

Training course in adolescent sexual and reproductive
health 2021

Comprehensive sexuality education provision

Dr Hala El Hennawy

WHO, Egypt office

elhennawyh@who.int

Question 1

Why do adolescents need comprehensive sexuality education (CSE)? – identify one reason.

Adolescents need to have CSE to enable them developing the needed life skills that supports healthy choices through Providing age-appropriate and phased education about human rights, gender equality, relationships, reproduction, sexual behaviors risks and prevention of ill health. Making use of the positive effects, improving their attitudes related to sexual and reproductive health and behavior.

Question 2

What according to you is the biggest operational constraint in the provision of CSE in your country, and why?

Social sensitivity to the topic, cultural and social norms and religious beliefs. The term “sexual education” is not tolerated by policymakers, parents, media or the community as a whole.

Question 3

In what way could CSE be integrated into your country’s educational curriculum?

Through integration in schools curricula with understanding the community context, engaging all relevant stakeholders and community representatives, parents, school officials, religious leaders, media personnel, and adolescents themselves to understand their knowledge needs. Engaging them all in selecting the content of the curriculum, with careful consideration for the social, religious and cultural sensitivities, developing the curriculum with age-appropriate information and skills in a safe and trusted environment engaging adolescents' influencers, strengthening media presence, showcasing school programs to increase understanding and transparency, and choosing opportune times to introduce messages.(1)

Question 4

Identify three strategies that Aahung and Rutgers used to build community support for CSE in Pakistan?

Understanding the local context to design and develop the programme. Strategic selection of issues to be included in the curricula, tailoring the content to the programme context. Engaging stakeholders at different levels through outreach and sensitization.

Question 5.1

Within the ecological framework, what are the levels of influences that need to be understood when planning to deliver sexuality education to adolescents?

Individual (adolescents, interpersonal (parents and peers, organizational (school administrators and teachers), Community (religious and community leaders), societal (policies, political and religious leaders).

Question 5.2

In the case of Aahung and Rutgers, who were the gatekeepers or influential people in the lives of adolescents that were engaged and sensitized?

Parents and community members, influential government officials, religious leaders, and government stakeholders in the education and health departments.

Question 5.3

In your context, which gatekeepers or influential people would need to be engaged and sensitized to deliver CSE?

Community and religious leaders, parents, educational stakeholders and influential adolescents (2).

Question 6

What strategies did Rutgers and Aahung use to overcome resistance to CSE in Pakistan?

Stimulated public discussion by reaching out to a small group of respected and well-known journalists.

Organized school visits for journalists, who then produced a number of positive stories about their firsthand observations.

Led sensitization and value clarification workshops with schools and the media and created an additional active mechanism, which included organizing specific meetings to discuss issues, to provide support to teachers and school administrators when cases of opposition arose by parents or the community.

Reviewed language, increased transparency, leveraged strategic partnerships, and engaged “champions” when faced with backlash.

Took advantage of key moments of positive momentum when society would be more receptive to their *messages*.

Question 7

How is CSE different from sexuality education?

Sexuality education has evolved through time to address the prevailing sexual and reproductive health challenges facing young people. It started with the prevention of unintended pregnancy in the 1970s, and then moved on to the prevention of HIV and awareness about sexual abuse.

CSE goes beyond educating about reproduction, risks and disease. It reaffirms the position of sexuality education within a framework of human rights and gender equality and deals with spiritual dimensions of sexuality by providing information; exploring values, and attitudes as well as feelings.

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 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 wellbeing and that of others; and understand and ensure the protection of their rights throughout their lives.

Question 8.1

What are the considerations that the International Technical Guidance suggests when designing a school-based CSE program?

It has to follow and coincide with all relevant national policies, guidelines, regulations and laws.

It has to adopt clear goals, concepts and learning objectives which should then be articulated within the contents.

It should follow the life-cycle approach and develop in an incremental way providing information in a manner appropriate to the age and development of the targeted audience.

It should be ensuring acceptability and applicability for implementation: This means that the topics it covers and its content have to be politically, religiously and culturally appropriate.

Engaging and consulting political leaders and all other stakeholders or involved in some way.

The contents have to be practical: The topics and contents to be taught to young people should address what they need to know and what they want to know (needs assessment). This is a basic issue that will ensure making the program practical.

The program needs to be effective, it should adopt interactive and participatory educational approach based on skill-building.

Question 8.2

What did the Egyptian Family Health Society (EFHS) do to understand the needs of adolescents related to sexuality education before initiating their school-based SE program?

They conducted a “learn by educating” needs assessment exercise. Beginning with a biology lesson about male and female reproductive organs already included within the official school curriculum for the seventh school grade. This lesson had usually been skipped by teachers and had never been questioned in exams. That made the officials in the Ministry of Education so pleased. Along with discussing this lesson, it had been planned to allocate ample time for responding to anonymous written questions from students. The well-trained young physicians providing the seminars used to discuss the selected lesson and devote enough time to answer the questions received from students.

Question 8.3

What were the protocols used to respond to sensitive questions asked during the EFHS’ seminars?

It had been left to the “chaperoning” teacher to decide which questions would be answered, while the rest of the “sensitive” questions were referred to the Youth Health Hotline operated by the Society. EFHS published a book with all the questions so as to help others working to promote SRH.

Question 9.1

Describe a CSE initiative in your country that you believe has affectively promoted CSE for adolescents in or out of school.

The Egyptian Family Health Society (EFHS) school-based reproductive health education program, that was implemented during the years 2008 till 2015 and reached out to more than 450,000 Egyptian students with reproductive health information and skills.

Question 9.2

Identify one factor that has contributed to the effectiveness of this initiative.

The developed curriculum provided Egyptian students with what they need to know and learn about as well as what they want to know (based on needs assessment).

Question 9.3

Identify 2 factors that you believe are critical for strengthening implementation of CSE in your country?

- Considering responding to the audience needs, with careful consideration for the social, religious and cultural sensitivities.
- Engaging all relevant stakeholders and community representatives, parents, school officials, religious leaders, media personnel, and adolescents in developing the content of the curriculum, with age-appropriate information and skills in a safe and trusted environ.

References

1. Wahba M, Roudi-Fahimi F. The need for reproductive health education in schools in Egypt [Internet]. Population Reference Bureau. 2012. Available from: <https://www.prb.org/wp-content/uploads/2012/10/reproductivehealth-education-egypt.pdf>
2. Bader N. Why we need comprehensive sexuality education in Egypt [Internet]. Alternative policy solutions. 2020 Aug. Available from: <https://aps.aucegypt.edu/en/articles/513/why-we-need-comprehensive-sexuality-education-in-egypt>