ideological progress shall be boosted by developing healthy culture, transforming

social traditions, and cultivating good living habits. Various types of media at all levels shall intensify the publicity of scientific knowledge on health, actively develop and standardize radio and TV programmes on health and expand health education through new media.

Section II Intensification of Health Education in School

Health education shall be incorporated into the national education system and taken as an important part of a well-rounded education in all educational stages. The health education promotion mechanism shall be established in primary and secondary schools. The health education model of combining relevant subject teaching and education activities, classroom education, and extracurricular practice, as well as regular publicity and targeted publicity, shall be built. Health education teachers shall be cultivated, and health education shall be incorporated into pre-service education and post-service training of physical education teachers.

Chapter V Development of Independent and Self-Disciplined Health Behaviors

Section IV Reduction of Unsafe Sexual Behaviors and Harms of Drug Abuse

Efforts shall be made to strengthen comprehensive social governance, provide adolescents, women of childbearing age and the migrant population with publicity, education and intervention on sexual morality, sexual health and sexual safety, strengthen comprehensive intervention on high-risk groups of sexually transmitted diseases, and reduce unwanted pregnancy and transmission of sex-related diseases. Knowledge about the harms of drug abuse, countermeasures and therapies shall be popularized. The national medical service system for drug rehabilitation shall be strengthened to identify and treat addicts as early as possible. The connection between medicine maintenance treatment and community-based detoxification, as well as compulsory isolation and community-based rehabilitation, shall be strengthened. The drug rehabilitation model with integrated functions of physical detoxification, psychological rehabilitation, employment support and reintegration into society shall be established to minimize the social harms of drug abuse.

Chapter VII Intensification of Public Health Services of National Coverage

Section II Improvement of Family Planning Service Management

Comprehensive decision-making systems and mechanisms for population and development shall be improved to build a policy system that is conducive to balanced population development. Family planning service management modes shall be reformed to pay more attention to serving families, and establish a family development policy framework themed on birth support, childcare, adolescent development, support for the elderly and care for the sick and disabled, so as to guide the people to give births in a responsible and planned manner. National family planning technology service policies shall be improved to strengthen family planning technology service guarantee for rebirths. Informed choice shall be promoted in an all-round way to popularize knowledge about contraception, birth control and reproductive health (briefly).

Chapter XII Improvement of Medicine Supply Guarantee System

Section II Improvement of National Medicine Policy

The national essential medicine system shall be consolidated and improved to ensure special groups of population enjoy the basic medicine guarantee. The existing free medical treatment policy shall be improved to increase the free supply of HIV and AIDS prevention and treatment medicines and other special medicines. Besides, efforts shall be made to guarantee pediatric medicines, improve the medicine guarantee policy for rare diseases, and establish a comprehensive clinical evaluation system focusing on essential medicines. The medicine pricing mechanisms shall be improved in the principle of combining government regulation with market regulation. Meanwhile, efforts shall also be made to strengthen the connection of pricing, medical insurance and procurement policies, adhere to classified management, strengthen the supervision over medicines with insufficient market competition and high-value medical consumables, establish a medicine price information monitoring and disclosure system, and formulate and improve the payment standard policy for medicines under medical insurance.

6. Core Information and Interpretation of Chinese Adolescent Health Education (2018)

Issued by the National Health Commission

Issued in September 2018

- I. A healthy and civilized lifestyle is conducive to preventing the majority of adolescent health problems effectively and promoting the healthy growth of adolescents.
- (I) A healthy and civilized lifestyle is conducive to preventing myopia, overweight and obesity, injury, Internet addiction and other common health problems, reducing the threats of tuberculosis, influenza and other infectious diseases, avoiding tobacco, drug abuse, premature sex, unsafe sex and other severe harms to adolescent health, while benefiting teenagers for a lifetime.
- VI. Traffic injuries, violent injuries and drowning could be prevented effectively by enhancing the security awareness and mastery of scientific knowledge and skills of injury prevention.
- (III) Violent injuries would cause serious and lasting impacts on physical and psychological health and social interactions of adolescents.
- 1. Violent injuries on adolescents include physical and mental injuries caused by fighting, school bullying, weapon threats and other violent behaviors.
- 2. Adolescents shall establish a righteous outlook on life, develop optimistic and open-minded attitudes, establish good interpersonal relations, and actively participate in beneficial social activities, with no forming of cliques or blindly imitating violent scenes that appear in movies and TV series. They shall learn skills to communicate and control emotions and avoid aggressive behaviors.
- 3. In case of any violent injuries, adolescents shall report to teachers or parents timely, and call for help or dial 110 when necessary.

- VII. Correct knowledge of reproductive and sexual health shall be mastered to avoid premature sex and prevent HIV/AIDS and other sexually transmitted diseases.
- (I) Receiving and participating in comprehensive sexuality education can improve adolescents' cognition of sexual and reproductive health and awareness of self-protection and respect for others' physical and mental health.
- (II) Understand the structure, characteristics and relevant functions of male and female reproductive organs.
- (III) Understand the development of secondary sexual characteristics of adolescents, including occurrence and characteristics of female menstruation, male erections and spermatorrhea.
- 1. Male secondary sexual characteristics include facial hair, armpit hair, pubic hair, Adam's apple and voice mutation. Female secondary sexual characteristics include breast development, pubic hair and armpit hair, among which breast development is the first expression of the secondary sexual characteristics.
- 2. Female menarche is an important sign of adolescence. After menarche, excessive menstruation, dysmenorrhea and irregular menstruation are common phenomena. Generally, it takes about 2 years to form regular menstruation.
- 3. Spermatorrhea refers to the ejaculation without sexual intercourse. In adolescence, experiencing spermatorrhea once or twice a month is a normal phenomenon.
- (IV) Adolescent physiological development brings many psychological changes, including affection for the opposite sex, which requires understanding of oneself and others rationally and objectively, establishing a right view of love, and realizing that love and marriage are closely related to physical and mental growth and maturity.
- (V) Good health habits shall be developed and maintained, such as maintaining the vulva clean, cleaning the vulva every day, wearing soft, comfortable, breathable and sweat-absorbing cotton underwear, rather than tight ones.
- (VI) Premature sex, early pregnancy or induced abortion may cause great physical and psychological harms to adolescents. Unsafe sex may cause infection with AIDS, syphilis, gonorrhea, and other sexually transmitted diseases. Adolescents shall avoid premature sex, sexual harassment, sexual education and sexual violence.
- IX. With scientific response methods and a positive and healthy psychological state, efforts shall be made to take an active part in cultural and sports activities and social practice, and seek help timely to solve problems, so as to reduce anxiety, depression and other psychological problems and Internet addiction.
- (III) The Internet shall be used reasonably and safely with a positive attitude, in order to enhance the discriminating ability regarding Internet information, and resist Internet addiction.

1. Internet addiction refers to the uncontrollable behavior of Internet use under no effect of any addictive substances, which is manifested as obvious impairments of academic, occupational and social functions caused by excessive Internet use. In the diagnosis of Internet addiction disorder, duration is an important criterion. In general, a definite diagnosis could be made when relevant behaviors last for at least 12 months.

2. Internet addiction includes addition to online activities including online games, pornography, information collection, relationship, gambling and shopping, among which addiction to online game is the most common.

3. Internet addiction causes serious harm to the physical and psychological health of adolescents, as well as harms to families and the society.

4. Adolescents shall develop a correct understanding of the Internet and themselves, foster ideals and focus on study. When feeling addicted to the Internet, they shall repeat "I can make it" and "I can quit it" in mind. When they are able to resist Internet seduction, they would feel encouraged by themselves and reinforce their faith. Besides, they could write down the harms of the internet addiction and their determination to stay away from it, as a reminder to divert their attention from it; and could join clubs and take an active part in activities they are interested in and integrate that into actual interpersonal communications.

5. When using the Internet, adolescents shall ensure the safety and privacy of their personal information, and prevent physical and psychological harms caused by improper use of the Internet.

7. China's Education Modernization 2035 Plan

Issuers: the CPC Central Committee, the State Council

Issue date: February 2019

Strategic Tasks

Second, develop world-class quality education with Chinese characteristics. Fully implement the fundamental task of building morality and cultivating people, carry out extensive ideal and belief education, instill patriotism, strengthen moral cultivation, enrich knowledge and experience, foster the spirit of hardworking, and constantly improve students' ideological level, political consciousness, morality and cultural accomplishment. Strengthen the comprehensive quality, establish the health-first educational concept, comprehensively strengthen and improve school physical education and aesthetic education, carry forward the spirit of labor, and strengthen the cultivation of practical ability, cooperation ability and innovation ability. Improve the system of educational quality standards, formulate educational quality standards that cover all phases of studying, reflect the advanced level of the world, and meet the characteristics of different levels of education, and clarify the requirements for students' core accomplishment. Improve the performance quality standards of preschool education. Establish and improve the academic quality standards of various disciplines and physical health in primary and secondary schools. Improve the quality standards for personnel training in vocational education and formulate diversified quality standards for personnel training in

higher education that keep pace with the development of the times. Establish a standard system and a dynamic adjustment mechanism for standard of the condition for school-running, focusing on resource elements including the allocation of teachers, per student funding, teaching facilities and equipment.

Strengthen the construction of the curriculum and teaching material system, scientifically plan the curriculum of universities, primary and secondary schools, classify and formulate curriculum standards, make full use of modern information technology, and enrich and innovate the curriculum forms. Improve the national teaching material system, give priority to overall planning, combine centralization and decentralization, provide categorized guidance, enhance the ideological, scientific, ethnic, contemporary and systematic nature of teaching materials, and improve the mechanism for teaching materials compiling, revising, reviewing, selecting and withdrawing. Innovate the way of cultivating talents, promote the teaching methods such as heuristic, inquiry, participation and cooperation, as well as the teaching organization modes such as the shift system and course selection system, so as to cultivate students' innovative spirit and practical ability. Vigorously promote the construction of campus culture. Emphasize family education and social education. Build an educational quality evaluation and monitoring mechanism, establish a more scientific and fair examination and evaluation system, and establish a whole-process and omnidirectional feedback and monitoring system for talent training.

8. National Family Education Guidelines (revised)

Issuers: The All-China Women's Federation, the Ministry of Education, the Office of the Spiritual Civilization Steering Committee of the CPC Central Committee, the Ministry of Civil Affairs, the Ministry of Culture and Tourism, the National Health Commission, the National Radio and Television Administration, the China Association for Science and Technology, the Working Committee for the Care of the Next Generation

Issue date: May 2019

- (V) Key points of family education for children aged 12-15
- (5) Provide sexuality education to children. Guide parents to fully understand adolescent physiological and health knowledge, carry out timely and appropriate sexuality education for children, help children acquire the necessary knowledge about puberty, understand and adapt to physical changes; carry out sexual psychological counseling in a scientific way, and guide children in communication with the opposite sex; strengthen sexual moral education for children to help them realize that people should adopt responsible attitudes and behaviors for the sake of sexual and reproductive health.
- (VI) Key points of family education for children aged 15-18
- (3) Improve children's ability to communicate and cooperate. Help parents guide their children to actively participate in social activities and normal communication with the opposite sex, according

to the personality characteristics of the specific age groups that the children belong to; carry out sexuality education with an emphasis on sexual morality, sexual responsibility, sexual health, prevention and rejection of unsafe sex; give proper guidance to children who are in love; encourage children to temper themselves through collective life, learn to get along with others, and experience the joy of cooperation with others; help children learn to be tolerant and handle friendship properly; understand the nature and characteristics of bullying in school and the basic ways to deal with it through home-school cooperation.

9. Healthy China Action Plan (2019-2030)

Issuer: the Promotion Committee of Healthy China Action Plan

Issue date: July 2019

I. Overall Requirements

(I) Guiding Ideology

Under the guidance of the Xi Jinping Thought on Socialism with Chinese Characteristics for a New Era, we should fully implement the spirit of the 19th CPC National Congress and the second and third Plenary sessions of the 19th CPC Central Committee; conscientiously implement the decisions and arrangements of the CPC Central Committee and the State Council; adhere to the people-centered development idea, firmly establish the concept of "big hygiene, big health"; adhere to the principle of giving priority to prevention while combining prevention and treatment, focus on the grass-roots level; take reform and innovation as the driving force; attach equal importance to traditional Chinese and western medicine; integrate health into all policies; focus on key groups in view of major diseases and some outstanding problems; implement a number of major actions; coordinate efforts of the government, society and individuals; establish and improve the health education system; guide the people to establish a correct concept of health; form a healthy lifestyle, ecological environment and social environment; promote the transition from treatment-centered to health-centered; and improve people's health.

(II) Basic Path

- Popularize health knowledge. Take the improvement of health literacy as the premise of improving the health of all people and strengthen health education and promotion according to the characteristics of different groups, so as to equip all people with basic quality and ability in terms of health knowledge, behaviors and skills, and achieve health literacy for everyone.

III. Major Actions

(V) Mental Health Promotion Action

- Individual and family:

1. Improve the awareness of mental health and pursue both mental and physical health. As we all may encounter a variety of mental health problems in our lives, we should actively learn and

understand mental health knowledge, scientifically understand the interaction between mental and physical health, maintain positive and healthy emotions, and avoid persistent negative emotions that may cause harm to physical health. We should advocate the concept of moral and health care, maintain the moderation, and improve psychological resilience. In the treatment of physical diseases, we should pay attention to the role of psychological factors. When self-adjustment doesn't work, we should seek psychological counseling and psychotherapy to relieve emotions in time and prevent the occurrence of psychological and behavioral problems and mental disorders.

- 2. Use scientific methods to relieve stress. Maintain an optimistic, cheerful and open-minded attitude towards life, and set personal goals reasonably. Correctly understand the impact of major unexpected events in life and work and other events on our mind, learn the basic knowledge of stress relief, and learn scientific and useful psychological adjustment methods. Learn and use healthy stress relief methods, and avoid unhealthy stress relief methods such as smoking, drinking, indulging in the Internet or video games. Learn to adjust the mental state, identify negative thoughts behind bad emotions, adjust according to objective reality, and reduce irrational thinking. Establish good interpersonal relationships, actively seek interpersonal support, talk to someone and ask for help. Maintain a healthy lifestyle, actively participate in social activities, and cultivate healthy interests.
- 3. Attach importance to sleep hygiene. Ensure adequate sleep time every day, follow the regular hours for work, study, entertainment, and rest. Live a regular life. Understand the adverse psychological effects of sleep deficiency and sleep problems, make up for sleep deficiency in time, and seek medical treatment in time for sleep problems. Improve sleep in a scientific way under professional guidance and take medicine according to doctor's advice.
- 4. Foster the habit of scientific exercise. Choose and cultivate one's own sports hobbies, actively take advantage of exercise for regulation of emotion. In the case of mild emotional distress, relieve the mental stress through exercise.
- 5. Correctly understand common emotional problems such as depression and anxiety. The occurrence of depressed mood, loss of pleasure, loss of interest, accompanied by loss of energy and appetite, sleep disorders, decreased self-evaluation, pessimism and disappointment about the future, and even self-injury and suicidal thoughts or behaviors, if lasting for more than 2 weeks, may indicate depressive disorders; frequently feeling nervous, afraid, fearful with no obvious reasons, often accompanied by obvious palpitations, sweating, dizziness, dry mouth, shortness of breath or other physical symptoms, or having a sense of near-death or out of control, if occurring frequently, may indicate anxiety disorders. Temporary or short-term depression and anxiety can be alleviated and eliminated through self-adjustment or psychological counseling and shall not cause excessive worry. Depressive disorder and anxiety disorder can be treated by medicine, psychological intervention, or a combination of both.
- 6. Ask for help in time for psychological and behavioral problems. Seek professional help from relevant departments of the hospital, professional psychological counseling institutions and social work service institutions. It is important to realize that turning to professionals for help does not mean that a person is sick or seriously ill, but that he is responsible and capable.

- 7. Follow the doctor's advice in the treatment of mental illness. Go to the psychiatric hospital or the specialist clinic of general hospitals for the diagnosis of mental illness. Receive regular treatment in time after the diagnosis, follow the doctor's advice for hospitalization or outpatient treatment, actively implement the treatment plan, take medicine in the full course of treatment, uninterrupted and on time, in accordance with the doctor's advice, and do not rush to reduce or stop taking medicine after the disease has been effectively controlled. Return to the outpatient clinic on time, timely and truthfully give feedback to the doctors on the treatment and follow the doctor's guidance. Psychotropic drugs must be used under the guidance of a doctor and must not be taken arbitrarily.
- 8. Care for and understand people with mental illness and reduce discrimination. Learn and understand the basic knowledge of mental illness, know that mental illness can be prevented and treated, respect mental patients, and do not discriminate against them. Recognize that mental illness can be relieved and recovered after effective treatment, and the patients can undertake family and work functions after effective treatment. Provide a supportive environment for patients with mental illness and their families and caregivers, improve their psychological and behavioral skills, and help them gain a sense of value.
- 9. Pay attention to the psychological status of family members. Family members should communicate on an equal footing and respect the different psychological needs of family members. When there is a conflict with family members, do not use extreme words or hurtful acts, do not be indifferent and avoid each other. Address the conflict through active communication. Timely dredge up bad emotions and create a family atmosphere of mutual understanding, mutual trust, mutual support, mutual care and harmonious family relations.

(VIII) Health promotion actions in primary and secondary schools

- Individual:
- 4. Understand the knowledge of prevention and control of infectious diseases, strengthen the physique, and prevent infectious diseases, especially common respiratory infectious diseases.
- 5. Master scientific coping methods to promote mental health. Maintain a positive and healthy mental state and actively participate in cultural and sports activities and social practice. Understand the impact of bad emotions on health, and master the basic methods to regulate emotions. Correctly identify psychological problems, learn to practice positive suggesting and appropriate venting. Vent the bad emotions such as pain, grievance and anger by taking a deep breath or talking to friends, journaling, painting, playing football and so on. Seek help from parents, teachers and friends, or proactively seek psychological guidance (psychological counseling and treatment, etc.).
- 6. Use the Internet reasonably and safely, enhance the ability to discern Internet information, proactively control the time spent on the Internet, and resist Internet addiction.
- 7. Ensure enough sleep and don't stay up too late. Use the ears scientifically and protect the hearing. Brush the teeth in the morning and evening, and rinse the mouth after meals. Brush the teeth in the correct way for no less than 2 minutes each time. Remind parents to accompany their

children to seek medical treatment of dental caries. Do not smoke, say no to secondhand smoking, and help parents quit smoking. Enhance own safety awareness, master injury prevention knowledge and skills, prevent traffic injuries, campus violence, drowning, sexual harassment and sexual abuse. Stay away from unsafe sex. Don't try drugs for any reason.

- School:
- 6. Set physical education and health education courses for different levels of schooling, teach students the knowledge of healthy behaviors and lifestyles, disease prevention and control, mental health, growth and development and puberty health care, safety emergency and risk aversion, etc. improve students' health literacy, actively use various forms to carry out health education for students and parents. Train health education teachers, develop and expand health education curriculum resources.
- Government:
- 1. Review and revise the Regulations on School Hygiene Work and the Guidelines for Health Education in Primary and Middle Schools, formulate the Regulations on School Food Safety and Nutrition and Health Management, and further improve the regulations and systems for the development of school physical health. Formulate standards for healthy schools and build healthy schools. Deepen the teaching reform of school physical education and health education and offer physical education and health education courses in primary and secondary schools across the country. Determine the content of health education according to the growth rules and characteristics of students at different levels of schooling, and include it in the scope of evaluation, put in place the teaching plans, teaching materials, class hours and teachers, and gradually cover all students. (The Ministry of Education takes the lead, while the National Health Commission and other departments undertake respective roles and responsibilities.)

(VII) Maternal and child health promotion actions

- Individual and Family:
- 1. Actively prepare and give birth to a healthy new life. Proactively learn the knowledge of maternal and child health care and the prevention and treatment of birth defects, and fully understand that pregnancy and delivery are the normal physiological process of human reproduction. Actively participate in pre-marriage and pre-pregnancy health examinations, choose the best childbearing age, and take folic acid supplement 3 months before and after pregnancy. Prevent infection, quit smoking and drinking, and avoid exposure to toxic and harmful substances and radiation.
- 2. Carry out regular antenatal examinations to ensure the safety of the mother and baby. Register with the medical and health institution after pregnancy as soon as possible, screen and assess pregnancy risks, receive pregnancy and birth care services on time according to different risk management requirements, and master the knowledge and skills of self-care during pregnancy and birth. Receive at least 5 antenatal examinations during pregnancy (1 in the first trimester, 2 in the second trimester and 2 in the third trimester). Pregnant women with abnormal conditions are advised to increase the number of antenatal examinations in accordance with the doctor's

advice. Tests for HIV and AIDS, syphilis and hepatitis B are recommended for the first antenatal examination. Receive regular prenatal screenings. Pregnant women at advanced maternal age, i.e. above 35 years old, and high-risk pregnant women are advised to receive prenatal diagnosis services in qualified medical institutions in time. During pregnancy, if there is any discomfort, the pregnant woman should go to a medical and health institution immediately. Pregnant women should give birth in the hospital in time. Natural delivery is encouraged and the cesarean delivery not for medical needs should be reduced. Pregnant women should be provided with a reasonable diet, balanced nutrition and maintain a reasonable body weight. Maintaining a positive attitude and relaxing the mood can help prevent pregnancy and postpartum depression. Proactively receive visits from community doctors 3-7 days and 42 days after delivery, and choose appropriate contraceptive measures according to their own conditions.

- 3. Bring up children scientifically to promote the healthy growth of children. Strengthen the awareness of parents that they are the first person responsible for children's health, and improve their health literacy. Breast milk is an ideal natural food for babies. Babies should be breastfed as early as possible after birth, and hundred percent breastfeeding shall last for 6 months as much as possible, and gradually supplement that with iron-rich pasty food after 6 months. Babies under 1 year old should not drink fresh milk. Understand the characteristics of children's development, treat the differences among children rationally, respect each child's own development rhythm and characteristics, understand and respect children's emotions and needs, and provide children with a safe, beneficial and interesting growth environment. Avoid the impact on children's brain development and psychological growth due to excessive stress, lack of exercise, lack of social activities and other factors. Identify children's psychological and behavioral problems, and try not to be too nervous or neglecting. Seek help from professionals timely. Avoid accidental injuries such as falls, burns, asphyxiation, poisoning, electric shock, drowning, animal scratching and biting.
- 4. Strengthen health care and prevent childhood diseases. Implement children's health management, carry out vaccination according to the planned schedule of immunization. Receive screening for neonatal diseases such as phenylketonuria, congenital hypothyroidism and hearing impairment, and screening children aged 0-6 for vision, hearing, intelligence, physical disability and autism. Those who are tested positive should receive follow-up visits, diagnosis, treatment and intervention. Children under 3 should receive 8 health check-ups in township health centers or community health service centers, and children aged 4-6 should receive health check-ups once a year.
- 5. Care for women and promote reproductive health. Women are recommended to improve their awareness and ability of reproductive health, actively acquire knowledge about puberty, childbearing, menopause and senile health care, pay attention to menstrual hygiene, and be familiar with the symptoms and prevention knowledge of common diseases such as reproductive tract infection, breast disease and cervical cancer. The family members are recommended to strengthen their psychological support for women in special periods. Master the skill of making informed choice of contraceptive methods, know all kinds of contraceptive methods, and know the dos and don'ts of the contraceptive methods being used. Recognize the impact of promoting reproductive health on individuals, families and society, enhance awareness of sexual morality, sexual health

and sexual safety, refuse unsafe sex, avoid unintended pregnancy, pregnancy at a young age, and sexually transmitted diseases.

- Society and Government:
- 2. Strengthen health care before marriage and pregnancy, and during pregnancy, neonatal period and childhood, promote the use of the Maternal and Child Health Handbook, and provide systematic and standardized services for women and children. Improve the network for the prevention and control of birth defects and improve the accessibility of comprehensive prevention and control services for birth defects. (The National Health Commission undertakes the responsibility)
- 3. Vigorously popularize the scientific knowledge of maternal and child health, and promote the "one-stop" service model of marriage registration, premarital medical examination and family planning guidance. Provide contraceptive service following induced abortion, standardize the service of postpartum contraception, and improve the accessibility of free contraceptives. Strengthen the protection of female workers and avoid exposure to toxic and harmful substances and radiation by women preparing for pregnancy, during pregnancy and breastfeeding. Promote the construction of facilities such as pregnant women's lounges and maternal and infant rooms. (Led by the National Health Commission takes the lead, the responsible agencies include the Ministry of Civil Affairs, the All-China Federation of Trade Unions and the All-China Women's Federation.)
- (XV) Prevention and control of infectious and endemic diseases
- Individual:
- 1. Improve the awareness of self-protection. Learn about relevant knowledge about the harm and prevention of HIV/AIDS, hepatitis B and hepatitis C and understand relevant policies. Resist prostitution, promiscuity, drug use and other illegal and criminal acts. Avoid and reduce the risk of infection of HIV, hepatitis B and hepatitis C. Do not share needles, razors and toothbrushes, and remain loyal to sexual partners, promote responsible and safe sexual behaviors, and encourage the use of condoms. Actively participate in publicity activities for infection prevention and control, and actively receive tests after risky behaviors. Do not discriminate against infected people and patients.
- 2. Fully understand the important role of vaccines in disease prevention. Vaccination is the safest and most effective measure to prevent hepatitis B. The medical personnel, people who are in frequent contact with blood, staff of nurseries and kindergartens, family members of HBsAg carriers, gay men or people with multiple sexual partners and intravenous drug users are recommended to receive hepatitis B vaccination. Babies born to mothers of HBsAg carriers are recommended to receive combined immunization with hepatitis B immunoglobulin and hepatitis B vaccine within 24 hours after birth (the earlier the better) to block mother-to-child transmission. Pay attention to healthy diet and drinking water, prevent hepatitis A and E virus infection.
- Society and Government:
- 1. Mobilize people from all walks of life to participate in HIV/AIDS prevention and control work. Support social organizations, enterprises, foundations, relevant organizations and volunteers

to carry out public welfare activities such as HIV/AIDS prevention and control publicity, poverty alleviation and assistance for infected people. Encourage and support the mobilization, testing, comprehensive intervention, care and assistance for people who are susceptible to risky behaviors of AIDS. (Led by the National Health Commission takes the lead, the responsible departments include the Publicity Department of the Central Committee of the CPC, the Ministry of Civil Affairs, the Ministry of Finance, the National Administration of Traditional Chinese Medicine, the All-China Federation of Trade Unions, the Central Committee of the Communist Youth League, the All-China Women's Federation, the Red Cross Society of China, the All-China Federation of Industry and Commerce.)

2. Achieve full coverage of HIV, HBV and HCV nucleic acid testing in blood banks and full coverage of measures to prevent HIV/AIDS, syphilis and mother-to-child transmission of hepatitis B, and implement policies for the treatment and assistance of infected people. Comprehensively improve the pertinence of HIV/AIDS prevention publicity and education, and improve the effectiveness of comprehensive intervention, the accessibility of testing counseling and the standardization of follow-up services. (Led by the National Health Commission takes the lead, the responsible departments include the Publicity Department of the Central Committee of the CPC, the Committee of Political and Legislative Affairs of the Central Committee of the CPC, the Office of the Central Cyberspace Affairs Commission, the National Development and Reform Commission, the Ministry of Education, the Ministry of Industry and Information Technology, the Ministry of Public Security, the Ministry of Civil Affairs, the Ministry of Justice, the Ministry of Finance, the Ministry of Transport, the Ministry of Agriculture and Rural Affairs, the Ministry of Culture and Tourism, the General Administration of Customs, the National Radio and Television Administration, the National Medical Products Administration.)

10. Law of the People's Republic of China on the Protection of Minors (revised in 2020)

Issuer: the Standing Committee of the National People's Congress

Issue date: October 2020

Article 40 Schools and kindergartens shall establish a working system for the prevention of sexual assault or harassment of minors. Schools and kindergartens shall not conceal such illegal and criminal acts of sexual assault and harassment to minors. They shall report to the public security organ and the educational administration department in time, and cooperate with relevant departments to deal with such illegal and criminal acts in accordance with the law.

Schools and kindergartens shall carry out sex education for minors appropriate for their age, and improve their awareness and ability of self-protection against sexual assault or harassment. Schools and kindergartens shall take timely protective measures for minors who suffer from sexual assault or harassment.

Article 41 Infant care service institutions, early education service institutions, off-campus training institutions and off-campus care institutions shall, with reference to the relevant provisions of this chapter, protect minors according to the characteristics and laws of minors' growth at different ages.

11. Regulations on the Protection of Minors in Schools

Issuer: the Ministry of Education

Issue date: June 2021

Article 6: Schools shall treat each student equally and must not discriminate against students or treat them differently due to their ethnicity, race, sex, household registration, profession, religion, education level, family situation, or physical or psychological health, or that of their parents or other guardians (hereinafter parents).

Article 18: Schools shall implement laws and regulations to establish systems for the work of preventing and controlling student bullying, preventing sexual abuse and harassment, and providing other special protections, and to establish zero-tolerance mechanisms for handling acts of student bullying, sexual abuse, or sexual harassment, and mechanisms for the care and support of students who are harmed.

Article 19: Schools shall establish internal bodies for handling student bullying, consisting of relevant persons, vice-principals for the rule of law, legal consultants, relevant experts, parent representatives, student representatives, and others participating, to be responsible for the prevention of student bullying, publicity and education, organizing determinations, implementing corrections, providing support, and so forth.

Schools shall periodically carry out surveys of the entire student body on the prevention and handling of bullying to assess whether bullying behavior exists in schools.

Article 20: Schools shall educate and guide students to establish equal, amicable, and mutually assistive relationships with classmates, organizing staff to study policies, measures, and means of preventing and addressing student bullying, and carry out thematic education for students, and based on the circumstances shall provide student's parents with necessary family education and guidance.

Article 21: Where teachers and staff discover students demonstrating the following behavior, they shall stop them immediately:

- (1) Beating, kicking, slapping, scratching, biting, pushing, pulling, and other acts infringing upon others' bodies, or intimidation or threatening of others;
- (2) Acts violating others' personal dignity such as insulting, mocking, ridiculing, mimicking, or giving derogatory nicknames;
- (3) Robbing, grabbing by force, or intentionally destroying others' property;
- (4) Maliciously excluding or isolating others, impacting their participation in school activities and social interactions;
- (5) Using networks or other means of information transmission to distort facts and defame others, spread rumors, belittle others with false information, or to maliciously spread others' private personal information.

Where the acts in the preceding paragraph are carried out intentionally or maliciously between students by the side that has an advantage in terms of age, physique, or numbers, or one side repress or berate the other side by other means, causing physical injury, harm to property, or emotional damages, it may be identified as bullying.

Article 22: Teachers and staff shall pay attention to students who might be at a disadvantage due to physical capacity, family background, or academic performances, or students with a special status, and where finding that students are isolated, excluded, or so forth, shall promptly intervene.

Where teachers and staff discover that students have clearly emotional dysregulation, physical injuries, and so forth, they shall promptly communicate with them to understand the situation, and where there may be bullying shall promptly report to the school.

Schools shall educate and support students' proactive and prompt reporting of bullying as they discover, to protect their lawful rights and interests and those of others.

Article 23: Where schools receive reports about bullying, they shall immediately conduct an investigation, and where they find that it might constitute bullying shall promptly submit it to the student bullying organization for identification and handling, and notify relevant students and parents to participate in the identification and handling of the cases. Where an identification of bullying is made, an educational or disciplinary sanction shall be adopted against the students that carried out or participated in the bullying, and their parents are to be requested to strengthen discipline; when necessary the vice-principal or tutors for the rule of law may admonish or educate the students and their parents.

Schools must not conceal serious bullying behaviors that violate the administration of public security or are suspected crimes, and shall promptly report them to the public security organs or administrative departments for education, and cooperate with the relevant departments to address them.

In cases of student bullying between students at different schools, a joint administrative mechanism shall be established under the guidance of the administrative departments for education to conduct identification and handling.

Article 24: Schools shall establish and complete norms for interactions between staff and students, provisions on security management in student dorms, provisions on video monitoring, and other similar systems, and establish working mechanisms for preventing, reporting, and addressing sexual abuse and sexual harassment.

Schools shall employ necessary measures to prevent and stop teachers, staff, and other persons entering campus from carrying out the following acts:

- (1) Having romantic or sexual relationships with students;
- (2) Acts of molestation such as fondling or intentionally touching certain parts of students' bodies;
- (3) Flirting, teasing, or making sexually suggestive comments or actions towards students;

- (4) Displaying or playing pornographic or obscene information, publications, films, videos, pictures, or other obscene materials to students;
- (5) Being in possession audiovisual, image-text materials with obscene or pornographic content;
- (6) Other illegal or criminal acts of sexual harassment or sexual abuse.

Article 28: Schools shall set up libraries and book corners in classrooms in accordance with relevant provisions, providing reading materials with positive contents suitable for the cognitive ability of students, to create a good environment for reading, cultivate students' reading habits, and increase the quality of their reading.

Schools shall strengthen management of the environment for reading and campus culture, prohibiting harmful reading materials, images, audiovisuals, and so forth from entering campus, such as those that are harmful to the physical and psychological health of minors with obscene, pornographic, violent, cult, superstitious, gambling, terrorist, separatist, or extremist content, as well as commercial advertising, and phenomena contrary to the Core Socialist Values.

Article 41: Principals are the first person responsible for protecting students and the school. Schools shall designate one school leader to have direct responsibility for the school's protection efforts and clarify the specific structure for carrying out protection work, and where they have the capacity they may designate a student protection personnel for this work. Schools shall provide capacity and support for the personnel undertaking student protection work, to receive related legal, ethical, and technical training and support, and provide specific training for school staff engaged in student protection work.

Schools with the necessary capacity may integrate organizations and working mechanisms such as for the prevention of bullying and for disciplinary sanctions, forming a student protection committee responsible for the overall protection of student interests, and establishment of related systems.

Article 42: Schools should establish an educational principle that places the cherishing of life at the center, and guide students to love and respect life through providing education with a series of themes such as safety education, mental health education, environmental protection education, health education, anti-drug and AIDS prevention education; carry out targeted education on puberty and sexuality education, to help students understand knowledge about physiology and health, and to increase their ability to protect themselves from and defend against sexual abuse and sexual harassment.

Article 47: Where schools, teachers, and staff discover that students have suffered or are suspected of suffering from domestic violence, abuse, abandonment, being left unattended to for long periods, disappearances, or other unlawful violations, or are at risk of facing illegal violations, they shall promptly report it and make a record with relevant departments such as public security, civil affairs, and education. Schools shall actively engage and cooperate with relevant departments to complete efforts to investigate and handle cases of violations of students' rights.

Article 49: Where students request protection from the school due to abandonment or abuse,

the school must not refuse or shuffle the responsibility to others, and where it is necessary shall practice aid in the first place.

Schools shall show concern and care for students, and provide mental health counseling and assistive education for students that suffer from physical or psychological injuries. Where bullying causes physical or psychological injury to a student and there is no way for them to continue studying in that class and their parents request they change classes, the school shall support it if they find the option necessary upon assessment.

Article 53: The administrative departments for education shall designate specialized bodies or individuals to take responsibility for overseeing the protection of students, and where they have the capacity they may set up full-time or part-time personnel responsible for efforts to protect minors and for handling or guiding the handling of student bullying, sexual abuse and sexual harassment, and other matters violating the rights and interests of students, and working with relevant departments to implement a safe zone system in school and improve working mechanisms for the resolution of disputes involving the school.

The persons responsible for protection of students shall receive specialized training and have the knowledge and abilities necessary for student protection work.

12. Decision of the CPC Central Committee and the State Council on Optimizing Fertility Policy and Facilitating Long-Term Balanced Population Development

Issuer: the CPC Central Committee, the State Council

Issue date: June 2021

IV. Improve the level of childbirth and child-raising services

(XII) Ensure maternal and child health. Fully implement the five systems for maternal and infant safety, including pregnancy risk screening and evaluation, case management of high-risk pregnant women, critical treatment, maternal death case report and interview notification. Implement the maternal and child health security project, and accelerate the standardization construction and standardized management of maternal and child health care institutions at all levels. Strengthen the management of critically ill pregnant women, neonatal treatment capacity and pediatric service construction. Consolidate the three-level grass-roots network in counties and villages and accelerate efforts to make up for the shortcomings of public services related to childbirth. Promote the integration of reproductive health services into the whole process of women's health management. Strengthen the standardization of child health clinics and strengthen the prevention, diagnosis and intervention of myopia, malnutrition, caries and other risk factors and diseases among children and adolescents. Do a good job in children's basic medical security.

VI. Reduce the costs of childbirth, child-raising and education

(XXI) Protect the legitimate rights and interests of women in employment. Regulatory authorities, enterprises, institutions and other employing units promote women's equal employment. Implement the Special Regulations on Labor Protection for Female Employees, and regularly carry out special

supervision on the protection of reproductive rights and interests of female employees. Provide re-employment training as public services for women whose employment is interrupted due to childbirth. Regard fertility- friendliness as an important aspect of employers' social responsibility. Encourage employers to formulate measures conducive to employees' balance of work and family, and negotiate and confirm flexible leave and working mode conducive for the care of infants and young children according to the law. Timely revise and improve the current policies and regulations on vacation and working hours.

VIII. Strengthen organizational readiness for implementation

(XXVI) Mobilize social forces. Coordinated governance between the government and society shall be strengthened, to give full play to trade unions, the communist youth league women's federations and other mass organizations that play important roles in promoting population development, family building, and reproductive support. Give full play to the role of family planning associations and strengthen capacity of grass-roots organizations in publicity and education, reproductive health advisory services, guidance to quality prenatal and postnatal care, assistance to families suffering from the consequences of following the one-child policy, maintenance of rights and interests, and family health promotion. Encourage social organizations to carry out public welfare activities to popularize health knowledge and infant care services. Carry out vigorous city development activities to meet the living needs of the elderly and create a healthy growth environment for infants and children.

13. Opinions of the Ministry of Education and Other Four Departments on Comprehensively Strengthening and Improving School Hygiene and Health Education Work in the New Era

Issuers: The Ministry of Education, the National Development and Reform Commission, the Ministry of Finance, the National Health Commission, the State Administration for Market Regulation

Issue date: August 2021

- II. Deepen the reform of education and teaching
- 5. Make clear the content of health education. Build a phased, integrated health education content system. Revise the Guidelines on Health Education in Primary and Middle Schools and implement the Guidelines on Health Education in Colleges and Universities. Advocate science and respect life, guide students to actively learn and master knowledge and skills in daily exercise, prevention of infectious diseases, food hygiene and safety, reasonable diet, physical examination, mental health, growth and development, sexual and reproductive health, cardiopulmonary resuscitation, safety, and emergency rescue, etc. Include drug education such as the prevention of new drugs in the health education curriculum. Implement the task of special education on AIDS prevention, and strengthen education on puberty, sexual morality, and sexual responsibility. Develop health education and teaching resources. Carry out nationwide school health education demonstration courses and teaching & research communication.

14. Outline of Children's Development in China (2021-2030)

Issuer: the State Council

Issue date: September 2021

II. Development areas, main objectives, and strategic measures

(I) Children and health

Main objectives:

Children of school age generally receive sexuality education, and the accessibility of children's sexual health services is significantly improved.

Strategic measures:

Provide sexuality education and sexual health services for children. Guide children to establish correct gender concepts and moral concepts, and correctly understand the relationship between different genders. Bring sexuality education into the basic education system and quality monitoring system to enhance the effectiveness of education. Guide parents or other guardians to provide sexuality education according to children's age and development characteristics, strengthen education on prevention of sexual abuse, and improve children's awareness and ability of self-protection. Promote close cooperation between schools and medical institutions to provide child-friendly sexual health services and protect the privacy of children. Set up child sexual health protection hotlines.

(VII) Children and legal protection

Main objectives:

- 1. Improve the legal system to protect the rights and interests of children.
- 2. Strengthen law enforcement to protect the rights and interests of children.
- 3. Improve the judicial protection system, and the judicial work system meets the special needs of children's physical and mental development.
- 4. Further enhance children's legal literacy and self-protection awareness, as well as the public's awareness and ability to protect children.
- 5. Protect the civil rights and interests of children in accordance with the law.
- 6. Implement the child guardianship system to ensure children's access to effective guardianship.
- 7. Prohibit the use of child labor and the economic exploitation of children, and strictly regulate and arrange children's participation in commercial activities.
- 8. Severely publish illegal and criminal acts that infringe upon children's personal rights, such as sexual assault, domestic violence, trafficking, and abandonment, in accordance with the law.

- 9. Severely punish illegal and criminal acts that use the Internet to infringe upon the legitimate rights and interests of children in accordance with the law.
- 10. Prevent juvenile delinquency and intervene in juvenile delinquency at different levels. Reduce the proportion of juvenile delinquency in the juvenile population.

Strategic measures:

- 1. Improve and implement laws and regulations to protect children's rights and interests. Improve the system of laws and regulations that protect children's rights to survival, development, protection, and participation. Accelerate the legislative process of family education, preschool education, child welfare and online protection, timely revise relevant laws and regulations, and issue judicial interpretations. Enhance the scientific nature and operability of legislative work. Strengthen the implementation of the law on the protection of minors, and implement the system of legal supervision, judicial advice, and supervision of the rule of law. Strengthen the legal theory and practical research on the protection of children's rights and interests.
- 2. Strictly enforce the law to protect the rights and interests of children. Fully implement the principal responsibility for protecting children's rights and interests. Strengthen administrative law enforcement and timely discover and deal with problems such as guardianship violations, domestic violence, campus, and surrounding safety risks, food, and drug safety risks, and so on. Explore the establishment of a multi-departmental comprehensive law enforcement system for the protection of children's rights and interests, explore the establishment of a cooperation system for child assistance, strengthen inter-departmental information communication and work convergence, and form a synergy of law enforcement, protection, and service.
- 3. Improve the judicial work system for minors. Public security institutions, people's procuratorates, people's courts and judicial administrative departments shall designate special agencies or personnel to handle cases involving minors. Improve the evaluation and assessment standards for judicial protection of minors. Strengthen the coordination between professional handling of cases and social protection, strengthen cooperation between judicial organs and government departments, people's organizations, social organizations, and social workers, and jointly implement psychological intervention, social care, education and correction, and community correction for minors.
- 4. Strengthen special judicial protection for minors. Protect the rights of privacy, reputation, information, participation, and other litigation rights of minors involved in a case in accordance with the law. Implement the provisions of the special procedures for juvenile delinquency cases on strict restriction of the application of arrests, legal aid, social investigation, psychological assessment, presence of legal representatives or suitable adults, conditional non-prosecution, private trial, sealing of criminal records, and so on. Enhance the implementation effect of community correction for minors. Implement the system of separate detention, management and education of minors and adults involved in a case.
- 5. Provide legal aid and judicial assistance to children in accordance with the law. Use public legal service platforms to provide legal advice and other legal aid services for children, promote the

standardization of legal aid and the building of professional legal aid teams for children. Ensure that children who meet the requirements for judicial assistance will receive targeted economic assistance, physical and mental rehabilitation, life resettlement, resumption of education and employment, and other comprehensive assistance.

- 6. Strengthen publicity and education on the rule of law in child protection. Improve the working mechanism of children's legal education with the participation of schools, families, and society, and improve children's legal literacy. Solidly promote the construction of adolescent law education and practice bases, law resource classrooms and network platforms, and carry out in-depth law education and practice activities in various ways, such as vice principals of legal affairs, interpretation of cases, mock courts, and so on. Raise the public's awareness of the rule of law and promote the formation of a good environment for protecting children's rights and interests in accordance with the law. Guide the media to interview and report cases involving minors objectively, prudently and appropriately.
- 7. Fully protect the civil rights and interests of children. Protect children's personal rights, property rights and other legitimate rights and interests in accordance with the law. Carry out the mediation of disputes involving the rights and interests of children, explore measures to protect the rights and interests of minor children during parents' marital separation, and protect minor children's rights to visit, child support, education, and protection after their parents' divorce in accordance with the law. Protect the right of inheritance and legacy of children and fetuses in accordance with the law. Protect children's personality rights such as reputation, privacy, and personal information in accordance with the law. Improve the system of supporting prosecution. Carry out public interest litigation against acts that infringe upon the legitimate rights and interests of children in the fields of food and drug safety, product quality, tobacco and alcohol sales, cultural publicity, and network dissemination.
- 8. Improve and implement the guardianship system. Strengthen the performance of duties by parents or other guardians to raise, educate and protect their minor children, and regulate the behaviors of parents or other guardians entrusting others to take care of their minor children in accordance with the law. Supervise and urge the implementation of the responsibility of guardianship, and prohibit early marriage, early childbearing and school dropouts. Strengthen the supervision, guidance, and assistance to guardianship, and implement the compulsory family education system. Strengthen the supervision responsibility of the village (neighborhood) residents committee over the guardianship and entrusted care of parents or other guardians, and the village (neighborhood) child protection director should actively discover, verify, and report the situation of children facing guardianship risks or being infringed by guardianship. Explore the establishment of a guardianship risk and abnormality assessment system. Correct and handle cases of guardians infringing upon children's rights and interests in accordance with the law. Children who meet the statutory circumstances shall be supervised by the civil affairs department at or above the county level on behalf of the state. Ensure that unattended children receive temporary guardianship in a timely manner in case of emergency.

- 9. Strictly investigate and deal with illegal and criminal acts such as the use of child labor. Strengthen the daily inspection and supervision and special law enforcement inspection on the use of child labor. Strictly implement state regulations on children's participation in performances and programme production. Strengthen the supervision and management of enterprises, other business organizations or individuals, and network platforms that recruit children to participate in advertising shooting, commercial endorsements, performances, competitions, programme production, live webcasts, etc. Strictly implement the special protection provisions for underage workers. Employers shall conduct regular health check-ups on underage workers and shall not arrange for them to engage in heavy, toxic, harmful, and other labor or dangerous work that endanger the physical and mental health of children.
- 10. Prevent and severely punish criminal acts of sexual abuse against children in accordance with the law. Strengthen education on prevention of child sexual abuse, improve the awareness and ability of children, families, schools, and communities to identify, prevent, discover, and report sexual abuse, and implement a mandatory reporting system. Establish a national unified information inquiry system for criminals such as sexual assault, abuse, abduction and trafficking, and violent injury, and improve the system of job entry inquiries and employment prohibition. Explore the establishment of a system for disclosing the information of criminals who commit sexual abuse against children, and strictly implement a police clearance record system for foreign teachers. Strengthen the supervision over case filing, and make comprehensive standards for case filing, conviction, and sentencing. Severely punish sexual abuse committed by persons with special duties to children in accordance with the law, and severely punish the crime of organizing, forcing, seducing, accommodating, and introducing minors to prostitution. Establish a "one-stop" evidence collection mechanism for minor victims to protect them from "secondary victimization". Explore the standard of special evidence in cases of sexual violations against children. Implement necessary psychological intervention, financial assistance, legal aid, school transfer and resettlement and other protection measures for minor victims and their families who have been sexually assaulted or injured by violence.
- 11. Prevent and severely punish illegal and criminal acts of domestic violence against children in accordance with the law. Strengthen anti-domestic violence publicity, eradicate domestic violence against children and serious neglect and other behaviors that are not conducive to children's physical and mental health. Implement a compulsory reporting system and promptly accept, investigate, file and transfer cases of domestic violence suffered by children. Issue judicial interpretations, guidance opinions or implementation rules on the anti-domestic violence law, and make full use of warning letters, writ of habeas corpus, revocation of guardianship and other measures to strengthen the punishment and education of perpetrators. Investigate the perpetrators of crimes for criminal responsibility in accordance with the law, and strictly handle major and vicious cases. Protect the privacy and safety of underage victims and provide timely psychological counseling, medical treatment and temporary shelter for underage victims and children who have witnessed domestic violence.
- 12. Severely crack down on illegal and criminal acts such as child abducting and trafficking, seducing and coercing children involving drugs or gangs. Adhere to and improve the long-term anti-

trafficking mechanism integrating prevention, crackdown, relief, resettlement, and rehabilitation, and continue to implement the action plan against human trafficking. Effectively prevent and severely crack down on illegal and criminal acts such as buying and selling children in the name of adoption and using the Internet platform to carry out human trafficking, step up efforts to prevent and crack down on the crime of selling their own children, and improve the identity verification mechanism for pregnant and parturient women seeking medical treatment. Improve the system of paternity testing and the issuance of birth medical certificates and implement the childbirth registration system. Properly resettle the rescued children whose biological parents sell them or cannot be found. Prohibit any organization or individual other than the public security organ from collecting information such as DNA data of abducted children, parents, and suspected trafficked persons. Implement a national project on drug prevention and education for teenagers and carry out special operations to crack down on the crimes of seducing, abetting, deceiving, forcing, and accommodating children in drug use and trafficking. Severely punish, according to law, the acts of coercing, seducing, and abetting children to participate in illegal and criminal activities of underworld organizations.

- 13. Severely crack down on Internet crimes that infringe upon the legitimate rights and interests of children. Strengthen the analysis and research on crimes involving children in cyberspace, interpret the law with cases, and improve the public's awareness and ability of protecting children in cyberspace. Prohibit the production, copying, publishing, dissemination or possession of pornographic materials and online information about minors. Severely punish the illegal and criminal acts of using the Internet to sexually seduce and abuse children in accordance with the law. Prohibit cyberbullying such as insulting, slandering, threatening or maliciously damaging the image of children. Severely crack down on the use of the Internet to induce children to participate in gambling, extortion, financial fraud, and other illegal and criminal acts.
- 14. Effectively prevent juvenile delinquency. Strengthen education on the rule of law and crime prevention for minors. Implement the system of hierarchical intervention in juvenile delinquency, take educational and corrective measures in accordance with the law, and promptly discover, stop and discipline misconduct of minors. Timely stop and deal with the serious misconduct of minors and the serious harm to others and society by minors under the age of criminal responsibility. Improve the admission procedures, student and student record management, transfer to ordinary schools, and other regulations related to special schools. Combine punishment with specific help and education to enhance the effect of education and correction and prevent relapse into crime by minors. Protect the minors involved in crimes from discrimination, ensure them the same rights in resuming studies, further studies, and employment in accordance with the law. Strengthen the grass-roots foundation for the prevention of juvenile delinquency.

15. Outline of Women's Development in China (2021-2030)

Issuer: the State Council

Issue date: September 2021

II. Development areas, main objectives, and strategic measures

(1) Women and health

Main objectives:

- 1. Provide women with good health services throughout the life cycle, increase the average life expectancy and average healthy life expectancy of women.
- 2. Reduce the maternal mortality rate to less than 12/100000 and narrow the gap between urban and rural areas.
- 3. Significantly improve women's awareness of cervical cancer and breast cancer prevention and treatment. Increase the ability of comprehensive prevention and treatment of cervical cancer and breast cancer. Increase the screening rate of cervical cancer among women of appropriate age to more than 70%, and gradually increase the screening rate of breast cancer.
- 4. Popularize the knowledge of reproductive health and healthy childbirth and child-raising in an all-round way to promote healthy pregnancy and reduce unintended pregnancy.
- 5. Reduce the mother-to-child transmission of AIDS, syphilis, and hepatitis B, and reduce the mother-to-child transmission rate of AIDS to less than 2%.
- 6. Improve the level of women's mental health literacy and slow down the rising trend of the prevalence of anxiety disorder and depression.
- 7. Popularize health knowledge and improve the level of women's health literacy.
- 8. Improve the nutritional status of women. Prevent and reduce maternal anemia.
- 9. Increase the proportion of women who regularly participate in physical exercise and improve the qualified proportion of women's physical fitness test.
- 10. Improve the maternal and child health service system, improve the ability of maternal and child health services, and constantly improve the health level of women.

Strategic measures:

- 3. Establish and improve the health management model for women in the whole life cycle. Provide a full range of health management services for the health needs of women in puberty, childbearing period, pregnancy and puerperium period, menopause and elder age. Adhere to the combination of health care and clinical care, prioritize prevention, early recognition and prevention of risks, fulfill the advantages of multi-disciplinary cooperation, and actively give play to the role of traditional Chinese medicine in maternal and child health care and disease prevention and treatment. Provide women with comprehensive health services such as publicity and education, counseling and guidance, screening, and evaluation, comprehensive intervention, and emergency treatment, so as to improve women's health level and average life expectancy. Strengthen supervision and promote the standardized development of new business types in maternal and child health.
- 4. Ensure safe maternal delivery. Promote scientific pregnancy preparation and age-appropriate pregnancy, maintain appropriate birth intervals, and reasonably control the rate of cesarean

section. Improve the standardized management system of obstetrical quality in medical institutions. Provide basic medical and health care services throughout the birth process, bring maternal health management into the scope of basic public health services, and increase the systematic management rate of pregnant and puerperal women to more than 90%. Strengthen the management and service of pregnant and puerperal women in the floating population. Provide necessary assistance for hospital delivery of low-income pregnant and puerperal women and treatment of critical pregnant and puerperal women. Continue to promote the classified management and services of key groups such as elderly pregnant and puerperal women. Fully implement the system of pregnancy risk screening and assessment, high-risk pregnancy and delivery management, critical and severe patient rescue and treatment, maternal death case report and interview & notification system. Effectively operate the critical and severe patient rescue and treatment ability.

- 5. Improve the comprehensive prevention and treatment system and support policies for cervical cancer and breast cancer. Improve women's awareness and ability of prevention and treatment of cervical cancer and breast cancer and increase the awareness rate of prevention and treatment knowledge of cervical cancer and breast cancer to more than 90%. Promote the pilot work of papillomavirus vaccination for women of the right age. Implement the cervical cancer and breast cancer screening programme for rural women in basic public health services, promote 70% of women to undergo efficient cervical cancer screening at the age of 35-45, and urge employers to implement the regulations on health care for female workers. Provide regular cervical cancer and breast cancer screening for female workers to improve the screening rate of the population. Strengthen the innovative application of screening and diagnostic techniques for cervical cancer and breast cancer, improve screening and service capacity, and strengthen surveillance and evaluation. Strengthen the connection of screening and follow-up diagnosis and treatment services, promote early diagnosis and early treatment, and increase the treatment rate of patients with cervical cancer to more than 90%. Strengthen assistance to patients in straitened circumstances.
- 6. Improve women's reproductive health. Popularize the knowledge of prevention and control of reproductive tract infections, sexually transmitted diseases, and other diseases. Carry out scientific and practical health education in various forms at different stages of school education to help students master reproductive health knowledge and improve their ability of self-protection. Enhance the awareness of sexual morality, sexual health and sexual safety of men and women, and advocate shared responsibility for contraception. Integrate reproductive health services into the whole process of women's health management to ensure that women enjoy the right of informed and independent choice of contraception and birth control. Implement basic contraceptive services, strengthen postpartum and post-abortion contraceptive services, improve access to services, and prevent unintended pregnancies. Promote the equality and accessibility of premarital medical examination, pre-pregnancy health examination, folic acid supplementation and other premarital health care services. Reduce abortion for non-medical needs. Strengthen the quality assurance of women's health and safety products. Standardize the diagnosis and treatment of infertility. Standardize the application of human assisted reproductive technology.

7. Strengthen the prevention and control of mother-to-child transmission of AIDS, syphilis and hepatitis B. Fully implement comprehensive intervention measures to prevent mother-to-child transmission of AIDS, syphilis, and hepatitis B, and improve the detection rate of early pregnancy. Increase the detection rate of AIDS, syphilis, and hepatitis B among pregnant and puerperal women to more than 98%, and the treatment rate of pregnant and puerperal women infected with AIDS and syphilis to more than 95%. Strengthen AIDS prevention and control efforts, strengthen publicity and education on AIDS prevention and control knowledge and related policies, and improve women's awareness and ability of prevention. Strengthen medical services for infected women, especially in the floating population and underdeveloped areas, and increase the rate of follow-up visit. Provide various forms of health counseling, psychological and social support services for pregnant and puerperal women infected and their families.

16. Law of the People's Republic of China on Family Education Promotion

Issuer: the Standing Committee of the National people's Congress

Issue date: October 2021

Chapter II Family responsibility

Article 16 Parents or other guardians of minors shall carry out family education targeting the physical and psychological characteristics of minors at different ages, based on the following content as guidance:

- (1) Teaching minors to love the Party, nation, people, groups and socialism, setting up a conception of preserving national unity, solidifying awareness of the community of Chinese people, and cultivating sentiment for the homeland.
- (2) Teaching minors to admire virtue and be inclined to goodness, to respect the elderly and love the young, to be diligent and thrifty, to work together and help each other, to be honest and friendly, and to obey discipline and the law; cultivate their positive social mores, family values, and personal moral and legal awareness.
- (3) Helping minors to establish the correct view of becoming a success, guiding them cultivate broad interests and hobbies, healthy aesthetic pursuits, and positive study habits; enhancing awareness and capacity for the spirit of scientific exploration and innovation.
- (4) Ensuring minors' balanced nutrition, scientific exercise, adequate sleep, and physical and mental happiness, to guide them to develop positive life habits and behaviors, and promote their healthy physical and psychological development.
- (5) Paying attention to minors' physical and mental health, guiding them to treasure life, conducting education for them on safety knowledge in areas such as transportation and travel, healthy internet use, and preventing bullying, drowning, fraud, trafficking, and sexual assault; helping them to understand knowledge and skills for safety and increasing their awareness and capacity for self-protection.

Appendices

(6) Assisting minors in establishing a correct conception of labor, participating in labor suited for

their abilities, increasing their ability to care for themselves, and fostering an excellent character of

being able to bear hardship and withstand hard work, and the good habits of loving labor.

Article 17 Minors' parents or other guardians carrying out family education shall pay attention to the

minors' physical, psychological, and intellectual development; respect their rights to participate in

family affairs and express opinions; and reasonably use the following means and methods:

(1) Raising them personally and strengthening parent-child bonds.

(2) Joint participation, giving play to the roles of both mother and father.

(3) Seizing teachable moments, integrating education into daily life.

(4) Subtly influencing, combining words and actions.

(5) Mixing sternness and leniency, combining concern and strict requirements.

(6) Respecting differences, conducting scientific guidance based on their age and personal

characteristics.

(7) Talking as equals, showing respect, understanding, and encouragement.

(8) Mutual promotion, with parents and children growing together.

(9) Other means and methods that are conducive to minors' overall development and healthy

growth.

Article 23 The parents or other guardians of minors must not discriminate against minors based on

factors such as sex, physical circumstances, and intelligence; must not carry out domestic violence

and must not coerce, induce, incite, enable, or use minors to engage in activities that violate laws,

regulations, and social mores.

Chapter V Legal liability

Article 53 Parents or other guardians of minors who conduct domestic violence against minors

during family education shall be held accountable in accordance with the provisions of the Law of the People's Republic of China on the Protection of Minors and the Anti-domestic Violence Law of

the People's Republic of China.

17. Guidelines for the Integrating Life Safety and Health Education into Curricula and

Textbooks of Primary and Middle Schools

Issuer: the Ministry of Education

Issue date: November 2021

Main content

(1) Area 1: Healthy behavior and lifestyle

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Many diseases are often caused by a long-term unhealthy lifestyle. Among the social and environmental factors related to health, "healthy behavior and lifestyle" has the strongest plasticity. Students should be taught to understand the impact of daily behavior and lifestyle on health from an early age, learn to correctly understand health information, consciously adopt healthy behaviors, develop good living habits, and form a healthy lifestyle.

Key points in this area include: understanding health; personal hygiene and health care; health problems and disease prevention & control; eye health; ear, nose and oral health; physical health; fitness and exercise; healthy work and rest; reasonable diet; public environmental hygiene; attention to health information.

(2) Area 2: Growth & development and puberty health care

Adolescence is a period of exuberant growth and development, an important period of gradual transition from childhood to adulthood, and a key period for the prevention of adult diseases (chronic non-communicable diseases, such as diabetes, hypertension, and malignant tumors). In view of the laws and characteristics of physical and mental development and changes in this period, constantly adjusting behavior and living habits to adapt to the changes of the body and the learning and living environment is vital to healthy growth and life-long health. Students should be educated to understand the basic knowledge and skills of growth and development and puberty health care, learn to protect themselves, and reduce health risk behaviors and their hazards.

Key points in this area include: growth and development; adolescent psychology; sexual health in puberty; sexual abuse prevention; cherishing life.

(3) Area 3: Mental health

Individual's mental health is related to family happiness and social harmony. Childhood and adolescence are the key periods to cultivate positive psychological quality. Students should be guided to learn mental health knowledge, enhance social adaptability, maintain a positive psychological state, understand, and master the main methods and ways to solve psychological problems, enhance the awareness of actively seeking help, actively resolve problems, enhance the ability to resist setbacks, and enhance the sense of happiness.

Key points in this area include: social communication and social adaptation; emotional and behavioral regulation; psychological problems and aid & support.

(4) Area 4: Prevention of infectious diseases and response to public health emergencies

Children and adolescents are often susceptible to traditional and emerging infectious diseases. Under the collective lifestyle of the school, students have frequent contact with each other and have a higher risk of suffering from infectious diseases, which can easily lead to public health emergencies. Students should be guided to master the knowledge and skills of infectious disease prevention and control, understand China's public health system and the mechanism to deal with public health emergencies, establish public health awareness and improve the ability of infectious disease prevention.

Key points in this area include: basic knowledge of infectious diseases; common infectious diseases and prevention & control measures; impact of infectious diseases on society; public health at ports; response to public health emergencies.

(5) Area 5: Safety emergency response and risk aversion

Injury and the threat of violence are the main factors affecting the life safety and health of children and adolescents. Among them, drowning and traffic injuries (road traffic accidents) are common and important causes of accidental injuries and deaths of students. Campus bullying and the Internet & telecommunications frauds involving students occur from time to time. Children and adolescents should be guided to enhance their awareness of safety protection, learn to prevent, and avoid dangers, master emergency knowledge and first aid skills, improve information literacy, and enhance the awareness and ability of discerning online information.

Key points in the area include: emergency common sense and first aid skills; medication safety; social security; campus safety; laboratory and internship safety and occupational health; Internet and information security.

V. Requirements of various school stages

(1) Primary school stage

Through the introduction of basic knowledge, training of specific skills and cultivation of personal hygiene habits, students are guided to:

- 1. Understand health and its influencing factors, know the basic knowledge of preventing common health problems and diseases; understand the relationship between personal daily behavior, lifestyle, and health, form the habit of taking care of eyes, prevent myopia, regularly monitor weight, prevent overweight; develop regular work and rest schedules as well as civilized and healthful habits, ensure adequate sleep, and maintain personal health and public environmental hygiene.
- 2. Understand the knowledge of life and growth and development; learn puberty development, mental health and related health care knowledge and skills; establish the consciousness of cherishing life and learn self-protection.
- 3. Understand and accept themselves, develop the quality of polite and friendly communication, learn to communicate with parents and teachers, establish a sense of discipline, rules, and time management, correctly arrange learning activities, use electronic equipment scientifically and rationally, and strictly control the time on the Internet.
- 4. Understand the basic knowledge of pathogenic microorganisms, have a preliminary understanding of common infectious diseases and preventive measures, master personal epidemic prevention and protection skills, and be willing to get vaccinated; be able to understand the impact of infectious diseases, understand the social control measures and personal behavior requirements in case of public health emergencies.
- 5. Master the basic skills of self-protection, seeking help, risk aversion and escape; master the knowledge of first aid, be able to call first aid and police in case of emergencies; establish social

security awareness such as anti-trafficking; identify campus bullying and campus violence and ask for help; be able to obtain accurate information about major events through formal websites and authoritative media, and do not believe or spread rumors.

(2) Junior high school

Emphasize the explanation of the principle and mechanism, deepen students' understanding, strengthen the initiative and consciousness of cultivating healthy behaviors, and guide students to:

- 1. Learn to analyze and evaluate health factors, actively practice healthy behaviors and lifestyles, ensure eye health, prevent myopia, reasonably plan time to ensure sleep, refuse smoking, drinking, drug use and other harmful behaviors; systematically understand and proactively prevent common diseases in children and adolescents, take practical actions to protect their own health; identify with the concept of "harmonious symbiosis between human and nature", and protect public environmental health.
- 2. Understand the main laws and influencing factors of growth and development, correctly evaluate the status of growth and development, learn the basic knowledge and skills of adolescent health care, improve the ability to prevent sexual harassment and abuse, actively deal with adolescent mental health problems, and learn to deal with setbacks correctly.
- 3. Learn to recognize and treat themselves objectively, appreciate and tolerate others, be ready for high school study or employment, improve the ability of emotional management, learn the methods of stress relief and relaxation, overcome anxiety, improve the ability to deal with setbacks, and be able to proactively ask for help.
- 4. Know common infectious diseases and prevention & control measures, understand the significance of vaccination and immunization planning, master personal epidemic prevention and protection skills; understand the transmission routes and preventive measures of AIDS; understand the prevention and control of infectious diseases at ports; improve emergency preparedness awareness and protection capacity for public health emergencies.
- 5. Cultivate a sense of safety responsibility, learn first aid knowledge, master relevant skills, improve the ability to prevent and deal with natural disasters, accidents and other emergencies; understand the basic knowledge of safe drug use to prevent drug misuse and abuse; understand the safety precautions in experiments and labor practice to prevent campus safety accidents; enhance the awareness and ability of network information discrimination, and prevent network and telecommunications frauds.

(3) Senior high school

Mainly emphasize the sense of responsibility and significance of students' life, as well as the ability to find and actively solve problems, and guide students to:

1. Make an In-depth understanding of the mechanism of tobacco, alcohol and drugs harming health, create a smoke-free environment, stay away from alcohol and drugs (including new drugs), understand the prevention knowledge of chronic non-communicable diseases, consciously adhere

to regular physical exercise, use eyes scientifically, work and rest healthily, eat reasonably, maintain a healthy weight, pay attention to health information, and strengthen public health awareness.

- 2. Deeply understand the meaning and value of healthy life, understand the changing law of growth speed, agree that a healthy and natural physical appearance is the most beautiful; understand the relationship between sex, love, and marriage, understand marriage and fertility-related knowledge and laws and regulations, can effectively prevent and deal with sexual harassment and abuse.
- 3. Understand the relationship between social communication and mental health, improve the ability of healthy heterosexual communication; adapt to high school life, learn to correctly deal with campus bullying and campus violence, and be ready to enter colleges and universities for study or start a career; correctly understand and deal with adverse childhood experiences, and grow healthily; understand the relationship between competition and cooperation, learn fair competition and unity & cooperation; be able to identify and prevent psychological problems such as anxiety and depression.
- 4. Understand the basic knowledge and prevention & control measures of infectious diseases, be able to identify dangerous behaviors that may cause HIV infection, improve prevention ability, and analyze the impact of infectious diseases on social, economic, scientific and technological development; understand the national biosafety inspection mechanism and the prevention and control of nuclear chemical harmful factors at ports. Understand China's public health system, corresponding policies and major laws and regulations related to the prevention and control of infectious diseases and be able to take COVID-19 pandemic prevention and control as an example to illustrate the main process, key practices and significance of pandemic prevention and control in China.
- 5. Further master the knowledge and skills of emergency rescue, understand the safety mechanism of drug use, abide by the safety principles of experiments and internships, strengthen social security awareness; prevent campus safety accidents, and create a safe campus environment; abide by the relevant laws and regulations of national network security, and further enhance the ability to prevent Internet and telecommunications frauds.

18. Circular of the General Office of the Ministry of Education on Implementing the National Plan for the Construction of Healthy Schools

Issuer: the General Office of the Ministry of Education

Issue date: April 2022

I. Overall requirements

(1) Guiding ideology

Under the guidance of the Xi Jinping Thought on Socialism with Chinese characteristics for a New Era, we should comprehensively carry out the party's educational policy, implement the fundamental task of establishing morality and cultivating people, practice the "health first" educational concept,

and focus on the construction of a healthy country with strong educational strength. We will integrate health literacy into moral, intellectual, physical, aesthetic and labor education, carry out health promotion throughout the whole process of school education, teaching, management, and service, permeate health education into all aspects of students' study and practice, and transform the achievements of COVID-19 pandemic prevention and control into health governance policy, school health management system and health behavior norms of teachers and students. Taking the healthy growth of children and adolescents as the goal, we will actively adapt to the basic requirements of the construction of a healthy China focusing on people's health and integrate health into all policies, promote health education to be more accessible to everyone, serve all-round development, lay the foundation for lifelong health, achieve the unity of knowledge and practice, achieve co-construction and sharing, improve the school governance system with health promotion as the main line, deepen school education reform, speed up the building of school health promotion capacity, gradually form the mode of building healthy schools with Chinese characteristics and the health promotion mechanism for adolescents, and systematically improve the comprehensive quality, health literacy and health level of students.

(2) Work objectives

During the 14th Five-Year Plan period, focus on supporting a number of qualified schools to build national healthy schools, greatly improve the quality of moral education and health promotion and improve the education system for all-round training of morality, intelligence, physique, aesthetics and labor. The school health education system and health service system will be more efficient, the physical and mental health level and health literacy of students will be significantly improved, and the level of standardization, institutionalization, informationization and modernization of school health work will be significantly improved.

19. Circular of the General Office of the State Council on Issuing the "14th Five-Year" Plan on National Health

Issuer: the General Office of the State Council

Issue date: April 2022

V. Ensure the Health of the Population throughout the Whole Lifecycle

(1) Improve fertility and infant care services

Optimize fertility services and guarantee. Implement the three-child policy and improve relevant supporting measures. Continue to guarantee the maternity medical expenses and maternity allowances for insured female workers, guarantee the reproductive medical expenses for urban and rural medical insurance participants, and reduce the burden of reproductive medical expenses. Provide fertility consultation and guidance services. Promote the joint service for "handling all birth matters at one stop". Improve the national life registration management system, establish an index system for long-term and balanced population development, and improve the population monitoring system and the forecasting and early warning system covering the whole population and the whole lifecycle. Give full play to the organizational role of the Family Planning Association and

carry out in-depth actions to promote family health. Continue to implement the existing incentive and assistance systems and preferential policies for only-child families and rural two-daughter families before the implementation of the comprehensive two-child policy. Dynamically adjust the support standards, establish and improve the omni-directional support and guarantee system for special family planning families. Support qualified social organizations to accept the entrustment of special family planning families, provide services such as daily care and spiritual comfort, and handle matters such as admission to pension institutions and medical care in accordance with the law.

Promote the healthy growth of infants and young children. Improve the setting standards and management standards of childcare service institutions, establish and improve systems such as record registration, information publicity and quality evaluation, and accelerate the specialization, standardization and normalization of childcare services. Study and formulate academic education and related professional standards for nursing practitioners, so as to improve the quality and level of baby care and education. Encourage and guide social forces to provide inclusive baby care services, develop centrally managed and operated networks of community baby care services, and improve community venues and facilities for infant and young children activities. Support qualified employers independently or in conjunction with relevant units to provide baby care services for employees in the workplace. Strengthen guidance for the early development of infants and young children in families, study and introduce measures for the management of family baby care centers, support baby care models such as intergenerational baby care and family mutual assistance, and encourage professional institutions and social organizations to provide family parenting guidance services. Support the development of "Internet + baby care service", create a number of key common technology network platforms and live classrooms, support high-quality institutions and industry associations to develop public welfare courses, and enhance the scientific parenting ability of families. Strengthen the health care work of infant and baby care service institutions, prevent and control infectious diseases, reduce the incidence of common diseases, and protect the physical and mental health of infants and young children.

(2) Protect the health of women and children

Improve the full-range fertility services. Implement the maternal and child safety action improvement plan, fully implement the five maternal and infant safety systems, including pregnancy risk screening and assessment, high-risk maternal project management, critical and serious illness treatment, maternal death case report and interview notification, and provide high-quality medical and health care services throughout the fertility process. Implement the plan to improve the comprehensive prevention and control of birth defects, and build a birth defect prevention and control system covering the pre-marriage, pre-pregnancy, pregnancy, newborn and childhood of urban and rural residents. Strengthen premarital health care, promote marriage registration, marriage and fertility health education, and "one-stop" fertility guidance services, provide families with scientific pregnancy preparation guidance, health examination before pregnancy and folic acid supplement guidance services, and strengthen prenatal screening and diagnosis. By 2025, the coverage rate of the target population for pre-pregnancy fertility health examination will be no less than 80%,

the prenatal screening rate will be no less than 75%, and the screening rate of neonatal genetic and metabolic diseases will reach more than 98%. Strengthen the prevention and treatment of key diseases such as congenital heart disease, hearing impairment, phenylketonuria and thalassemia, and promote integrated management services and multidisciplinary diagnosis and treatment services during perinatal, prenatal and postnatal periods. Medical and health institutions shall carry out special research on the promotion of fertility capacity, standardize the application of human assisted reproductive technology, and provide infertility diagnosis and treatment services. Support maternal and child health institutions to integrate preventive health care and clinical medical services.

Strengthen women's health services. Develop special clinics for women's health care and improve service capacity. Address the health needs of adolescent, childbearing, pregnancy, menopause and old women, provide integrated health care services covering physical, psychological and social adaptation, such as female endocrine regulation, psychological and nutrition prevention and health care, as well as the treatment of common diseases of women. Promote reproductive health services, promote the prevention and treatment of cervical cancer and breast cancer in women, and further improve the screening rate and quality.

Promote the health of children and adolescents. Implement breastfeeding promotion action, carry out professional guidance on infant and baby care, strengthen guidance on supplementary food for infants and young children, implement nutrition improvement programmes for preschool children, and reduce the prevalence of anemia and growth retardation in children. Implement the healthy children action promotion plan, improve the child health service network, build child-friendly hospitals, strengthen the construction of paediatrics, promote the standardization and normalization of child health clinics, and strengthen child health care and medical services. Strengthen the screening, diagnosis and intervention of anemia, poor vision, obesity, dental caries, abnormal psychological and behavioral development, hearing impairment, scoliosis and other risk factors and diseases in children and adolescents. Guide schools and parents to carry out comprehensive prevention and control interventions on students, and carry out prevention and control of myopia among children and adolescents. Strengthen children's mental health education and services, strengthen children's autism screening and intervention. Promote youth health education and carry out sexual and reproductive health education for adolescents. Make overall efforts to promote the building of school health teams and the capacity of disease prevention and control institutions at all levels, and strengthen guidance on school health work within local jurisdiction. Carry out activities to create demonstration counties (cities, districts and banners) for the comprehensive development of children's health.

Appendix 2:

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Comprehensive Sexuality Education Technical Guideline

Adaptation of Global Standards for Potential Use in China

FIRST EDITION