



Summary Brief

COMPREHENSIVE SEXUALITY EDUCATION IN EMERGENCIES

Developing and delivering SRHR
education in crisis settings

This brief was developed to support the dissemination of key messages in [Mind the Gap 3: Promoting Equity and Inclusion in and Through Girls' Education in Crisis](#). It provides an overview of evidence and gaps in girls' and women's access to sexual and reproductive health and rights information through education and recommends actions for gender-responsive development and delivery of comprehensive sexuality education in crisis-affected contexts.

MIND THE GAP 3:
Equity and Inclusion in and Through Girls'
Education in Crisis



Comprehensive Sexuality Education (CSE) is an effective tool for supporting positive sexual and reproductive health and rights (SRHR) outcomes.

HIV, pregnancy, and childbirth are among the leading causes of death for adolescent girls globally.¹ Adolescent pregnancy, early marriage, and girls' education are intrinsically linked. In sub-Saharan Africa alone, up to 4 million teenage girls drop out of school or are excluded each year due to teenage pregnancy, sometimes leading to child marriage.² Access to SRHR helps prevent unintended pregnancies, improve maternal health, and prevent sexually transmitted infections (STIs), including HIV/AIDS. It also equips girls and youth with the knowledge and skills they need to advocate for their rights and engage in healthy and consensual relationships. All of these enable girls to stay in school and fully participate in learning opportunities.

1 World Health Organization (WHO). (2022a). Adolescent and young adult health. <https://www.who.int/news-room/fact-sheets/detail/adolescents-health-risks-and-solutions>

2 MSI United States. (2021). Contraception keeps girls in school. <https://www.msiunitedstates.org/contraception-keeps-girls-in-school>

Box 1: What is Comprehensive sexuality education?

Comprehensive sexuality education teaches children and young people about the “cognitive, emotional, physical and social aspects of sexuality.”³ It is a rights-based approach that is nonjudgmental and seeks to provide learners with the necessary knowledge, skills, values, and attitudes to make informed, meaningful decisions about:

- Their sexual health and well-being, supporting full bodily autonomy;
- Respectful social and sexual relationships; and
- How to understand and protect their rights.

SRHR education is important from both a rights-based and public health perspective, yet access is often limited by a lack of political will, inadequate resources and funding, ongoing discrimination against women and girls, and unequal gendered power dynamics. This lack of rights-based, medically accurate, and age-appropriate sexuality education can leave young people vulnerable to harmful sexual behaviors and sexual exploitation.

Displaced women, girls, and LGBTQIA+ people are missing out on critical SRHR information.

While there has been an increase in policies, programs, and curricula supporting SRHR, the most vulnerable learners continue to be excluded from CSE.⁴ There is significant resistance from community and faith-based organizations against delivering CSE at primary levels compared to secondary. However, given the high numbers of over-age girls in primary schools in crisis settings and the high rates of girls dropping out before secondary school, there is a clear need to deliver CSE at the primary levels.

Additionally, while adolescent girls and girls with disabilities are more likely to be out of school in crisis-affected countries, very few crisis-affected countries have CSE curricula in place for out-of-school children.⁵ Moreover, CSE curricula continue to be tailored toward heterosexual, cisgender women of reproductive age. CSE programs often omit relevant content for lesbian, gay, bisexual, queer, questioning, intersex, and asexual + (LGBTQIA+) people, and LGBTQIA+ people face increasing obstacles in accessing SRHR information and services.⁶

3 United Nations Educational, Scientific, and Cultural Organization (UNESCO). (2018). International technical guidance on sexuality education: An evidence-informed approach (2nd ed.). UNESCO, UNAIDS Secretariat, United Nations Population Fund, United Nations Children's Fund, UN Women, & World Health Organization. <https://unesdoc.unesco.org/ark:/48223/pf0000260770>

4 See INEE (2023) Mind the Gap 3, Section 5.3

5 See INEE (2023) Mind the Gap 2, Section 5.3.3

6 Heidari, S., Onyango, M. A., & Chynoweth, S. (2019). Sexual and reproductive health and rights in humanitarian crises at ICPD25+ and beyond: Consolidating gains to ensure access to services for all. *Sexual and Reproductive Health Matters*, 27(1), 343–345. <https://doi.org/10.1080/26410397.2019.1676513>

Delivering effective SRHR education

CSE is a critical tool to ensure that women and girls in crisis-affected contexts are able to access SRHR information and realize their rights. However, in order for CSE initiatives to be effective, they must be age-appropriate, medically accurate, culturally sensitive, and include support for teachers and educators to deliver them. Some promising approaches identified in Mind the Gap 3 include:⁷

- **Involving youth** in the development of CSE curriculum content to ensure it is age-appropriate, relevant, and responsive to the changing needs of young people.
- **Empowering youth** as peer educators in communities. Young people know where and when to engage other young people outside of formal education structures and can also use social media channels for a wider reach.
- **Taking time to understand** where deep-rooted resistance in the community comes from, and building understanding through collaboration with parents, school officials, religious leaders, and young people.
- **Equipping teachers** with accurate knowledge, effective teaching methodologies, and coaching support to ensure they can discuss SRHR issues in the classroom, including those that can be culturally sensitive and challenging to address.
- **Delivering CSE online**, by creating a discreet space where users can ask sensitive SRHR questions that may not be covered in a curriculum, and ensuring the content addresses relevant, interesting issues and challenges

Gaps

The Mind the Gap 3 report highlights the following gaps in data, evidence, and actions for comprehensive SRHR education in crisis-affected contexts:

- **Curricula:** Despite the demonstrated benefits of medically accurate, age-appropriate CSE, a number of crisis-affected countries still lack any relevant SRHR content in the curriculum. CSE is often only delivered at secondary levels, despite girls in crisis-affected contexts being 90% more likely to be out of secondary school than their peers in more stable settings. Very few crisis-affected countries have CSE curricula in place for out-of-school children. Additionally, SRHR curriculum content often is not contextualized and fails to address cultural and religious sensitivities.
- **Teachers:** Teachers often have limited capacity to deliver CSE curricula. They may have limited SRHR knowledge, feel uncomfortable discussing SRHR topics, and/or lack training and support to deliver the content. Without training and support, teachers often focus only on less contentious topics and can reinforce harmful gender norms and misinformation. Ongoing teacher professional development on SRHR is needed to ensure that teachers feel confident to deliver CSE curricula.

7 See INEE (2023) Mind the Gap 3, Section 5.4

- **Men and boys:** Men often dominate SRHR decision making, limiting the ability of their wives and daughters to access SRHR information and services such as contraception. Greater attention is needed to engage men and boys in addressing the inequitable power dynamics, harmful gender norms, and toxic masculinities which shape their behavior and undermine women's SRHR access and choices. Additionally, men and boys' needs have largely been absent from the focus on SRHR, but CSE can start to address harmful gender norms that discourage men and boys from health- and help-seeking behaviors. Men's engagement in CSE needs to move beyond solely focusing on their role as supportive peers and partners to instead engage them as stewards of their own sexual and reproductive health.
- **Data:** A number of gaps remain in data on SRHR education in emergencies, including:
 - The training and support provided to help teachers effectively deliver a comprehensive and rights-based curriculum. More research and evidence are needed to identify what strategies teachers adopt and which lead to the most impactful SRHR outcomes for girls;
 - Whether global resources and locally developed CSE teaching materials are reaching teachers and being used effectively in the delivery of SRHR education; and
 - The links between SRHR education and the prevalence of GBV in and around schools. More research is needed to explore how the delivery of SRHR education is changing GBV-related behaviors; some research suggests a curriculum focused on gender equality has the potential to address GBV, but the evidence remains limited.

Recommendations

The following actions are suggested in order to close the gap in access to and quality of SRHR education for women and girls in crisis-affected contexts:

Programming

- Governments and education partners should work together to develop CSE curricula that are age-appropriate, medically accurate, adequately address gender and power, and are available for out-of-school children. Civil society should also support youth organizations and movements' involvement in developing these curricula, and should train and support youth as peer educators to ensure a wider reach for those out of school.
- Civil society, including youth-led and community-based organizations, should engage with parents and religious leaders to address resistance to CSE, especially at the primary level, by addressing misinformation and highlighting the risks girls face if they do not have access to accurate SRHR information and services.
- Governments and education partners should support organizations and networks to widen the reach and depth of SRHR knowledge through online platforms, which have

been successful in engaging youth with content that matters to them, increasing the chance of it having an impact on behaviors.

- Civil society should ensure that teachers are adequately equipped to deliver high-quality CSE with access to the right materials, in-school support, and teaching methodologies to ensure that more sensitive and resisted topics can be discussed openly and answered in a way that puts gender equality at the heart of the conversation.
- Teachers should continuously build their knowledge on SRHR, put it into practice, and adapt their content to fit their classroom context. As teachers increasingly build their confidence and experience, they can influence parents and communities and gain their support for delivering CSE by sharing and demonstrating results.
- Teachers and other educational personnel should advocate for improved quality, monitoring, and supervision of teacher training and delivery related to SRHR, as well as increased budgets to support these trainings.

Policy and planning

- Governments, collaborating with partners in local education clusters and working groups, should ensure that age-appropriate CSE content is integrated into national curricula at primary and secondary levels, and that their delivery is appropriately financed and resourced. Advocacy and engagement are needed to continually highlight that CSE is a critical element in achieving gender equality.
- Governments and their partners should ensure that all teachers have access to high-quality professional development around SRHR. Training on CSE should be included in national teacher training curricula and ongoing support provided in schools. Support structures should also focus on teacher wellbeing, with guidance and counseling available to help teachers be responsive to the challenges they face and the responsibilities they take on.

Funding

- Donors should support the development and delivery of age-appropriate, contextualized, and comprehensive sexuality education delivered at the primary and secondary levels. Donors should support specialized CSE provision for over-age primary learners where it cannot be delivered within the core curriculum.
- Donors should advocate for and fund training for teachers to enable them to deliver a CSE curricula at primary and secondary levels.

Data collection, monitoring, and analysis

- Data collectors and collators should collaborate with local actors (including youth-led, feminist, and women's rights organizations) to:
 - Ensure that women and girls are included in data collection, and that their voices and lived experiences are prioritized when identifying SRHR needs and challenges and tailoring CSE responses.
 - Determine whether existing CSE teaching materials are reaching teachers and being used effectively in the delivery of SRHR education.
 - Understand what training and support teachers need to effectively deliver a comprehensive and rights-based CSE curricula.
 - Identify which teaching strategies lead to the most impactful SRHR outcomes for girls.
 - Understand the links between SRHR education and the prevalence of GBV within schools, particularly whether SRHR changing attitudes and behaviors related to GBV.

Further resources on CSE:

- **UNFPA (2022). My Body, My Life, My World.** These nine modules, together with a Young People's Empowerment Index, provide a practical overview and essential tools and resources for the design, implementation and monitoring of programmes, based on the experiences of UNFPA and its partners around the world.
- **UNFPA (2018). International technical guidance on sexuality education: An evidence-informed approach.** This document provides technical guidance to assist education, health and other relevant authorities in the development and implementation of school-based and out-of-school comprehensive sexuality education programmes and materials.
- **UNICEF (2019). The Opportunity for Digital Sexuality Education in East Asia and the Pacific.** This review examines the opportunity for digital sexuality education in East Asia and the Pacific and includes recommendations for the design and implementation of digital sexuality initiatives.
- **WHO (n.d.) Comprehensive Sexuality Education Q&A.** This webpage answers frequently asked questions about CSE.

Published by:

Inter-agency Network for Education in Emergencies (INEE)

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Suggested Citation:

Inter-agency Network for Education in Emergencies (INEE). (2023). Comprehensive Sexuality Education in Emergencies: Developing and delivering SRHR education in crisis settings. INEE. <https://inee.org/resources/comprehensive-sexuality-education-emergencies-developing-and-delivering-sexual-and>

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**Acknowledgements:**

This brief was developed by Lauren Gerken, INEE Gender Coordinator. We would like to thank the INEE Gender Working Group, INEE Secretariat, and other individuals who have given their time and expertise to develop this brief.

INEE gratefully acknowledges the financial support provided for this brief by Global Affairs Canada.

Design was provided by 2D Studio.