



# Education on population matters, including comprehensive sexuality education in developed and developing countries

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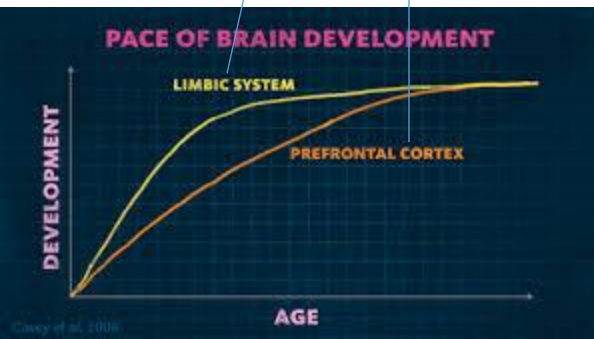
# Brain maturation, cognitive, emotional & social development in adolescence



**“The reasons why adolescents can be poor decision makers was thought to be because they were less intellectually mature; however data suggest that adolescents can make surprising decisions despite the knowledge of risk.”**

**“Adolescents seem to be more affected than adults by exciting or stressful situations when making decisions – so called hot cognition – especially in the presence of peers.”**

S M Sawyer et al. Adolescence: A foundation for future health. Lancet, 2012.



**As they navigate through adolescence, individuals face challenges & experience stress.**

- Stress can be caused by 'good' things e.g. being asked to join a school sports or debating team, or by 'bad things' e.g. arguments with parents or failing in an exam.
- When the stress is prolonged & intense, its effect on an adolescent can become **toxic**
- Adverse childhood experiences have serious immediate & long-term consequences



**“Ultimately, actions to support adolescent health, development & wellbeing should consider decision making processes. “**

G C Patton et al. Our future: A Lancet Commission on adolescent health & wellbeing, 2016.

# Population matters that relate to education

- **Ten million unintended pregnancies** each year among adolescent girls aged 15–19, signifying end of education for many
- **3 million girls** aged 15–19 undergo unsafe abortions every year
- Complications from pregnancy and childbirth are **leading cause of death for girls** aged 15–19, globally
- HIV affects adolescent girls and young women disproportionately; young girls in sub-Saharan Africa **2 to 7 times more likely** to be infected with HIV than young men
- **1 in 4** ever-married/partnered adolescent girls aged 15–19 estimated to have been **subjected to physical and/or sexual violence from an intimate partner** at least once in their lifetime



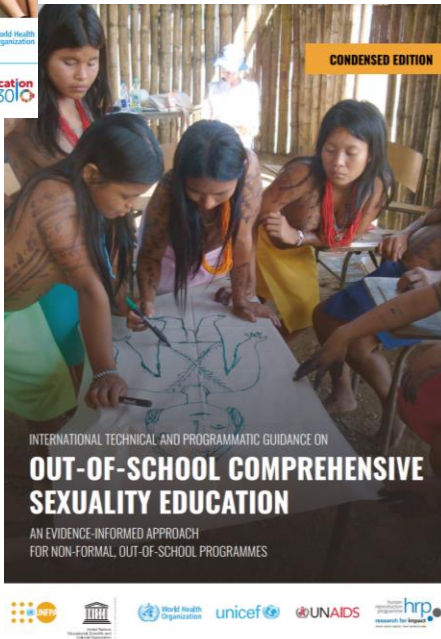
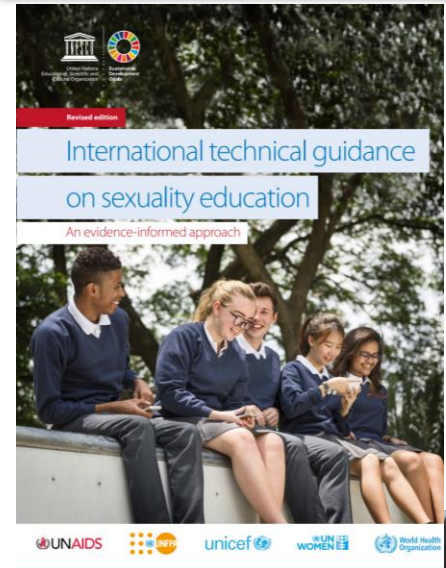
# Education on population matters, including CSE

- Inter-relationship between education, health and well-being – healthy and happy learners learn better
- Sexual and gender norms and stereotypes, internalisation of different ‘social rules’ about relationships, including imbalanced power dynamics between girls and boys, takes place by ages 10-14 years
- Comprehensive sexuality education (CSE)

*“a curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality”*

contributes to:

- Delayed initiation of sexual intercourse
- Reduced risk taking (frequency, partners)
- Increased use of condoms & contraception
- Gender equitable attitudes
- Reduced GBV
- Self efficacy and confidence



# Evidence on CSE

- provides young people with knowledge, skills and attitudes to **develop and sustain positive, healthy relationships**, protect themselves from **unsafe situations**, and learn and **realise their full right to education**
- equips and empowers them with **accurate and evidence-based information** about human sexuality, sexual and reproductive health, gender equality & human rights, including family life and interpersonal relationships, gender-based violence (GBV) and harmful practices
- develops life skills, including **Social and Emotional Learning (SEL) skills** that encourage critical thinking, communication and negotiation, as well as decision-making and assertiveness
- young girls and boys learn to **treat each other with respect and dignity** from an early age, and uphold universal **values of equality, love and kindness**



# Status of sexuality education globally – with case studies

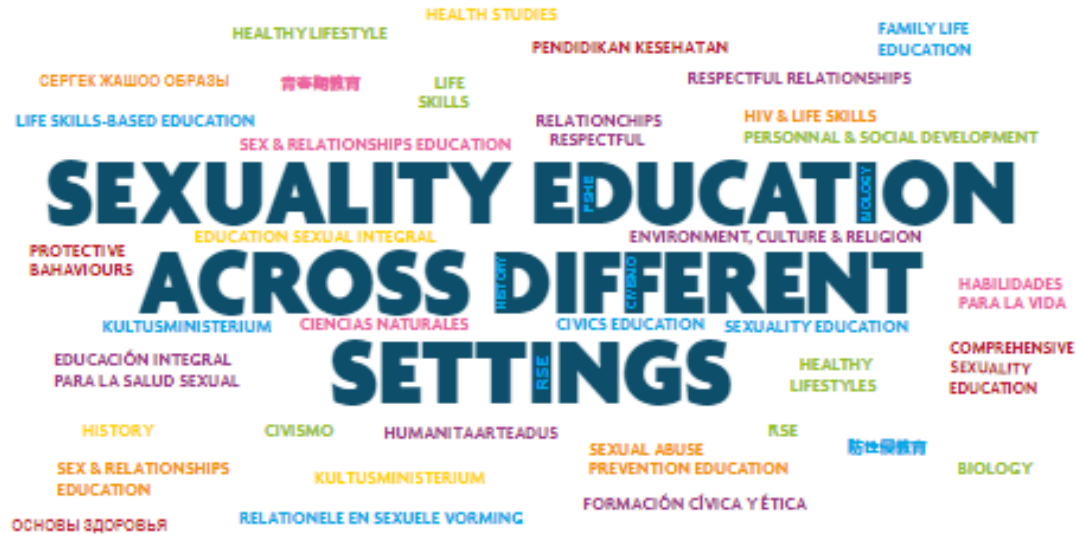


- Overall, sexuality education is more **widely implemented around the world in secondary schools**, than in primary schools;
- Many countries incorporate sexuality education into formal national curriculum, but in reality it **often only includes biological aspects**;
- Curricula is more comprehensive than in the past, but **few countries are fully comprehensive**;
- Less than **one in three** young people believed that their school taught them about sexuality well.

# Recommendations for member states (1/5)

- **Clearly mandate sexuality education in policy and legal frameworks (or contextually named programme that includes sexual and reproductive health, and well-being), backed by budgets, and robust implementation plan**

## SEXUALITY EDUCATION IS KNOWN BY DIFFERENT NAMES IN DIFFERENT COUNTRIES



In **Jamaica**, the Family Life and Health Education curriculum has undergone a range of revisions, with diverse stakeholders involved, including faith-based organizations. Curriculum revisions have always been largely driven by data – responding to new and emerging health and social issues – and have involved subject specialists, curriculum officers and technical experts from a wide range of stakeholders



# Recommendations for member states (2/5)

- ***Invest in teacher training and support, including the development and dissemination of teaching materials to provide CSE that is non-discriminatory, inclusive and accessible, non-judgmental, scientifically accurate, rights-based, gender-transformative and effective***

In **Namibia**, under a policy implemented in 2011, schools are required to have a dedicated life skills teacher. These full-time life skills teachers receive ongoing training, with the percentage of those trained increasing from 42 per cent in 2017 to 70 per cent by 2019. Because life skills education has been integrated into the curriculum and there are specific teachers explicitly trained to deliver it, the topic has been given attention, recognition and legitimacy.

In **Zambia**, a new teacher training model was developed in 2019, utilising teacher training colleges as education hubs. These hubs, which are also responsible for delivering pre-service teacher training, are considered 'centres of excellence.' Under this new training model, the colleges provide information to teachers through a five-day sexuality education training, which aims to impart skills acquisition, confidence and refined participatory methods

In **Kyrgyzstan**, training has been provided for pre-service teachers since 2018. This prepares them for the delivery of Healthy Lifestyle homeroom lessons which became mandatory in all schools in the same year

Research in **Chile** highlights the importance of providing teachers with quality teaching and learning materials. Many teachers are more comfortable with lecture-style methods of teaching and for various reasons tend to avoid sensitive topics, such as gender, diversity and sexual violence. A subsequent study found that when provided with support, including quality lesson plans, not only did the teachers no longer avoid the more complex issues, but rather demonstrated a strong concern for incorporating gender perspectives in the majority of the classes. In response, a range of teaching and learning materials is being developed to support teachers across the country



# Recommendations for member states (3/5)

- *Situate well-designed and delivered curricular interventions within a **whole school approach to safe and health promoting schools** and delivering CSE in participatory, learner-centred and culturally relevant ways*

Scotland has shown commitment to promoting health and well-being (HWB) in schools, including the provision of Relationships, Sexual Health and Parenthood (RSHP) education. This commitment is grounded in a strong national policy and guidance for schools.

Its curriculum reform in 2010, *Curriculum for Excellence*, placed HWB, along with literacy and numeracy, as one of the three core areas of children's learning. Health and well-being isn't a single subject or class, but is organized into seven areas:

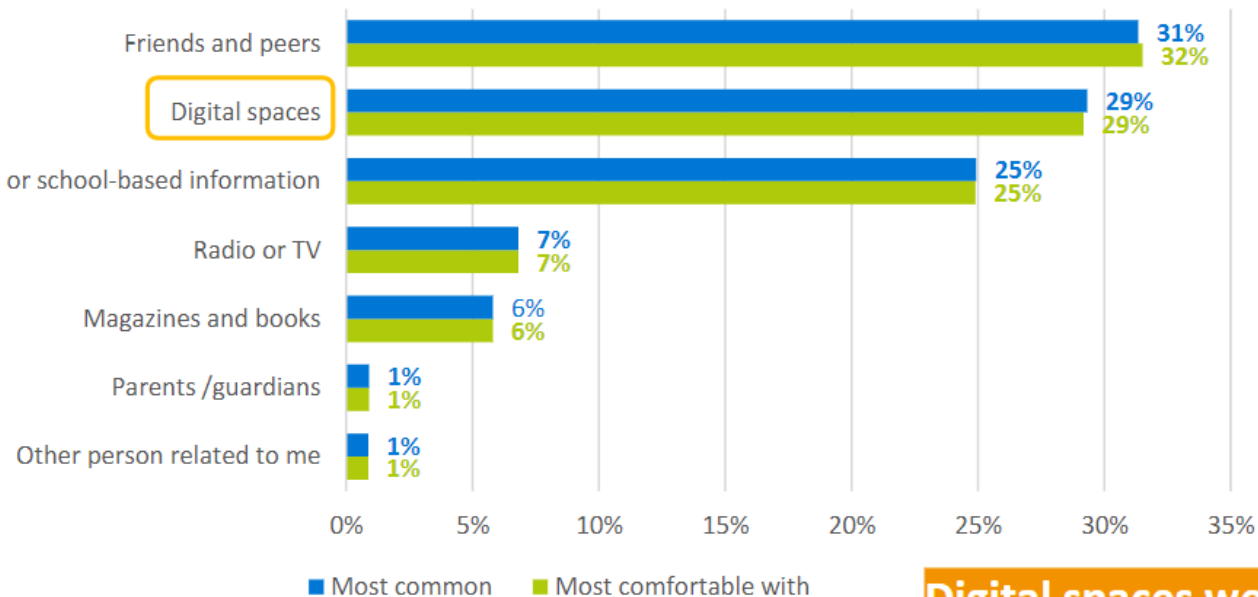
- mental, emotional, social and physical well-being
- planning for choices and changes
- physical education
- physical activity and sport
- food and health
- substance misuse
- relationships, sexual health and parenthood

Each of these areas is integrated into the curriculum, as well as reflected in broader school culture and practice. For example, relationships education is not just about teaching students about positive relationships skills, but also about developing a positive whole school ethos and culture.



# Recommendations for member states (4/5)

- *Increase coverage of gender-responsive CSE for all children, adolescents and young people, **both in and out of school** and in times of crisis, as well as increasing the comprehensiveness of the curricula itself*



Digital spaces were the second most common source of information about bodies, sex and relationships, coming in close second behind friends.

# Recommendations for member states (5/5)

- **Fully involve young people** in discussions about curricula content, delivery channels (i.e. classroom, youth club, online, media), and how to meet their needs



NGOs in **Pakistan** have made concerted efforts to build community understanding and support, enabling them to deliver wide-ranging sexuality education programmes across four provinces. Efforts were made to ensure that programmes are responsive to the local context, with community-based research as the foundation of content development, and recognition of societal and cultural barriers to sexuality education from the planning stage. This success was also due to collaboration with an array of stakeholders—including parents, school officials, religious leaders, media personnel and adolescents themselves

# What CSE is truly about



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