

SESSION ON COMPREHENSIVE AND AGE-APPROPRIATE SEXUALITY EDUCATION FOR PREVENTING VIOLENCE

8 April, 14h30-16:00, ORANGE Room

SPEAKING NOTES FROM

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Q.1- What's the experience in Albania?

- **Compulsory, given in the context of biology classes as from age?**

The process of developing sexuality education in schools started in 2005 by UNFPA and the Ministry of Education (Institute for Educational Development, now is AEQPUE), which was responsible for curriculum design.

On 8 June, 2012, the Ministry of Health and Social Protection (MoHSP) adopted a sub-legal act entitled 'Approval of the positioning document for comprehensive sexuality education for young people in Albania.

In 2015, Albania has developed and implemented the programme called "Sexuality Education for Life Skills" for 10 to 19-year-old students under the lead of the Ministry of Education, Youth and Sports with the support of UNFPA and IPPF. The program covers 140 teaching hours integrated into three subjects (biology, health education and physical education) and it seeks to go beyond improving sexual health.

Institute for Educational Development has implemented and monitored a comprehensive sexuality education training program for teachers since 2011. The whole process was monitored and evaluated by IED and UNFPA. At the end of 2015 about 3,000 teachers were reached.

Comprehensive Sexuality Education for Life Skills Program starts since the fourth grade and is a non-compulsory curriculum that covers a range of topics:

- Biological aspects and knowledge of the body
- Pregnancy and childbirth
- Contraception (including at least three effective methods)
- HIV / AIDS
- STIs
- Love, marriage, bond
- Sexual pleasure
- Sexual orientation
- Gender Roles
- Online media and sexuality
- Access to safe abortion under national laws

- Mutual agreement on sexual activity
- Sexual abuse / violence
- Domestic violence
- Human rights and sexuality

Comprehensive sexuality education is also provided at ACPD youth centers and several other organizations. The sessions they offer cover issues such as SRHR, HIV / AIDS, sexual pleasure, gender and rights and violence. ACPD and some other NGOs also provide information through Facebook. In school curricula, attention is also paid to vulnerable groups, however, the needs of these groups need to be addressed directly. They are generally only mentioned as vulnerable groups, but no instructions or strategies are given on how to reach them.

Q.1- Follow-up question: What are the main challenges?

- **Taboo/Resistance from parents**
- **Teachers not trained**
- **Lack of resources?**

Opponents of comprehensive sexuality education are across the country, from parents and to community members and teachers who see sexuality education as a motivating factor for young people get involved in sex quickly. They also believe that goes against Albanian culture and that schools should promote values and not the implementation of sexuality education. They think sex education can be good for young people but not for young children.

This is an opposition though not aggressive towards CSE where parents, teachers, the community continue to hold negative attitudes towards sexuality considering it as a motivator towards sex.

In spite of up-to date achievements related to sexuality education, young people still have limited access to comprehensive, rights based and gender sensitive sexuality education, specifically young people from vulnerable groups.

Misconceptions of teachers, parents and people from community due to the lack of information commonly include concerns that comprehensive sexuality education is inappropriate for young children, and it goes against local cultural or religious values, encourages early sexual initiation or causes 'gender confusion' and may be used to recruit young people into 'alternative lifestyles or non-conforming sexual orientation or gender identity. ACPD and volunteers highlighted the health, emotional and socio-economic benefits of CSE to children and young people, families and entire society.

All CSE programs and information that is shared online reaches a larger number of young people, but is still a barrier for some underserved young people to access, something noticed especially during Covid-19, with gathering restrictions

Q.2- What kind of support / guidance would you welcome?

- **A wish list**

1. Strengthening the monitoring and evaluation system, which requires training in monitoring and evaluation;
2. Involvement of under-served youth;
3. Addressing issues of gender, pleasure and violence;
4. Update of specific information for organizations and institutions that provide SHSR services;
5. Coordinating education by inviting speakers representing different service providers;
6. Organizing information and educational sessions with parents and community members.
7. Strengthening partnerships with state institutions in the framework of CSE is very important for creating the good bases for acceptance and support among them and creating the fundamentals for the CSE implementation as for the international standards.
8. Setting up a periodic communication with beneficiaries (face-to-face meetings, online, phone calls) and encouraging them to give feedback on dissemination of the learnings is very important for boosting and measuring the results of the intervention.
9. Involvement of existing network of peer educators and volunteers boosts the motivation of new peer educators by providing them with best practices with this regard.
10. Engagement of community leaders through information and education on the benefits of CSE as they play a crucial role in providing young people with information and support them to access SRHR services. Keep the dialogue going and involve them as partners on CSE delivery in and out of school.
11. International Community of Donors should be more supportive of CSE programs.

Q.3- Beyond a means of preventing violence, comprehensive sexuality education also serves to protect children's right to health, including sexual and reproductive health. What's your experience in this field?

Only ACPD and a few other NGOs provide youth-friendly SHSR and HIV / AIDS services. However, in general, SHSR services, as well as contraceptives, are provided free of charge and without limit age. However, studies show that young people lack information about this and that the attitudes of service providers may prevent them from using these services for free, so they feel the need to better buy contraceptives at the pharmacy or in the supermarket. Young people have to pay to perform abortion if they are over 18 years old and do not have health insurance. The cost of abortion is about 45 USD. Age allowed for abortion is over 16 years old.

Emergency contraception can be provided without a prescription and there is no age limit. Likewise, condoms are found easily in pharmacies or supermarkets.

This is linked with difficulties in obtaining information and services in health centers; prejudices, taboos in the community; lack of training of health personnel.

Adolescents are at risk for sexually transmitted infections, HIV, sexual violence and abuse, and unintended pregnancies.

ACPD is an important contributor for the provision of SRH to young people through its clinic centers in two cities: Tirana and Vlora.

The SRH services that ACPD clinics provide are:

- HIV/STI
- Gynecology and Subfertility
- Abortion
- Specialized SRH (Counselling on relationships; SGBV)
- Contraception

Q.5 - 3 suggestions/messages

1. Scary stories don't save lives, Comprehensive Sexuality Education does
2. Comprehensive Sexuality Education is a guide towards healthy behaviors, sustainable relationships and fulfilled family life.
3. Comprehensive Sexuality Education helps young people to think in advance about what they value and what their personal limits are; helping them to respond and make decisions they feel comfortable with in specific situations.

Link to CSE/SGBV platform integral part of ACPD website:

<http://acpd.org.al/?p=1054>

Link to CSE Blog part of ACPD website:

<http://acpd.org.al/?p=1680>

Linkage of CSE and Sexual gender-based violence

ACPD in 2020-2021 implemented an initiative with support of IPPF on the importance of Comprehensive Sexuality Education (CSE) for an inclusive and gender equal society. A research took place in a high school of Tirana aiming to provide evidences related to the benefits of CSE to young people lives with strong emphasis on prevention and response to harmful social norms and practises and sexual abuse. The research examined the perceptions, nature, extent, causes, and impact of violence in schools and evaluated how the situation has changed after the provision of

Comprehensive Sexuality Education for the intervention group composed of 30 of students in comparison with the comparison group of 30 students who did not receive CSE until the end of the initiative.

- ✓ The overall post-intervention data analysis shows that there are changes in communication with parents and teachers before and after the intervention. In most cases the change is positive, indicating that the intervention has helped teenagers to have more communication with father mother and teacher on topics that are important to them. More has to be done in this regard, not with teenagers only but also with parents and teachers, in order to improve the whole communication environment for youths to speak up on what concerns them.
Regarding communication with the father 70% of male participants find it very easy and 30% easy. In the female group, 24% find it very easy, 44% easy and 24% somewhat difficult and only 8% difficult.
Regarding communication with the mother, in the post-test data, we see that 100% of male participants find it very easy to communicate with the mother, while in the female group 70% find it very easy.
- ✓ If we compare, in the beginning the level of concern of adolescents about issues such as sexual and physical violence; discrimination based on race and sexuality orientation; gender inequalities; sexual harassments increased (from 1.53-1.77 to 1.70-1.93) which is positive as it affects their overall well-being.
- ✓ The results show a positive effect that the intervention had in terms of helping participants to get acquainted with GBV, considering that for 43.3% of participants it helped them to a great extent while for 36.7% it helped them to a considerable extent (total 80%).
- ✓ When it comes to trust to respond to GBV, the results show that 27% of participants considered the intervention useful to a large extent, while 50% considered it useful to a considerable extent (total 77%). Again, this result confirms the change that the intervention has made in the participants' confidence levels regarding the response to GBV.
- ✓ The findings show that 35% of adolescents in the pre-intervention phase did not receive information about gender roles in school, while 46.7% reported that they did receive such information. After the interventions the results showed that 70% had received information.

Conclusions and Recommendations of the role of CSE on SGBV

- ❖ Sexuality education is essential to prevent and combat sexual violence and the adolescents are worried and concerned at high levels regarding sexual and physical violence, sexually transmitted diseases, discrimination gender inequality as well as sexual harassment in the school environment, that in turn affect their overall wellbeing.
- ❖ By providing factual, non-stigmatizing information on sexual orientation and gender identity as one aspect of human development, comprehensive sexuality education can

contribute to combating homophobia at school and beyond, to change the mentality and to creating a safer and more inclusive learning environment for all.

- ❖ If we want that sexuality education to be accepted and successfully implemented, it should consider the communities' and parents' cultural and religious backgrounds. Schools should be supported to engage with them, to provide families with accurate information and to take their views into account as long as they do not contradict the very aims of sexuality education, and to ensure the best interest of the child.
- ❖ New technologies can be utilized to improve the delivery of sexuality education messages.
- ❖ Sexuality education should not be limited to young people in school, but should focus and other young people from vulnerable groups. Civil society organizations can play an important role in bringing sexuality education to young people or to vulnerable groups.
- ❖ Integrating training on sexuality education in regular teacher training programs, is an effective way of ensuring that all teachers are adequately prepared. Effective teaching and appropriate teaching methodologies are critical to sexuality education and SGBV success and all teachers involved require appropriate training and teaching materials.