

Can Sexuality Education Advance Gender Equality
and Strengthen Education Overall?

Learning from Nigeria's Family Life and HIV Education Program



INTERNATIONAL WOMEN'S HEALTH COALITION

About this Publication

The International Women's Health Coalition (IWHC) aims to protect and advance the sexual and reproductive rights and health of women and young people, particularly adolescent girls, in Africa, Asia, Latin America, and the Middle East. IWHC has played an essential role in supporting the development and cutting-edge work of organizations and networks focused on addressing young people's health needs and human rights. We believe that a rights-based approach to sexuality education is critical for empowering girls and equipping young people with the skills they need to forge emotionally and socially healthy relationships. We define this approach not only in terms of educating adolescent girls about their bodies, but also as ensuring girls have access to education and safe schools; equal opportunities for livelihood and civic participation; and freedom from early and forced marriage, intimate partner violence, and sexual harassment, coercion, and abuse. Since the early 1990s, we have supported partner organizations working toward the same goals. This case study is one of several publications documenting and analyzing progress toward those goals.

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Executive Summary

The imperative to prepare the largest generation of young people in history for adulthood has driven a search for fresh approaches to educating adolescents about their bodies and sexuality. Recently, there have been calls among health experts and educators for a comprehensive, integrated approach to sexuality education that addresses not only health issues such as HIV and pregnancy, but also helps to achieve broader outcomes such as ensuring gender equality, increasing access to education for girls, and improving the quality of education overall. This wider understanding of comprehensive sexuality education is based on strong evidence showing synergies among adolescent health and social development goals, including the following:

- 1 In terms of reducing rates of sexually transmitted infections and unintended pregnancy, evidence now shows that curricula that emphasize gender and power are nearly five times more effective at achieving positive health outcomes than those that do not. Hence, the best sexuality education is also gender awareness education.**
- 2 Changing adolescents' attitudes about gender norms engages their critical thinking skills, itself an established learning standard in schools. Such higher-order thinking skills not only advance academic growth, but also expand potential for a lifetime of meaningful citizenship.**
- 3 Placing gender and power at the heart of teacher training and curricula can raise awareness about the importance of a safe classroom and a safer community, in which girls are free from sexual harassment or coercion by classmates, teachers, or others. Girls who attend schools where they are treated more equitably with regard to support, advice, encouragement in class, and safety are significantly more likely to remain enrolled.**
- 4 Engaging students in reflection and problem-solving (especially about topics that are personally meaningful) also builds their sense of connectedness to teachers and to school. School connectedness has been shown to foster girls' ongoing enrollment and delay the start of sexual activity.**

Considerable international attention has been paid to the Family Life and HIV Education (FLHE) program in Nigeria. While the program does not formally aim to achieve broader development goals, nongovernmental organizations in some states have effectively brought a strong commitment to gender equality into local FLHE programs.

This report synthesizes a two-tiered review of the FLHE program. It draws both on a formal case study examining effects of the training on teacher attitudes and practices (Wood et al. 2015) and on a wider, more informal program analysis. The findings from both resonate with each other and are synthesized in this report.

The study of the FLHE program was conducted in four states (Lagos, Cross River, Edo, and Enugu) where education officials partnered with nongovernmental organizations (NGOs) grounded in a gender perspective. In particular, it sought to learn whether, in those states, FLHE has evolved toward something closer to an integrated, gender-focused approach to sexuality education.

More specifically, the questions explored were:

- How strong are the lessons and messages about gender equality in the student curriculum? In the training for teachers?
- How has the training program affected teachers' sensitivity and commitment to gender issues (both in FLHE lessons and in ensuring a safe and equitable school environment)?
- How are teacher-level changes manifesting in the classroom?
- How have teaching methods evolved as a result of the training?
- Are students thinking and talking differently about gender norms and roles?
- Is there any indication that FLHE affects students' sense of connectedness to school?

PROGRAM ELEMENTS

STUDENT CURRICULUM AND TEACHER TRAINING

In the states visited:

The curriculum conveys stronger messages about gender than sexual health.

Various units of the curriculum touch upon gender issues—specifically, early marriage, sexual coercion, gender-based violence, harmful practices, human trafficking, and girls' assertiveness. While these topics are not addressed in depth, it should be noted that many sexuality education/HIV curricula ignore these topics altogether. With regard to sexual health content, however, the FLHE program is notably weak; as an abstinence-only curriculum that omits information about contraception and condoms, its potential effect is severely constrained.¹ A separate concern is that the curriculum content is being diffused across four (and in some cases up to 10) subjects, which a number of individuals involved in FLHE believe has weakened the program. Previously, FLHE was integrated exclusively into social studies and science courses.

The teacher training included a very strong emphasis on gender, as well as on new teaching methods.

Importantly, NGOs that are deeply committed to gender equality were instrumental in advocating for and developing the FLHE program in the four states visited for this case study. As the primary technical partners for implementing FLHE at the state level, these organizations played an important role in enriching the training curriculum and shaping what teachers brought back to their classrooms, in some cases going beyond the formal curriculum. The training program for FLHE teachers included information about condoms and contraception, as well as fairly expansive content on gender. There was also emphasis on interactive teaching methods adaptable for large classes, which helped build

¹ The original FLHE curriculum contained information about contraception and condoms for HIV prevention, but that content was almost entirely cut from the curricula being used at the Junior Secondary School level, the current focus of program implementation.

teachers' capacity to engage students in participatory learning and engaged the teachers themselves in inquiry-based learning techniques, including posing questions, seeking evidence, problem-solving, and analyzing how the wider social context affects their own lives. The original training program was designed as a 10-day residential workshop and included a two-day classroom-based practicum. Starting in 2010, with support from the Global Fund to Fight AIDS, Tuberculosis and Malaria, the government began implementing FLHE at scale; however, largely for budgetary reasons, the duration of the training was sharply reduced, from 10 residential days to four nonresidential days. Most respondents in this case study expressed extreme dismay at this change. They also stressed the need for ongoing support to teachers, through refresher trainings, mentorship and feedback mechanisms, and provision of teaching materials.

These findings suggest that the strength of the FLHE program rests less on the curriculum than on the original, robust teacher training that shaped what can be considered the informal curriculum—that is, the classroom culture, the learning environment and the delivery of content beyond the formal curriculum—as well as the role of NGOs in teacher training and support.

EFFECTS OF TEACHER TRAINING ON THE PROGRAM

INCREASED KNOWLEDGE AND COMFORT WITH SEXUALITY

The formal study was primarily at the level of the classroom and teachers, as well as the role played by NGOs (Wood et al. 2015) complemented by a broader review that included interviews with other stakeholders and input from students. The team observed the following:

Increased critical consciousness about gender norms and roles

Gender norms are deeply entrenched, and all the more powerful because they are unquestioned and taken as natural, yet this was the area where change was most palpable. Teachers report that the FLHE training has empowered them to be far more comfortable and committed to bringing messages about gender equality into the classroom, as well as in their own lives and communities. They also expressed commitment to expanding girls' equality and opportunities, including at school.

In classroom observations, the team observed students learning about harmful practices, including child marriage, female genital mutilation, widowhood practices, child labor, scarification, and sexual harassment. The team also observed some teachers educating students about contraception and sexuality, topics not in the curriculum. In interviews, girls described ways FLHE has enabled them to become more comfortable with their own bodies and better assert their rights as girls—at school, at home, and with males. Notably, these changes, while anecdotal, echo the results of an earlier evaluation conducted by Philliber Associates, which found no changes in sexual behavior, but less tolerance toward sexual coercion, especially among girls.

Greater awareness of sexual harassment and abuse

The training has raised awareness of the problem of sexual harassment and abuse in schools, homes, and the community, but has not yet translated into proactive policies to ensure a safe environment. One sign of progress is that some schools now turn to the NGOs that trained them for help when a situation of abuse arises.

Strengthened pedagogy

The FLHE topics require a sharp departure in pedagogy for most teachers, and this shift is an important part of what makes FLHE a meaningful intervention for education. During classroom observations of FLHE lessons, the team observed students singing, using flash cards, enacting role-plays, and brainstorming. Teachers also described employing games, drawing, and other interactive teaching methods that they learned as part of FLHE training. Examples of inquiry-based learning or “developed dialogue” (learning driven by questions that the learners raise) were rarer in the classes observed, although both teachers and students described such classroom discussions.

Methodologies that foster these kinds of higher-order thinking skills have benefits beyond the FLHE curriculum. Notably, many teachers reported that they have begun using more participatory approaches in their teaching outside of FLHE topics. As such, the critical thinking elements of FLHE, even if they are quite modest, can enhance education overall. Furthermore, shifts in this direction may yield meaningful effects outside the classroom: The World Values Surveys find that “an open classroom culture” is more important than the content of the lessons for fostering positive attitudes toward democracy.

Increased student connectedness for girls

While the factors leading young people, particularly girls, to exit school early are largely rooted in poverty, evidence (including from Nigeria) shows that young people's sense of connectedness to their teachers and to school helps lead to multiple positive outcomes, including continued schooling, improved academic performance, and delay of sexual activity. Comments from stakeholders at every level suggest that FLHE fosters school connectedness among female students. As a Lagos State Ministry of Education (MOE) official who is deeply involved in FLHE observed, “The teachers and students have become closer, and the students approach the teachers as their counselors.” Indeed, at several schools, teachers cited evidence of better attendance during FLHE lessons, as well as more active involvement in classroom life.

RECOMMENDATIONS AND DISCUSSION

Gender-focused sexuality education is a critical, but largely neglected, means to reach huge numbers of young people with messages about girls' wellbeing, such as the right to stay in school and to live free of abuse. Gender-sensitive NGOs in Nigeria have shown to be catalysts for effective implementation of such programs. Moreover, investments in teachers' consciousness about, and commitment to, gender equality, may lead to significant changes in classroom culture and messaging, even where the formal curriculum includes only limited content.

In the short term, financial support is needed to restore more comprehensive teacher training, emphasizing gender-equitable attitudes and critical-thinking teaching methods. A strategic place to invest is in states where NGOs are already working effectively with the government to advance FLHE.

Over the longer term, research is needed to document and analyze more fully the independent effects of investing in teachers' gender attitudes and teaching skills. Furthermore, investment should be made in the development of evaluation indicators to capture effects of school-based programs to address a wider range of outcomes, including those related to education (e.g., school connectedness, critical thinking skills development, and girls' enrollment) and to gender equality (e.g. gender norms/attitudes, age of marriage, girls' leadership, sexual harassment, sexual coercion, intimate partner violence, human trafficking, and female genital mutilation), as well as to sexual health (STIs and unintended pregnancy).

The Nigeria FLHE program can be most strategically understood as addressing outcomes beyond sexual health. Indeed, at least in the states visited, FLHE may have its greatest effects not on pregnancy or STI rates, but on gender equality and educational quality. That the FLHE may have its furthest-reaching effects on social and educational outcomes that were not even a formal aim of the program raises compelling questions:

- What benefits might accrue if sexuality education programs set out explicitly not only to reduce HIV and unintended pregnancy, but also to advance girls' rights and education, to strengthen girls' agency, to reduce intimate partner violence, and to delay marriage?
- Might critical thinking skills fostered through participatory learning methodologies used in these programs lead to the development of skills and attitudes that support more civic engagement and democratic values in support of human rights?

The Nigerian FLHE program may offer a promising learning laboratory to inform future research, policies, and programming of such synergies globally.

Background

SEXUALITY EDUCATION: SYNERGIES WITH GENDER EQUALITY AND EDUCATION OVERALL

Advancing the wellbeing of girls in developing countries demands an integrated approach that involves both reducing existing inequalities and transforming the social norms that underlie and perpetuate gender inequality. Among the strategies for achieving these goals are financial literacy and livelihoods initiatives; incentive schemes for keeping girls enrolled in school and/or preventing early marriage; and targeted education, social support, and advocacy programs that seek to change gender norms in ways that empower girls, delay marriage, and eliminate other common violations of girls' rights.

Curricula that focus on gender issues are nearly five times more effective than conventional, gender-blind curricula at reducing rates of sexually transmitted infections and unintended pregnancy.

In theory, sexuality and HIV education overlaps closely with girls' empowerment initiatives: After all, vulnerability to early, unwanted, and unsafe sex is a primary threat to girls' life chances. Unfortunately, few sexuality education programs—especially scaled-up, school-based programs—have identified achieving gender equality as a formal goal or focused curricula on issues of gender and power. As a result, sexuality education and other initiatives aimed at advancing gender equality have often operated in parallel rather than in a synergistic manner.

That is beginning to change, in part because of evidence that curricula that focus on gender issues are nearly five times more effective than conventional, gender-blind curricula at reducing rates of sexually transmitted infections and unintended pregnancy (Haberland 2015). Furthermore, sexuality education that is most effective in terms of health outcomes also has wider potential to change gender norms: placing gender and rights at the heart of curricula and teacher training can raise awareness about the importance of a safe classroom and a safer community, one in which girls are free from sexual harassment or coercion by classmates, teachers, or other adults.

Enabling young people to reflect about gender norms may have academic benefits as well. First, changing adolescents' attitudes about gender norms engages their critical thinking skills, itself an established learning standard for secondary schools. Such skills not only advance students' academic growth, but also expand their potential for a lifetime of meaningful citizenship. Second, emerging

evidence suggests that engaging students in critical and reflective thinking and problem-solving skills (especially about topics that are personally meaningful) helps build their sense of connectedness to teachers and to school (CDC 2009).

Cognizant of these synergies among sexuality education, gender equality, and schooling, UNFPA, UNESCO, and other international bodies have advocated for infusing a gender focus and critical thinking teaching approaches into sexuality education (Haberland and Rogow 2015). Such an integrated approach has an eye toward not only sexual health outcomes, but also on gender equality and on schooling overall.²

While these findings are both important and encouraging, transforming students' attitudes about gender—not to mention fostering critical thinking and strengthening school connectedness—is a formidable task.³ Researchers and policymakers are increasingly pointing to three crucial components to strengthen sexuality education programs and align them with a gender equality and education agenda: 1) a strong curriculum with gender and power at its heart; 2) teachers who embrace gender equality and have skills to engage students in reflection and critical thinking; and 3) a safe and gender-equitable learning environment (Rogow and Haberland 2005; UNESCO 2009; UNFPA 2011; Haberland 2012; Haberland 2013, Haberland 2015).

CASE STUDY: LEARNING FROM FAMILY LIFE AND HIV EDUCATION IN NIGERIA

Considerable international attention has been paid to the national program in Nigeria—known as Family Life and HIV Education (FLHE). Documentation of FLHE has focused on several dimensions of the program: its early development, an initial sexual behavior outcomes evaluation, and its recent scale-up in which individual states can modify the curriculum [see Page 11]. What has been less examined is whether and how the Nigerian program—drawing heavily from technical partnerships with nongovernmental organizations (NGOs) working with a gender perspective⁴—may be contributing to broader development goals, namely advancing gender equality and strengthening education overall (pedagogy, safe schools, and student connectedness).

This report synthesizes the findings of a study done primarily among teachers (Wood et al. 2015), as well as a broader program review of the FLHE with a range of stakeholders, including government and NGO leaders, school principals, and students. Both the study and the wider review sought to address the following questions:

Program Elements

- How strong are the lessons and messages about gender equality in the curriculum?
- How much emphasis is placed on gender equality and on new pedagogies in teacher training?

2 See, for example: UNFPA (2011); UNESCO 2012. Further research is needed to determine the independent and combined effects of school incentives and gender-focused comprehensive sexuality education for both health and gender equality outcomes. In a recent study, Duflo and colleagues (2012) compared the effects of school incentives (free uniforms) with HIV-prevention education on markers of both equality (girls' dropout and marriages rates) and sexual health (rates of STI/HIV, pregnancy, and birth outside of marriage); however, the education component was an abstinence-only model. The two arms had contrasting outcomes on marriage and sexual health. The authors conclude that a "more comprehensive HIV prevention message . . . when interacted with education subsidy, would reinforce education and fertility impacts of subsidy . . . and would likely reduce STIs."

3 One example of a government taking on this task is the Colombian Ministry of Education implementation of the Program for Education on Sexuality and Citizenship (PESCC), a multidisciplinary program aimed at all of these goals, including sexual health outcomes.

4 Some, but not all, of the NGOs referenced in this report explicitly identify as feminist organizations. For purposes of this paper, the term "gender-sensitive" is used to encompass both those NGOs that identify as feminist and those that do not use this term but that intentionally carry out activities that can reduce gender inequality.

Program Effects

- Does the curriculum offer strong lessons and messages about gender equality?
- How has the training program affected teachers' sensitivity and commitment to gender issues (both in FLHE lessons and in ensuring a safe and equitable school environment)?
- How are teacher-level changes manifesting in the classroom?
- How have teaching methods evolved as a result of the training?
- Are students thinking and talking differently about gender norms and roles?
- Is there any indication that FLHE affects students' sense of connectedness to school?

This case study of the Nigerian FLHE program concentrated primarily at the state level, as states are responsible for rolling out the scaled-up program and have the flexibility to modify it, and is focused on four states in which the state Ministry of Education (MOE) collaborated with an NGO that was firmly committed to the program and to bringing a gender perspective to the work.⁵

- Lagos State: MOE and Action Health, Inc. (AHI);
- Cross River State: MOE and Girls' Power Initiative (GPI)–Cross River;
- Edo State: MOE and GPI–Edo;
- Enugu State: MOE and Global Health Awareness and Research Foundation (GHARF).

This case study involved an extensive desk review, as well as interviews and classroom observations in Nigeria. The desk review covered the history and progress of FLHE.⁶ In each of the four states visited, state MOE officials and staff from the NGO implementing partners were interviewed. We visited two schools per state; at each school, we interviewed two to six teachers, and in some of the schools we also interviewed the principals and conversed with small groups of students. The classroom observations were an important element of the study and the delivery of FLHE lessons was observed in seven schools. In addition, we met with lecturers and students at a teacher training college in Lagos state. Although this case study focused on implementation at the state level, we also met with key informants operating at the federal level, including senior officials in the Federal MOE and related agencies⁷ and representatives of NGOs operating at the national level, international NGOs, and donor organizations that are based in Nigeria and have been engaged with FLHE. Separately, selected international researchers and policymakers familiar with sexuality education and/or with the Nigeria program were interviewed.

5 The review initially focused on seven states where the state MOEs had partnered with NGOs with an explicit commitment to gender equality and girls' rights. As such, this review did not stem from a national review, nor does it reflect any particular knowledge or perception about participating NGOs in other states. Reports from all seven NGOs were reviewed. Unfortunately, travel security restrictions precluded visits to three other states: Kano, Niger, and Plateau, where NGOs have helped the state government to roll out FLHE. Nevertheless, key staff from the implementing NGO partners in these states generously traveled to other locations for in-person, in-depth, face-to-face interviews, and some of their insights are included and referenced in this report.

6 This review also included available documents for each partnering NGO, including student and teacher curricula and related materials; policy documents; and published and unpublished reports.

7 This included the National Education Research and Development Council (NERDC), which includes curriculum development in its mandate; the Universal Basic Education Commission (UBEC), charged with improving access to and quality of primary and junior secondary school (grades 1–9); and the National Commission for Colleges of Education (NCCE), which oversees training colleges for future teachers of grades 1–9.



The observations proved both surprising and encouraging: On one hand, the FLHE program lacks some elements important for a comprehensive sexuality education or HIV-prevention curriculum. On the other hand, at least in the states visited, a strong gender equality message comes through over and over. Moreover, there are signs that the FLHE teacher training and classroom experience are changing schooling in incremental but positive ways; in fact, the most impressive positive effect seems to be the transformation in teachers.⁸ These findings may offer lessons for other settings, provide the basis for continuing work in Nigeria, and raise important questions for further inquiry about re-envisioning the ambitions and effects of sexuality education.

⁸ Notably, Cross River and Lagos were repeatedly mentioned by senior level personnel working at the federal level as having advanced furthest with the scale-up. In Cross River, Edo, and Lagos, there also exists a relatively supportive environment and a strong working relationship between the NGO and the state MOE.

FAMILY LIFE AND HIV EDUCATION IN NIGERIA

Background

Nigeria is an extremely culturally heterogeneous nation and is the most populous country in Africa. Fully 85 percent of the population lives in poverty (PRB 2011), and those aged 15 and younger comprise 44 percent of the population (PRB 2012). Girls' wellbeing is undermined by a combination of patriarchy and poverty. Child marriage remains a major human rights violation: According to the 2008 Demographic Health Survey, among women aged 20-24, 16 percent were married by the age of 15. In the Northern regions of the country, more than one in three girls were married by age 15 (Population Council 2008). Once married, girls are pressured into early, often dangerous, childbearing. Indeed, adolescent girls are at greatest risk of complications of childbirth, as well as of unsafe abortion, contributing to a maternal mortality ratio (840/100,000) that is among the highest globally (PRB 2011). Young women in the country are almost three times as likely to be infected with HIV as their male counterparts (UNAIDS 2013). Poverty also fuels ongoing trafficking of children.

Education, especially for girls, remains sorely inadequate. Secondary analysis of the 2008 Nigeria Demographic and Health Survey found that among girls aged 10–14, 29 percent are not enrolled in school. Among those aged 15–19, this figure rises to 45 percent (Population Council 2008).⁹ That said, the majority of girls in both cohorts are in school. While young people in school are overall less vulnerable than their out-of-school counterparts, they still face significant risks. Girls in particular are vulnerable to sexual coercion (including by teachers), STIs (including HIV), unintended pregnancy, intimate partner violence, genital mutilation, and being forced to end their schooling because of pregnancy, early marriage, school-related fees, or domestic responsibilities. To that end, the Nigerian government has launched prevention programs both for out-of-school and in-school young people. To reach the large numbers of young people who are in school, the Federal Ministry of Education (MOE) developed a national sexuality education program, subsequently renamed Family Life and HIV Education (FLHE).

Previous Developments and Documentation

School-based sexuality education in West Africa is often weak or nonexistent, and opposition to such programs can be fierce. In this context, the fact that FLHE exists in Nigeria has garnered considerable international attention. Previous assessments have focused on the development of FLHE and on its outcomes.

1. Program Development

FLHE grew out of sustained advocacy led by Action Health Incorporated (AHI), a Lagos-based nongovernmental organization (NGO). The original curriculum was produced by a partnership between the federal government and AHI, with wide input from feminist and gender-sensitive advocates, as well as from other stakeholders, including religious leaders and educators. Political opposition arose, primarily in northern states, about both the content of the curriculum and the imposition of a federal standard curriculum on individual states. In response, the government renamed the program from “Comprehensive Sexuality Education” to “Family Life and HIV/AIDS Education,” removed content on contraception, sexual diversity, and

⁹ Some strides have been made in girls' enrollment since the most recent DHS, but girls' access to education still lags seriously, especially in rural areas and where child marriage rates are particularly high.

masturbation, and made allowances for states to further modify the content in consideration of local circumstances. The content was then integrated into science and social studies curricula for upper primary (grades 3-6), junior secondary (grades 7-9), and senior secondary school levels (grades 10-12). The decision was made, however, to focus first on junior secondary schools, when students are still forming their attitudes towards sexuality and gender and before most are sexually active. In 2003, the first rollout of FLHE was carried out in Lagos State, in which AHI played a critical role. Later, it was implemented in other states, where other NGOs led the way in partnership with state MOEs.¹⁰

2. Previous Assessments

An early evaluation (Esiet et al. 2009) in Lagos State found that both male and female students reported increased knowledge and fewer acceptable reasons to have sex. There was not a significant effect on sexual behavior. The evaluation was unusual in that it included a scale of questions related to gender equitable attitudes and to sexual coercion—outcomes ignored in most sex education evaluations. Girls reported reduced tolerance for sexual coercion and greater confidence to refuse unwanted sexual advances from boys. Although there was an increase in the proportion of boys who responded with “gender-equitable” responses to questions about interactions with girls, these responses did not carry over to their own behavior: There was no change in the proportion reporting that they would try to talk girls into having sex, would keep trying if a girl said to stop, or would stop seeing a girl who refused sex. Although the outcomes were mixed, the benefits to girls—and the very fact of measuring outcomes on attitudes toward sexual coercion by males—were notable. A second study in Edo State (Arnold et al. 2012) had inconsistent findings, but found that the effects of the program in several areas were strongest when work was being done in both schools and communities, with participation of youth from the National Youth Service Corps.¹¹ Other recent publications have documented the scale-up and cost.¹² Since 2010, the Global Fund to Fight AIDS, Tuberculosis and Malaria has provided support to expand the implementation of FLHE to every state in Nigeria. This phase has also brought significant changes in the role of NGO partners (especially, but not only, at the national level), in the teacher training, and in the school subjects into which FLHE is infused.

10 See, for example, Brocato, n.d.; UNESCO 2010; UNESCO 2011.

11 National Youth Service Corps is a government program that requires graduates of universities and colleges to serve a national service year.

12 See, for example, UNESCO 2010; UNESCO 2011; UNESCO 2012; Quisbert et al. 2013, Huaynocha et al. 2013.

Program Elements

At the program implementation level, key elements include the Family Life and HIV Education (FLHE) delivery scheme (in this case, a transversal, rather than stand-alone, approach), the curriculum content, and training of teachers.

DELIVERY SCHEME: INFUSING THE CURRICULUM ACROSS SUBJECTS

Initially, FLHE was integrated into the curricula of two junior secondary school subject areas: social studies and basic science.¹³ In 2009, the federal government decided to “mainstream” FLHE content into all subject areas, distributing the content across nine or 10 “carrier” subjects. In addition, the decision was made to revert to having FLHE content be examinable so that students would be tested on the material. The National Education Research and Development Council developed the mainstreamed curricula, with input from stakeholders, including the NGOs most central to the process.

Proponents of mainstreaming FLHE content across all—or at least several—subject areas note that teachers had complained about being overworked; they argue that putting it into two subjects only was too much of a burden for those teachers. The hope is that distributing FLHE topics more widely helps ensure that students will be exposed to the basic content in a way that is integrated into overall learning and that is examinable. In the words of a staff person at the Federal Ministry of Education (MOE): “Anyone who is teaching must come across FLHE topics.” It also is a way to defuse resistance and reduce the likelihood that certain teachers will be targeted for harassment by opponents of FLHE.

Most teachers and other stakeholders complained about the incorporation of FLHE into many subject areas, however, arguing that the fragmentation of the curriculum created these disadvantages:

- Additional challenges for teacher training and support;
- Greater likelihood that important topics will be missed or poorly integrated, because it is difficult to keep track of which FLHE topics are intended to be taught in which school subjects, and also because teachers may feel less responsible for covering the material;
- Difficulty in monitoring and evaluation.

One expert involved in the process commented that it was a “moment of madness” to decide to integrate FLHE into so many subject areas and a sign that “they are going for numbers – of students, teachers, subjects...and confusing pace for progress.”

Although federal policy calls for diffusion of FLHE across all subjects, the National Council on Education has identified certain subjects as most important: social studies, science, health and physical education, and home economics. As of January 2013, it appears that many states are in fact focusing on those four as “carrier subjects” for FLHE implementation.

¹³ The decision to implement the curriculum initially in junior secondary schools (similar to grades 7–9 in the United States, with students mostly in the 11–16 year old age range, with some younger and older) in order to reach young people as they are going through puberty and, for most, before they become sexually active.

CURRICULUM CONTENT

Our content review focused on documenting how the FLHE curriculum addresses issues of sexual health (including prevention of unintended pregnancy and STIs/HIV) and of gender.¹⁴

Weak on Sexual Health

Initially approved at the national level as Comprehensive Sexuality Education, it included accurate and meaningful content not only on contraception, but also on other topics—sexual abuse, gender roles, female genital mutilation, sexual orientation, masturbation, and abortion—related to young people's sexual health and rights. The curriculum also provided information in a neutral manner about religious perspectives on these issues.

Conservative opposition to sexuality education—often using religious arguments—grew vociferous, culminating in a series of changes to the program. The name of the program shifted to Family Life and HIV Education and the goal statement was modified. In the same vein, the framing language shifted, the explicit reference to sexuality was deleted, and additional language about HIV was inserted, with a focus on abstinence as the best way to prevent sexual transmission. Importantly, content about contraception, abortion, masturbation, and sexual orientation was largely deleted from the curriculum for use in junior secondary schools, the locus of implementation. At the same time, the content was made “nonexaminable,” in other words, students would not be formally tested on it.

Advocates of the original program understood that these revisions reduced the potential of the curriculum to have a beneficial impact. As one NGO leader (from a conservative state) explained, “Along the line, we lost the meaning. Maybe in the process of trying to convince people to accept [the program] . . . maybe it was not deliberate, but somewhere along the line, comprehensive sexuality education became about HIV only.”

Specific information and messages about sexuality and sexual health found in the FLHE curriculum includes:

Sexuality: Sexuality is included under the theme of “Good Grooming.” One objective is to enable students to “define the term sexuality” and “enumerate ways of expressing sexuality,” as well as to identify sources of “sexuality information.”

Preventing Unintended Pregnancy: FLHE content emphasizes “avoiding teenage pregnancy” and refers to the “safe age for reproduction.” However, information about contraception is essentially absent. Messages are rooted in teaching young people to avoid sexual relationships.

HIV Prevention: Learning objectives are limited to conventional technical aspects, such as asking students to “explain the meaning of HIV/AIDS,” “list the signs and symptoms,” “identify the modes of transmission,” and “list four ways of preventing HIV transmission.” Specific prevention information, along with avoiding sexual relationships, includes “avoid[ing] use of unscreened blood, injection needles and clippers.” The topic of vulnerability is absent; nor is there mention of preventing stigma and discrimination, as there had been in earlier versions of the FLHE curriculum.

14 Curricula for the four junior secondary school subjects (social studies, basic science, physical and health education, and home economics) into which FLHE topics have been integrated and dated 2006 were reviewed. It should be noted that FLHE curriculum is essentially a framework; each state was expected to build on the framework to develop its own “scheme of work.”



Stronger on Gender

Although content about contraception and sexuality was lost from the curriculum, attention to gender has been maintained. For example, advocates were able to ensure that a reference to the Millennium Development Goals (MDGs) was added to the framing language for the curriculum, explicitly identifying gender issues as an important emerging topic being addressed in FLHE. Additionally, NGOs and the federal government collaborated on the development of a digital version of the curriculum, which has several elements—including content for parents and content on gender and reproductive health—not in the standard curriculum.¹⁵

The review found that overall, the FLHE curricula are gender-blind. Some critical topics are entirely missing, presented in ways that mask their gendered nature, or lacking in detail. Nonetheless, a number of issues affecting girls are mentioned, in varying degrees of depth and consistency.

Gender-related content is summarized below:

Gender Norms: There is little explicit mention of gender, and the differences in the experiences of boys and girls are not discussed. Content messages about STIs, HIV, and AIDS do not address how gender norms shape vulnerability to infection. One specific mention of gender is in the Physical and Health Education curriculum, which calls for a discussion of “gender participation in sports,” as well as “misconceptions about femininity and sports.” Suggested activities include showing films of female athletes participating in high-profile competitions and listing the value of female participation in sports. According to the performance objectives,

¹⁵ There is also a companion DVD with an instructional video for teachers on how to use the e-FLHE curriculum; however, most informants reported that e-FLHE is still not being widely used within schools, as many facilities lack electricity and/or working computers and many teachers lack basic technology skills. For this reason, this report focuses on the curriculum as delivered in class by teachers.

students should be able to “define gender” and “state reasons why female participation in sports in Nigeria is low.” The theme emphasizes the importance of asserting “self esteem and confidence during competition.” There is no mention, however, of discrimination against girls in school or—other than the treatment of athletic participation—in access to public space.

Early Marriage: Early marriage enters the curricula in more than one subject area. In the Social Studies curriculum, the marriage section stresses the “problems associated with not being ready for marriage.” While it falls short of specifically naming early or forced marriage, another subject area does. Under the topic of marriage in Home Economics, one objective is that students can explain factors to consider before marriage, and asks them to identify and discuss the “disadvantages of early marriage.”

Female Genital Mutilation/Harmful Traditional Practices: In Physical and Health Education, students are expected to be able to “explain the meaning,” “identify three types,” and discuss the “health implications” of Female Genital Mutilation (FGM). They also are asked to “narrate their own or others [sic] experiences.” The Social Studies curriculum asks students to list different types and analyze the consequences of harmful traditional practices, as well as focusing on the need to “describe measures that could be taken to eradicate these practices in Nigeria.”

Sexual Coercion, Abuse and Gender Violence: In introducing the curricula, “misuse and abuse” is named as an “emerging issue.” Child abuse types are identified as “physical, psychological, economical and sexual,” and students are expected to be able to discuss consequences and solutions. In several places, the curricula stress the importance of developing “assertive communication and refusal skills,” and one lesson specifically says that students should be able to demonstrate how to refuse unwanted sex, as well as drug use. Domestic violence gets a brief mention under “The Home,” with the objective that the students can “explain the meaning;” however, scant information is provided to help them to do so.

Trafficking in Persons: The objectives of a session on human trafficking within Physical and Health Education are to “explain the meaning of human trafficking, identify groups of human trafficking victims, mention the health implications, and suggest solutions.” The curriculum, however, provides little content for teachers to use to address these questions. In another subject area, students learn about the “meaning,” “factors,” and “consequences” of trafficking, as well as such preventive measures as “public enlightenment, education, advocacy and legislation.”

Human Rights: Content on human rights and violations asks students to enumerate the fundamental rights of “every Nigerian person,” as well as list the rights of the child and the rights of women. Suggested materials include UN and UNICEF publications, but without specific references.

Assertiveness and Communication Skills: In several places in the curricula, students are encouraged to “demonstrate self esteem,” and/or “acquire assertive communication and refusal skills.” While not explicitly directed to girls, the experience in the classroom suggests that girls are getting the message that they can and should be able to feel confident, to assert themselves, to complain about harassment and abuse, and to refuse unwanted sex.

Menstrual Management: A unit on “Good Grooming” includes a section on puberty, which contains information on menstrual hygiene—an important, yet often neglected, topic in the school setting, despite the fact that menstruation management has been shown to affect girls’ engagement at school. Difficulties associated with menstruation may also affect their attendance, although findings are mixed about the degree of this effect and the pathways by which it happens (Sumpter and Torondel 2013; Sommer 2010; House et al. 2012; Grant et al. 2013).

TEACHER TRAINING

Education about gender, the human body, and sexual decision-making involves academic, social, and emotional learning;¹⁶ as such, implementing FLHE required that teachers not only acquire new knowledge, but also a range of pedagogic and personal skills. Action Health Incorporated (AHI) and its partners involved in the development of the program from its earliest stages recognized that a challenge for educators would be to develop facility with student-centered learning methods, as well as comfort teaching about gender equality and sexuality. Admittedly, this is an ambitious task: Given the conventional education systems that still prevail in most settings, as well as severe time and resource constraints, few teachers have adequate training in these methods and content areas. Indeed, strengthening teachers' capacity to build young people's developmental assets and engaging them in meaningful ways has been identified as an urgent priority for improving sexuality education (UNESCO 2009; UNFPA 2011; UNFPA 2012).

“Teachers need the opportunity to clarify their own values; that takes time but enhances self-awareness and ultimately makes them better sexuality educators.”

ADENIKE ESIET, ACTION HEALTH INCORPORATED

Cognizant that teachers are the foundation of program success, the government and its NGO partners (especially AHI) invested in an unusually high-quality in-service training program. The plan was for 10 residential days—far beyond the norm, especially for public sector programs.¹⁷ Teachers had adequate time to acquire new skills and knowledge, as well as to reflect about their attitudes. As Adenike Esiet of AHI explained, “Teachers need the opportunity to clarify their own values; that takes time but enhances self-awareness and ultimately makes them better sexuality educators.”

A key challenge was helping teachers develop competency with the pedagogic methods needed for effective implementation of the FLHE curriculum. One NGO partner explained, “In terms of methods, we use interactive methods and stories . . . for example, role-play, exercises, and card-games. We try to debunk the concept of lecture and writing on the board.” In addition to teaching new approaches,

16 Scholars suggest that school-based interventions to reduce risk behaviors must address students' social and emotional skills, through instruction that is personally engaging and meaningful and is delivered in the context of supportive relationships See: <http://casel.org/why-it-matters/what-is-sel/>. In a similar vein, educational theorist Robert Pianta (1999) argues that “the substrate of classroom life is social and emotional!”

17 The duration of training programs to prepare teachers in FLHE, HIV, or sexuality education varies widely. For example, field reports document trainings of 6–8 days in Ivory Coast (primary school), South Africa, and Kenya, 4–5 days in Uganda; and Burkina Faso; three days in Ivory Coast (secondary school) and Namibia; two days in Guinea; and only one day in Guyana (Tiendrebéogo et al 2003; Ahmed et al 2006; Education International 2007). These durations are approximate, as they have been roughly converted from number of hours, to conform to the Nigerian program, which is generally characterized by the number of days. Dlamini et al (2012) also note the more robust duration of the FLHE training, characterizing such trainings as more commonly lasting five days.



the workshop culminated in a two-day classroom-based practicum.¹⁸ The practicum was viewed as an essential input to consolidate and assess teachers' facility with interactive teaching methods. Moreover, at least some states included plans for follow-up technical assistance and refresher training. The training also was on strong footing in terms of content. Thanks to NGO advocacy efforts, topics such as contraception and abortion, which were eliminated from the FLHE curriculum, remained in the teacher training. The training also emphasized learning about gender issues, which are a strong predictor of sexual health outcomes and of the outcomes of sexuality education (Haberland 2015). The teachers also received guidelines (developed by AHI) to reinforce information about these topics once they went home, or even for sharing with parents. An NGO leader from a conservative state reflected on the process of strengthening the training:

We sensitized religious and traditional stakeholders on gender equality to eventually bring gender back into the trainings.... When the program became generally accepted, the contraception and gender content was put back into manuals for teachers.

18 AHI trained master trainers in each state; typically, staff from each state Ministry of Education and from the local partnering NGO participated in this training-of-trainers. In a step-down plan, the state teams subsequently trained two teachers from each school, who in turn became responsible for training their fellow teachers.

Thanks to NGO advocacy efforts, topics such as contraception and abortion remained in the teacher training.

Teachers therefore would be reasonably prepared to respond to individual student questions about such topics. Moreover, at least in the four states visited, earlier advocacy had created political space for the partnering NGOs to deepen the gender, contraception, and human rights elements in the training.¹⁹ For example, in Cross River State, the training included a unit on harmful traditional practices, infused a gender perspective into such topics as rape, and significantly expanded the content on sexuality and on gender equality. Edo State also added particular stress on the issue of trafficking of girls. Ultimately, the 10-day residential training included four modules:

- 1 Reproductive Health (e.g., anatomy, puberty, contraception, hygiene, nutrition)
- 2 Relationships, Sexuality, and STIs (including friendship, dating, sexuality, sexual abuse, HIV, adolescent pregnancy/abortion, and abstinence);
- 3 Life Skills (goal-setting, communication, negotiation, decision-making, and conflict resolution);
- 4 General Issues (e.g., drug abuse prevention, counseling of adolescents, gender issues, and FLHE program management topics).

After the initial training of “master trainers,” carried out by the Federal MOE and AHI, the state teams began rolling out the training among teachers of social studies and science in junior secondary schools.²⁰

19 The teachers' appreciation of the NGO trainers was striking, and at sites where the trainer accompanied us to the school, the warmth of those relationships was immediately evident.

20 According to the Federal Ministry of Education, some upper primary and junior secondary level teachers --in both public and private (often religious) schools-- have also been trained.

Effects of Teacher Training on the Program

One question behind this review was the potential of Family Life and HIV Education (FLHE)—and sexuality education in general—to promote gender equality, as well as improve aspects of education. To that end, this report—based on both a formal case study on how gender-focused training affected FLHE teachers (Wood et al. 2015), and a less formal but rather comprehensive program review—seeks to identify whether any of the program inputs translated into outputs that may be markers toward achieving such outcomes.²¹ In approaching this question, the main unit of inquiry is at the level of teachers and the classroom. This is for several reasons. First, especially for curricula that address topics like sexuality and gender, teachers' own values inevitably permeate the educational experience. Second, in the case of FLHE, the content on gender and critical thinking is considerably more concentrated in the teacher training than in the formal classroom curriculum; hence, it is logical that changing teacher attitudes through the training is a key pathway to achieving social and educational outcomes. Indeed, evidence suggests that classroom culture—or what has been called the “informal curriculum”—is critical to students' learning outcomes.²²

Perhaps the most striking finding was the number of teachers who spoke passionately about girls' rights to know about—and control—their own bodies.

Teachers were anxious to express how meaningful the training had been for them. Perhaps the most striking finding from the study was the number of teachers who spoke passionately about girls' rights to know about—and control—their own bodies, and expressed commitment to expanding girls' equality and opportunities. Teachers reported increased knowledge about the topic areas, increased comfort discussing sexuality, greater sensitivity to gender issues, and improved pedagogic skills. They also repeatedly shared that what they had learned had affected their own lives, as well as their capacity and commitment to engage students on these issues. Teachers and Ministry of Education (MOE) officials alike reported that the expertise of the NGOs was critical in advancing teachers' capacity in these areas.

21 Rigorous studies to understand the effects that gender-focused curricula may have on such outcomes as gender norms, sexual coercion, age of marriage, sexual and reproductive health, school safety, girls' schooling, and school connectedness are sorely needed.

22 See, for example, World Values Survey analyses showing that the classroom culture is more important than content for fostering support of democracy (Pettersson 2003).

The following sections discuss the perceived benefits of the training.

INCREASED KNOWLEDGE AND COMFORT WITH SEXUALITY

The teachers who arrived for training typically had little to no background in the core content. For example, few were familiar with basic reproductive anatomy and physiology. According to one informant, some teachers had been misleading students and spreading fear-based myths, for example, telling them that an STI was “punishment from God.” As Bene Madunagu, Director of Girls’ Power Initiative (GPI), Cross River State’s NGO partner explains, “They cannot even say the word ‘sexuality’ when they arrive.”

Many teachers expressed significant changes in their attitudes:

[The change is] for me to be bold. I used to call it private parts. Now I call it the name: penis, vagina, vulva.

FEMALE TEACHER, CROSS RIVER

It is the way that you present it. Any topic can be talked about, for example, the vagina: “when you get home, take a mirror and look at it. It’s your body. Look at it.”

FEMALE TEACHER, LAGOS

We see the importance of knowing about and talking about their sexuality. That barrier has been broken.... When they can talk about it, they can learn to protect themselves.

FEMALE TEACHER, LAGOS

I learned that boys and girls socializing with each other does not mean they have to have sex.

FEMALE TEACHER, ENUGU

They now know that when they see their relatives, when they see the village chiefs, now they know sometimes they will [risk] abuse. The girls now know that some man might have plans, even relatives. If they come with gifts, tell the parents about the gifts.

FEMALE TEACHER, ENUGU

A clear example of the effect of the training was observing that some teachers are going beyond the curricular content. In states where feminist NGOs have played a key role in FLHE training and support, some teachers explained that they provide information on contraception either in the classroom and/or in response to students who approach them.²³ In some cases, this is because teachers have girl students who are older than the average age for the grade level—a common situation because poverty and gender discrimination delay school advancement for girls. As one NGO staff person explained, “I think that teachers have begun teaching about condoms with older kids. They see girls dropping out because of pregnancy. They see girls who are older but are still in junior secondary school.”

23 In Edo and Cross River States, GPI distributes to teachers copies of It’s All One Curriculum (ISHCWG 2009, 2011), an international resource for developing rights-based, gender-focused sexuality/HIV curricula, with a pedagogical emphasis on methods to foster critical thinking and meaningful reflection about these topics, which GPI had helped to develop. [IWHC was a member of the International Working Group convened by the Population Council to create this resource.]

In other cases, students either ask direct questions in class (for example, “What is a condom? How does it work?”), or approach their teachers outside of class. Teachers explained that students particularly want information from them about the fertile days of the menstrual cycle, about sexuality, and about where to seek contraceptive and STI services. While the formal curriculum does not offer students this information, many students are receiving accurate information through the “informal” curriculum, because of what teachers have taken away from their training and the facilitating NGOs.

INCREASED CRITICAL CONSCIOUSNESS ABOUT GENDER NORMS

In the states visited, the implementing NGOs had established strong working relationships with their MOE partners; working together, they engaged teachers in reflecting about gender issues in their own lives, the lives of their students, and Nigerian society more broadly. An MOE official at Lagos State characterized the gender module of the teacher training as “the most interesting session,” adding:

Before, only boys cleaned the blackboards, the girls swept the floors. Now, boys also sweep floors and girls also clean blackboards. This is the result of FLHE.



The NGO trainers reflected on how the training program empowered teachers to breathe life and depth into the formal curriculum. One NGO leader from a conservative state explained, “FLHE has been useful for raising the issue of early marriage. [It is possible to] talk about consequences of girls not staying in school; that they are not yet fully mature and are without information; [to say] ‘be patient’ and allow the person to finish secondary school.”

Teachers themselves spoke readily about how much more sensitive they became to gender issues as a direct result of the training:

[The students] learn about the difference between sex and gender. We talk to students about roles and not feeling confined. Now we have been able to tell them that anything you are good at, you can achieve. The girls find that so interesting. They like to learn about self-esteem.

FEMALE TEACHER, LAGOS

[Useful skills for girls are] negotiation, assertiveness, communication. To use the “I statement.” To be emphatic and say it and mean it, and say it with your bodies.

FEMALE TEACHER, LAGOS

At mixed schools, boys talk more at first, but then you can bring girls out.

FEMALE TEACHER, LAGOS

[Being a boy, being a girl] has nothing to do with what it means to be a human being.... Boys can help at home with cooking. Even if girls cook, boys can help. Before only boys would play football, but girls can play too.

MALE TEACHER, CROSS RIVER

Actually I opposed [female genital mutilation] before, but the training helped me to go forward, to be a voice [against it].

MALE TEACHER, CROSS RIVER

FLHE gives them confidence that woman can equally do what man can do. They can easily walk into society and socialize more easily. They have more confidence, less fear.

FEMALE TEACHER, ENUGU

Classroom visits allowed observation of the application of these training investments in teachers' sensitivity to gender issues. In several states, girls sang about their bodies belonging to them. In one state, students were observed learning about sexual harassment, child labor, and harmful cultural practices such as child marriage, female genital mutilation, widowhood practices, and scarification. The teacher also explained to the students that “boys and girls have equal rights,” including that women can be doctors, mechanics, engineers, and bishops.

SAFE SCHOOLS

Sexual harassment and coercion, including by teachers, are serious problems in many schools, and often students do not feel safe and confident to speak up. Lloyd and colleagues (2000) identified sexual harassment as an element of school quality that influences a girl's educational outcomes. In the schools visited, none of the principals or teachers reported having proactive policies to ensure a safe environment; most of the principals confirmed, however, that there is some type of policy for responding to sexual abuse cases.

Notably, perhaps the greatest progress is that students see schools as a safe space to report abuse and that some schools now turn to the NGO that trained them for assistance when confronted with a situation of abuse. For example, Grace Osakue reported that school principals have turned to GPI Edo State to intervene in such situations. Osakue commented:

The last call we responded to involved a victim who went to her principal and demanded to be returned to her parents. We were called in and found it was a case of trafficking. We brought in NAPTIP²⁴, returned the girl to her parents, and saw to it that she is registered in school. [Another time], a principal called us in a case of sexual abuse by a girl's brother-in-law who was her guardian, after the girl confided in her teacher. In addition to counseling, we saw to her relocation from the home.

Several teachers commented on how they grapple with these issues:

One time we had to call Action Health because the abuse was the father and the mother was 'late' (dead).

FEMALE TEACHER, LAGOS

There was a case of gang rape, which we also referred to Action Health.

FEMALE TEACHER, LAGOS

We do talk about harassment, about 'high risk behaviors,' and which part might be their fault.

FEMALE TEACHER, LAGOS

Some of the students have exposed what happened to them. And sometimes it happened to us, when we were small.

FEMALE TEACHER, ENUGU

24 NAPTIP is Nigeria's National Agency for Prohibition of Traffic in Persons and other Related Matters

Babatundi Ahonsi, who has had a long-term involvement with FLHE (first as a donor with the Ford Foundation in Nigeria and then as Director of the Population Council Nigeria office), commented on normative change in this area:

The curriculum has provided an opening for engaging on these issues. For girls at least, it has given them the notion that this [harassment] is violence and not acceptable. Even for boys, it's the first time they are really seeing it as violence. It has stimulated conversation and problematized issues that were seen as normal or acceptable before.

STRENGTHENED PEDAGOGY

Teachers who arrived for FLHE training generally lacked experience with participatory teaching approaches that are central to effective sexuality education. Ndodeye Bassey from GPI Cross River explains, "The methods we use are completely different from how they are trained to teach."

More Participatory Teaching Methods

The topics in the FLHE require a sharp departure in pedagogy for most teachers, and this shift is an important part of what makes FLHE a meaningful intervention for education.²⁵ Teachers confirmed that the interactive methods were new for them and that they appreciated learning these teaching approaches, especially those that they can use with large classes and in constrained time periods. Among their comments were the following:

Before the training [teachers] used the lecture method. But since [the training, they are] using the participatory methods. They have more interaction with the students, which encourages their participation. Students like it now. They are happier.

FEMALE TEACHER, LAGOS

In FLHE we do what is called facilitation; as the teacher you let children contribute and most of the discussion is made by the students, unlike other classrooms where the teacher pours out everything.

FEMALE TEACHER, CROSS RIVER

Of course, teachers face challenges in trying to implement new approaches. One huge frustration is the lack of teaching materials.²⁶ Another challenge is class size. Adenike Esiet of Action Health Incorporated (AHI) confirms that class size is a challenge for participatory and student-centered pedagogy:

Teachers are in classrooms with as many as 100 students, sometimes more. But we instituted a process for teachers to come together and reflect on how to use participatory methods with big classes. It is challenging but it is worth it.

25 In a program evaluation in Edo state, Arnold et al. (2012) found that Youth Corps members using participatory approaches in the classroom (e.g. drama and debates, as well as question boxes to answer anonymous questions) were appreciated by students and may have contributed to greater program effects compared to the effects of the program delivered by teachers using less participatory methods.

26 Dlamini et al. (2012) similarly found that FLHE teachers in Edo state reported a lack of pedagogical resources to foster student classroom participation, behavior change, and empowerment, especially of girls.

During classroom observations of FLHE lessons, students were observed singing, using flash cards, enacting role-plays, and brainstorming. These sessions varied in their degree of student engagement, but tended to be quite interactive. In several states, the students sang a spinoff of the stretching song “Heads, Shoulders, Knees, and Toes/Eyes and Ears and Mouth and Nose...”). In the girls’ schools, they sang “Heads, Breasts, Vulva, and Toes/They all belong to me.” (In the co-ed schools, they sang “Head, Shoulders, Genitals, and Feet...”) They stretched and pointed to each body part as they sang about it. Teachers also described using games, drawing, and other activities. Importantly, a number of teachers reported that they have begun using more participatory approaches across their teaching, that is, even outside of FLHE topics.

Greater Emphasis on Critical Thinking Skills

Critical thinking is essential for changing attitudes about gender and rights. Yet this remains a missing piece from many sexuality education programs, even those that try (more didactically) to address gender topics. The early FLHE training sought to build teachers’ capacity to engage students in inquiry-based learning, e.g. posing questions, seeking evidence, problem-solving, and analyzing how the wider social context affects their own lives. As Esiet of AHI explained, integrating students’ life experiences into teaching is not that hard. Several teachers reported that FLHE had offered them

“You can’t come to FLHE training and go home the same.”

NDODEYE BASSEY, GIRLS’ POWER INITIATIVE

not only an opportunity, but also concrete tools to reflect about what it means to be male and female, notions of power in intimate relationships, and assumptions about gender equality. Dr. Ezinwa Ebele Uzuegbanam, who was responsible for the FLHE program within the Federal MOE, confirms that critical thinking pedagogy is a goal unto itself; indeed, she reports that the MOE aims to track progress on this independent outcome.

Such higher-order thinking skills have benefits beyond the FLHE curriculum; they also apply to science, literary analysis, social studies, etc. As such, the critical thinking elements of FLHE, even if they are quite modest, can enhance education overall. Moreover, critical thinking skills lay a foundation for meaningful citizenship across one’s lifetime.

TEACHERS AS AGENTS OF CHANGE

Teachers explained that becoming so invested in changing their students' attitudes and expectations mirrors a change in themselves. Ndodeye Bassey from GPI Cross River, emphasizes that educators often raise personal issues even during the training:

At the end [of a training for principals], two male and two female principals came up to me. The females had problems with their husbands: One complained that her husband [forces his finger into her vagina] all the time; the other said she grabs her bible and runs to church [to escape her husband's demands for sex].

Most FLHE teachers interviewed were quick to express pride in what they had learned and were applying not only in the classroom, but also in their personal lives.

It affected my self-esteem as well. My family is happy, they see the change.

FEMALE TEACHER, CROSS RIVER

Wherever I go, people come with questions: To give talks at church on women's health issues, what is a woman, etc.

FEMALE TEACHER, CROSS RIVER

This FLHE has become part of me, even in the market, even in church.

FEMALE TEACHER, CROSS RIVER

Now I can talk to all of Nigeria about HIV/AIDS, anatomy and physiology, to my family. I know how to handle people now.

MINISTRY OF EDUCATION DESK OFFICER, ENUGU

Knowledge is power. You can't give what you don't have . . . I'm free now, unlike before. I can now teach any of the topics comfortably, unlike before.

FEMALE TEACHER, ENUGU

After passing through training, I [am] a little bit careful that something I say would not hurt my partner.

MALE TEACHER, CROSS RIVER

Assertiveness was not part of my life. But you have the right to say yes, you have the right to say no. And you have to state your reason why. I teach this in the case of my own children, too.

FEMALE TEACHER, CROSS RIVER

An NGO leader shared that teachers call him to say, "I've reviewed my whole life based on what I learned in this training." As Ndodeye Bassey, an NGO leader and trainer in Cross River, reflects: "You can't come to FLHE training and go home the same."

Indeed, given that teachers' own values typically permeate the learning experience—becoming part of the “informal curriculum”—generating such personally meaningful attitudinal change among teachers is important. Furthermore, because teachers receive low salaries and work under difficult conditions (e.g., often without electricity, lacking supplies, and with huge classes), providing them with the opportunity to develop personally and professionally can contribute to their job satisfaction.



Insights From Students

Transforming teachers may be emerging as the *sine qua non* for effective sexuality education or life skill programs, but the ultimate “clients” are the students. That said, this review could not measure outcomes at the level of the student. As explained above, the formal case study looked at apparent effects on teachers, as well as the role of NGOs in training and supporting them. Nonetheless, conversations with students in the larger review shed light on their attitudes about whether the Family Life and HIV Education (FLHE) is making a difference in the lives of young people, especially girls.

At all eight schools visited, we talked with students (mostly in small groups) about what they were learning from FLHE and how they felt about the program. By and large, their responses echoed the topics that had motivated teachers: comfort with one’s body, gender equality, greater connectedness to their teachers (a variable for academic outcomes and remaining in school), and greater commitment to avoiding early marriage. As with changes among the teachers, these categories are interrelated, but whereas the interview with teachers were part of a formal study, the conversations with students were informal and thus are presented separately here.

AWARENESS OF SEXUAL AND REPRODUCTIVE HEALTH AND SEXUALITY

Quantitative FLHE evaluation data have documented the increase in students’ knowledge about their bodies, as well as their confidence to refuse unwanted sex. Across the four states, girls echoed comments similar to those below:

FLHE taught me to abstain from sex.

FLHE taught us how to take care of ourselves.

We talk to our friends, our sisters, and our parents about what we learn about our bodies. We don't feel shy anymore.

I asked our teacher about [sexual orientation], boys who follow boys and girls who are attracted to girls.

We learned to avoid pregnancy.

TOWARD GENDER EQUALITY

Gender norms are deeply entrenched, and all the more powerful because they are unquestioned and taken as natural, so any change is indicative of an opening, as an old logic comes under strain. It was therefore notable how frequently girls in different states spoke often of developing more assertiveness and of their rights vis-à-vis boys. For example:

We learned to stay in school, and we learned to avoid early marriage.

FLHE made me be self-attentive and self-assertive.

I learned we can express ourselves and take the roles of men.

As a girl, when setting goals, I must not be afraid . . . My goal is to be a lawyer. I chose that because I see how the poor are being deprived of rights.

It was particularly intriguing to watch girls apply these concepts to other issues that affect their lives. For example, four 13-year-old girls in Enugu were asked about who should hold power in the home (a topic they said had not been discussed in FLHE). Three explained that this power rightfully belonged to the man, who was “the master of the house,” by reason of his having paid a bride price—what they had been taught since childhood. One girl, however, disagreed, saying: “Thinking about it, it’s not right. [If he has all the power] he might maltreat the woman.” While the girls had not all transformed their views about family roles, it was impressive that the four of them easily fell into a lively discussion about this topic, with one ready to challenge the conventional norm.

We also asked boys in Lagos about their view about girls, and whether their ideas had changed due to FLHE. Typical comments included the following:

[Girls] can be whatever they want to be...

They should keep away from sugar daddies.

SCHOOL CONNECTEDNESS

The factors leading young people, particularly girls, to exit school early are largely rooted in poverty. Nonetheless, young people’s sense of connectedness to their teachers and to school has also been shown to be a protective factor for multiple outcomes. One is continued schooling. Lloyd and colleagues (2000) found that girls who attend schools where they are treated more equitably with regard to personal support, academic encouragement, and safety (e.g., protection from sexual harassment) are considerably more likely to stay enrolled. School connectedness is also linked to delaying sexual debut (CDC 2009). For example, a study conducted among secondary students in Plateau State found that a lower sense of connectedness to school raised the odds of their having had intercourse; the authors suggest that promoting students’ sense of school connectedness could help to reduce risky sexual behavior among Nigerian youth (Slap et al. 2003).

Lagos State Ministry of Education (MOE) staff who are deeply involved in the FLHE have observed: “The teachers and students have become closer, and the students approach the teachers as their counselors.” Furthermore, reports from teachers and students suggest that girl students are even more engaged in FLHE and becoming more connected to the teachers than the boys. For examples, girls in Cross River and Lagos reported:

If someone tries to pressure me, I would talk to my parents or my teacher.

The boys sometimes stay out of class when FLHE is taught. They (the boys) are not changing.

Some do enjoy it. One boy told me he likes it.

In a similar vein, asked about student connectedness, teachers provided examples, often involving female students:

My students come to me for counseling. For example, some who live with their aunt (not their mother), they have their menses. They may request money to buy pads. It is only 1.50 naira/pad, so I give them money to buy a pad.

FEMALE TEACHER, ENUGU

When a girl has a stained dress, she might be menstruating the first time. We take her and clean the dress and help her.

FEMALE TEACHER, LAGOS

Some girls ask me about their breasts.

FEMALE TEACHER, LAGOS

Certain topics interest them. When I talked about STIs and HIV, they asked a lot of questions.

FEMALE TEACHER, LAGOS

The students enjoy the FLHE lessons; they want it to continue.

FEMALE TEACHER, ENUGU

They don't want to miss classes anymore; they think there might be FLHE topics. They like FLHE and want to participate, for example, they want to do the acting. They like both the topics and also the teaching methods. FLHE has brought us even closer to them.

FEMALE TEACHER, LAGOS

Indeed, at several schools, teachers cited evidence of better attendance during FLHE lessons, as well as more active involvement in classroom life. According to Lamidi Abiodun, Chief Education Officer of the Lagos State MOE, the program's success rests on the commitment of teachers to FLHE and to their students:

The students want to come to school because it boils down to the teacher. Having a better teacher and having student interest has a big impact in student learning and the desire to stay in school. It is reflected in their academic performance.

Improving academic performance is not a goal of FLHE. Nevertheless, MOE officials, principals, teachers, and students reinforced the message that students—especially girl students—are more connected and more engaged as a result of the program. This finding raises compelling questions about how much effect a program might have on girls' performance and continuation in school if it were explicitly designed with that goal in mind.

Discussion and Ongoing Challenges

The Family Life and HIV Education (FLHE) curriculum is a study in compromise. Even when key topics were deleted from the curriculum, advocates carried on with the essential work of building support for implementation among parents and community leaders, including religious leaders. In addition to ideological obstacles, informants described several current challenges in implementing FLHE and in maintaining support for a high level of quality.



STRUCTURAL CONSTRAINTS

One obvious challenge stems from operating within impoverished education systems. Background structural factors related to poverty and a lack of resources in the education sector in general form the larger, very complex context for FLHE. Teachers described some of the most salient constraints affecting them:

- Lack of functioning computers/reliable electricity to implement the e-curriculum: Even where computers are available, some teachers reported that they have no idea how to use a computer.
- Large class size: Some classrooms have 100 or more students. This kind of crowding makes meaningful teaching far more challenging, even for skilled teachers.
- Lack of teaching supplies. Teachers complained that they have to fashion their own teaching posters and cut up paper for handmade flash cards. Indeed, in one class, the teacher used a rotating series of posters she had created on the back of a calendar large enough for students in the back of the class to see it. However, because there was no way for her to mount the “posters,” her hands were not free and her face was partially blocked by the posters. Teachers who are selected to train other teachers report that they also lack the materials, equipment, and adequate facilities for training.
- Uncomfortable conditions for training teachers. Teachers talked about situations in which the only available space for teacher training was a primary school classroom with very small chairs, in which the teachers had to sit for the entire duration of the training.
- High teacher turnover, partly a function of low salaries.

The constraints also affect students directly in various other ways:

- Lack of connection to health services and an absence of quality, affordable sexual and reproductive health services that students can access.
- Lack of bathrooms for girls to manage their menstruation. This was a common complaint, and students and teachers said they addressed the problem in various ways. One student said she went to her principal's house nearby, and a teacher mentioned that she helps girls access sanitary napkins.
- Cost of schooling. Even in public schools students must pay fees or levies to attend school and pay for supplies and a school uniform.
- Lack of access to transportation when students live long distances from the school.
- Competing priorities such as the need to attend to household chores, participate in the family business/farm, or other work.

TRAINING ENOUGH TEACHERS

Aside from resources, coverage is a challenge in a country the size of Nigeria. Indeed, the scale-up of FLHE remains far from complete, with uneven participation from state to state. While 17,000 teachers have been trained, according to the Federal Ministry of Education (MOE), teacher turnover is a significant

problem and refresher training is rare to nonexistent.²⁷ Teachers, NGO trainers, and state-level MOE officials also spoke about their frustration that they do not have more opportunity to provide ongoing support to strengthen teachers' skills. Teachers value any ongoing support that NGOs provide, but wish they could participate in refresher trainings and benefit from more in-classroom monitoring.

Key actors involved in FLHE rollout have responded to challenges of resource constraints and the lack of sustainability in two main ways: instituting pre-service training for future teachers, and reducing the duration of the in-training for current teachers.

Pre-Service Training

Concerns about teacher turnover and program sustainability led to a decision to integrate FLHE training into the country's 112 teacher training colleges, which are overseen by the National Commission for Colleges of Education (NCCE). Action Health Incorporated (AHI) helped develop a special curriculum—called Family Life and Emerging Health Issues Education, (FLEHI)—for preparing future teachers. Currently, FLEHI is a required one-term core course in the first year of teacher training, although implementation is uneven.

FLEHI is designed to meet for two hours per week and to include five themes:

- Human development (human reproduction, puberty/body image, sexual identity);
- Relationships (family, friendship, dating, marriage);
- Personal skills (values, communication, finding help);
- Sexual health (contraception/safer sex, abortion, sexual abuse/behaviors, STI/HIV, health-promoting behavior);
- Sexuality, society, and culture (gender roles/diversity, law, religion, arts and media)

According to Modupe Olokun, Chief Planning Officer at NCCE, some of these topics (e.g., contraception) were included only after NCCE and AHI advocated for their importance. FLEHI is the main course in which these future teachers learn about gender equality. Lecturers at the Federal College of Education-Akoka in Lagos described themselves as committed FLHE stakeholders and reflected on how the training they had received (either from AHI or from fellow lecturers who had already been trained) had changed their approach to teaching sexuality education:

I thought before that any of us could teach anything related to sexuality education. Then I realized that issues of love, sex, and relationships [are complicated]. Now I have a better understanding.

MALE LECTURER

Because of religious issues, I found it very difficult to discuss sexuality issues openly. The training changed that.

MALE LECTURER

²⁷ Mr. Ibrahim Suleiman, Director of Social Mobilization at the Universal Basic Education Commission (UBEC), reported that at the present time, UBEC provides each state with 140 million Naira for in-service training to keep them abreast of subject areas; although UBEC could tell states to include FLHE in this refresher training, in general the states decide how to allocate this funding. UBEC hopes to introduce cluster training with continuous monitoring rather than one-off trainings. In any case, teachers reported that they were not receiving refresher training in any subject areas.

Asked about the topics they felt were particularly important, the lecturers replied:

Teaching precautions to not get infections. When I teach this and see changes in students, I feel happy. At first, they did not talk to us or want to use condoms. After the course, they do.

MALE LECTURER

You have to let them know that females carry perceptions of who they are, they have been taught they are second-class citizens, not to speak, to be deprived of opportunities. The males who want to continue oppressing them, you have to teach them.

FEMALE LECTURER

The college lecturers also reported that FLEHI provided a vehicle for teaching wider pedagogies:

As lecturers/facilitators, we believe in demonstration, interaction, and inquiry. The students are learning this from us, so they can demonstrate when they go out.

MALE LECTURER

We know that teaching encompasses methodologies. And this is a skill-oriented course. Inquiry, simulations; inquiry must be important, but we have only one hour. This is a time constraint.

FEMALE LECTURER

In interviews, the education students themselves reported that the FLEHI course is useful to them both as young adults in their own lives and as future teachers.

I learned about vagina, breasts [that] were never called by name. Before I had been told 'don't touch'... I should not be able to touch myself. When I started menstruation, I didn't know anything.

FEMALE STUDENT

I had been taught that male children to take certain courses of study. It should be balanced. We are all equal.

MALE STUDENT

Several students noted that the course was too short. Students and lecturers say that they would like to see the addition of an advanced course for those who expect to teach FLHE in the future.

The pre-service training effort is facing a number of obstacles. First is funding. Since 2011, the sole support for this effort has come from the MacArthur Foundation. Second, the ultimate impact of the FLEHI initiative is constrained by larger structural factors. Jobs are scarce; according to Olokun, only a third of their graduates nationally will find employment as teachers, and turnover is high. Also, for senior secondary schools, teachers are expected to have university degrees in specific subjects, rather than degrees from technical colleges of education. To date, the National University Commission has not integrated FLEHI into its course offerings, which will be a limitation for expansion of FLHE in senior secondary schools.

Shrinking In-Service Training

Since 2010, when the Global Fund began support for the FLHE rollout, the duration of the training program has been very significantly reduced from 10 residential days to four nonresidential days.²⁸ The two practicum days have been cut back dramatically, as was most of the content on the e-curriculum. This change has generated very serious concern among most of the informants at all levels (MOE staff, NGO trainers, principals, and teachers). Moreover, there currently appears to be little or no support for providing follow-up or refresher training to consolidate FLHE teachers' skills. Typically, a school will have one or two master-teachers who completed the longer training and who may mentor those who attended the shorter training.²⁹

Adeyemi Oladeji, the Programme Manager at the Association for Family and Reproductive Health (AFRH), the NGO that until late 2012/early 2013 managed the Global Fund FLHE project, explained: "We looked at the agenda and decided that ideally, we really needed five days. But we had funding for only four days." He commented further that few schools provide student access to computers (for the e-curriculum); that in AFRH's view, teachers already have substantial pedagogic skill for teaching FLHE (making the two-day practicum a "luxury"); and that pulling teachers from class for 10 days is a problem. This latter point was echoed by some of the other informants, who said that a two-week off-site training was not sustainable and was too difficult for many teachers to participate in, given long absences from family and other responsibilities. Some informants who regret the cut assert that even the shorter training can be of value. Bene Madunagu of Girls' Power Initiative, who has been involved in training for many years, emphasizes that the shorter training still has value: "The [shorter] training will skip the harder subjects. But it is worth it. They gain knowledge: there is always a change; some have a lot of improvement, some not as much."

Nevertheless, in the four states visited, there was a strong consensus: those teachers who had completed the 10-day residential training uniformly praised its value, while those who went through the shorter workshop felt they had not been adequately prepared. The few who attended both workshops confirmed that the difference in quality was very significant. Across the board—principals, master trainers, partnering NGOs, MOE staff at federal and state levels, and teachers—said that the quality of the training has fallen dramatically with this change.³⁰ They worry that the cut in duration of the training to four days represents a significant setback as the program goes to scale. In particular, the parts of the training many teachers deemed most useful—the reflection about their own attitudes and the practice teaching sessions—appear to have been greatly reduced. In addition, those teachers who had attended the short training often expressed a lack of confidence and preparedness to respond to the many questions that students are posing both inside and outside class; for example, questions about condoms, unintended pregnancy, and where to get an STI test. Comments made by teachers, NGO partners, and MOE officials include the following:

28 The Global Fund to Fight AIDS, Tuberculosis and Malaria began funding FLHE in 2010 for a period of five years. The strategy for schools focuses on a "minimum package" with three components: the classroom teaching, a weekly assembly, and optional peer group meetings.

29 Some teachers with whom we spoke had completed the 10-day training, some went through the four-day training, and several had actually attended both trainings. The schools identified which teachers' FLHE class sessions we would observe. Most of the classes we observed were taught by instructors who had completed the 10-day training; these teachers are also the most experienced, as they have been teaching FLHE for a longer time.

30 In their assessment of teachers' experiences of and views of FLHE training in rural Edo State, Dlamini et al. (2012) found that the length of the training was an important factor in the success of the program. They concluded that with adequate training and other support in the form of work plans, materials, etc., teachers can play a significant part in bringing about change in their students' lives.

It's not enough. We need to go from the theory to the practicum, to see how they are doing. It's a "fire-service" approach.

FEMALE TEACHER, CROSS RIVER

There is less of a focus on teacher methodologies during the four-day training. We are unable to really make it "student-focused." We give them a sense of what to do and then give them the manual.

NGO STAFF, KANO

I am against the four-day training for teachers. It doesn't make sense. When you sit with teachers one-on-one, their level of understanding is very slow. They need time to argue issues.

NGO STAFF, PLATEAU

There is a need for the teachers to be resensitized as part of training: Why do we need sexuality education? What are the expectations of teachers and of students? The time devoted to the practicum is insufficient; practicum needs two days, especially on methodologies—role-playing, etc. The time devoted to e-learning is insufficient—especially social media. Our staff who serve as resource persons and lead trainers haven't even been trained on the e-curriculum. Live classroom delivery should be a part of it.

NGO STAFF, NIGER

When we were trained [in 10 days], the trainer made us understand the need for methods like role play, discussion, games, etc. Each teacher got a 350-page manual. This needs time. For the four-day training, they get a handout with six slides/page. The practical side is also now missing: Now the participants don't have the 40-minute in-school micropresentation. There is still some improvement with the post-test, but it does not compare to the 10-day [post-training] performance. Knowledge gain is less. Comfort gain is less. The teachers lack the teaching technique. There is no way you can compare the 10-day to four-day.

NGO STAFF, ENUGU

They don't understand gender. We have to teach them. This takes time. In 10 days there is time to go through this, in a one-week program if it is residential, we can use the evenings, but a four-day non-residential program, there is not enough time.

STATE MINISTRY OF EDUCATION STAFF, ENUGU

The teachers want to know, they are enthusiastic. But now we have to squeeze things. So we leave things off, when we need to elaborate. . . If they go into the classroom and don't know, the children will be looking at you. But the time is too short.

FLHE TRAINER, ENUGU

The Coordinator of the FLHE program at the national level (in the Federal MOE) recognizes the dilemma, commenting, "States are clamoring for us to revert to 10 days." With funding, she would like to extend the training duration, or conduct research comparing 10-day to four-day training, perhaps at the state level.

Conclusion

The findings of this case study resonate with calls for greater attention to the synergies between sexuality education, HIV prevention, gender equality, and schooling. Indeed, they suggest that the Nigeria Family Life and HIV Education (FLHE) program can be most strategically understood as addressing outcomes beyond sexual health. Specifically, at least in the states visited for the study and wider review, there were signs suggesting positive changes related to gender equality and education overall—outcomes that were not explicit FLHE goals. Indeed, FLHE—which as an abstinence-based program may have limited potential to achieve its sexual health goals—may have its *greatest* impact in these wider social areas. In this regard, the findings echo and expand on the results reported in the Philliber evaluation done earlier (Esiet et al 2009), which showed no change in sexual health behaviors, but demonstrated less tolerant attitudes, especially among girls and teachers, toward sexual coercion.



A key observation in this review was the importance of the informal curriculum—what teachers bring to the classroom culture and content. Teachers report that the FLHE training has empowered them to be far more comfortable bringing messages about girls' rights and gender equality into the classroom, into their families, and into their communities. In addition, teachers increasingly provide direct support to girls with managing menstruation as well as supportive referrals for those experiencing sexual abuse. Importantly, most of the girls with whom we spoke described ways that FLHE has enabled them to better assert their rights as girls at school, at home, and with males.

Positive educational effects, while more muted, were also noted. Both teacher interviews and classroom observation indicate the adoption of new pedagogies that emphasize interactive learning, including personal reflection and critical thinking. Both the content and the learning methods have generated enthusiasm among female students, and appear to exert some positive effect on girls' attendance as well. These findings, combined with the gender-sensitive messages in the curriculum (albeit scant and often indirect), the increasingly egalitarian attitudes of teachers, and the personal support girls draw from their teachers around issues of menstruation, assertiveness, and abuse, suggest greater school connectedness on the part of girl students.

With regard to sexual health, the same message conveyed over and over was that girls have greater comfort with their bodies, including their sexual and reproductive organs, and greater confidence about refusing unwanted sex. Moreover, the formal and informal messages about gender equality should also contribute toward positive sexual health outcomes. That said, there is no avoiding the fact that FLHE is hobbled by an absence of information about condoms and contraception. There is little evidence that such an approach is likely to be effective in reducing STIs and unintended pregnancy rates, especially over the longer term. These concerns about FLHE are echoed by Joanna Herat, an HIV prevention expert at UNESCO, who comments, "The price of excluding condoms and sexual behavior is significant. It creates some confusion about whether it can even be called an HIV prevention program."

A compelling finding was the pivotal influence of the teacher training, more than the FLHE curriculum, in driving positive change. Two characteristics of the training seemed to be salient. First was the central role played by nongovernmental organizations (NGOs) that have a gender perspective. As the main advocates for the program for years, NGO staff had longstanding collegial relationships with key education officials and were intensely committed to the implementation of the FLHE program. They worked closely with state Ministries of Education (MOEs) to design and carry out teacher training, and provided essential support to teachers in the classroom. They also served as important resources for teachers to refer students to services and counseling on issues such as unwanted pregnancy or sexual abuse in the home. Their considerable expertise and deep commitment to gender equality allowed for deeper and more meaningful attention to gender issues in the training delivered in these states.

Second, the training, which was longer than in most programs (at least for the first years of FLHE implementation), allowed adequate time for teachers to reflect critically about issues of gender and power in their own lives as well as in the lives of their students—cognitive processes that influenced their ultimate attitudes and teaching. Underscoring this finding, teachers generally divided themselves into those who had the original 10-day residential training and those who completed only a four-day non-residential training; there was wide consensus that the first group had greater confidence, knowledge, and (in general) identification with the program.

The payoff for investing in teachers echoes the evidence (Pettersson 2003) that the informal classroom culture—fundamentally shaped by the teacher's own values and style—can influence students' attitudes more than does the formal curriculum content. As Lamidi Abiodun of the Lagos State MOE reflected, “Everything still boils down to the teacher.”

Movement toward these outcomes is particularly remarkable because they were not a formal goal of FLHE, nor has the program been monitored or evaluated for these outcomes. It is all the more notable given that teachers are applying what they have learned in a resource-scarce context, where classes are large and supplies are absent. As sexuality education researcher Nicole Haberland suggests, “While the Nigerian FLHE represents only a half-step toward where we need to go, it provides us with abundant lessons as we move forward.” This case study raises the question of what benefits might accrue if sex education programs set out explicitly to not only reduce HIV, but also to advance girls' rights and gender equality and to contribute to broader educational outcomes such as strengthening school connectedness, improving critical thinking skills, and creating safe schools. Indeed, the four state-level FLHE programs in this case study may offer a promising learning laboratory to inform future research, policies, and programming of such synergies.

Key Lessons

- 1 Gender-focused sexuality education is a critical, but largely neglected means to reach huge number of young people with messages about girls' rights and gender equality.** Gender-sensitive NGOs in Nigeria (including those explicitly identifying as feminist) have shown to be catalysts for effective implementation of such programs.
- 2 Investment in teachers' consciousness about, and commitment to, improving girls' lives may lead to significant changes in classroom culture and messaging, even where the formal curriculum includes only limited content and where the program goals are more narrowly defined on sexual health outcomes.** Teachers express a need for monitoring and follow-up support to consolidate what they have learned and further strengthen their skills. The independent effects of investing in teachers' gender attitudes and teaching skills needs to be more fully analyzed and documented.
- 3 There is a need for intervention research that can capture ways that sexuality education may be fostering gender equality and contributing to strengthening overall education.** Indicators need to be refined and integrated into school-based settings to capture changes in, or determinants of, such outcomes as delay in marriage; continuation of schooling; reduction of harmful gender norms; increase in girls' agency and leadership; decreased incidents of sexual harassment, sexual coercion, and intimate partner violence; prevention of human trafficking; and greater resistance to female genital mutilation.

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