

Module 2: Evidence based approaches to sexuality education for adolescents - Adolescent health and development with a particular focus on sexual and reproductive health - Assignment

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## **Barriers to expanding or improving sexuality education in my country and community**

### **At the level of families and community**

There is strong resistance towards sexuality education.

Parents and religious leaders feared that sexuality education would teach their children ‘bad things’. In particular, that it would encourage them to initiate sexual relationships.

Some believed that sexuality education is a Western concept that is unsuited to our community, and is against our culture or religion. They said that we are facing cultural invasion coming from TV and internet.

So most of them simply preferred their children to be left alone and by time to discover sexual activity for themselves upon reaching adulthood and after getting married.

### **At the level of school and ministry of education**

- Poor conditions in schools; crowded and inhospitable classrooms that undermine participatory teaching methods.
- Limited materials and resources.
- Making space for sexuality education within an already overcrowded curriculum is challenging that lead to the prioritization.
- Low teacher morale coupled with poor supervision and support from school administrators.
- Limited number of trained teachers who are overburdened as well as frequent transfer and promotion of well-trained and motivated teachers leading to delivered curriculum by untrained teachers.

## **Suggestions on overcoming these barriers**

### **At the level of community**

The need to advocate for the kind of social environment that is supportive of school-based sexuality education is overgrowing.

The adoption of sexual education in schools involved a long process of sensitizing stakeholders. Not only to parents, but also to government officials and religious leaders, who were uncomfortable about what their children would be taught in school.

The sensitization process includes educating the public through social meetings in mosques, at the meetings with parents in schools, public meetings chaired by community leaders, and youth clubs.

Active involvement of national NGOS that advocate for the needs of young people groups and to create and sustain support for sexual education in schools.

### **At the level of school**

It is important to support the Ministry of Education to develop a detailed teaching curriculum for health education, together with relevant teaching materials and advice on how best to position this topic within the overall school programme. This will need first the development of a national strategic framework preceding implementation of sexuality education curriculum based on survey study in number of selected schools.

It is also important to select capable and motivated educators to implement the curriculum, and to provide quality in-service training for teachers, on-going management, and supervision.

We can get technical support from UN partners and NGOS to ensure the continuity and sustainability of the programmes.

### **At the level of country**

It is crucial to identify and involve ‘allies’ among decision-makers, and to ensure political commitment to addressing sexual education and HIV/AIDS.

This can be supported by evidence based studies on the impact of sexuality education.

### **Assignment documents**

1. [IPPF. From evidence to action: Advocating for comprehensive sexuality education. London: IPPF; 2009.](#)
2. [UNESCO. International Technical Guidance on Sexuality Education. Volume I. The rationale for sexuality education. Paris: UNESCO; 2009.](#)
3. [UNESCO. International Technical Guidance on Sexuality Education. Volume II. Topics and learning objectives. Paris: UNESCO; 2009.](#)
4. [UNESCO. Levers of Success. Case studies of national sexuality education programmes. Paris: UNESCO; 2010.](#)