

LESSONS from the field

Girls'
Education
Challenge



DECEMBER 2018

Sexual and reproductive health and rights in the GEC

Every day in developing countries, 20,000 girls under age 18 give birth.¹ Every three minutes an adolescent girl is infected with HIV.² Together HIV, pregnancy and childbirth are the leading causes of death amongst adolescent girls globally³. Adolescent pregnancy, early marriage and girls' education are intrinsically linked.

Too often, the girl who dropped out of school early is the same girl who was married at 12, had her first child at 13 and had three children before she turned 18. The children she bears are, in turn, significantly more likely to be less healthy and well educated than their peers, born to older, better-educated mothers.

This is why adolescent girls matter so much to DFID and to the Girls' Education Challenge (GEC). It is why, at the 2017 Family Planning Summit, the UK committed to shining a spotlight on adolescent sexual and reproductive health and rights (SRHR). DFID's 2018 Education Policy makes an explicit commitment to supporting the provision of menstrual hygiene facilities and sex and relationships education in schools. Many of the Sustainable Development Goals – particularly, but not exclusively, focused on gender and health – cannot be achieved without a concerted effort to understand and respond to the specific needs of adolescents, both married and unmarried.

Every year there are 21 million pregnancies among girls aged 15-19 in developing countries. Six million of these pregnancies end in abortion, 2.5 million of which are unsafe.⁴

This is why governments, donors and NGOs work beyond the health sector to drive action for adolescents, with a

specific focus on the role of education as a catalyst for social norm change. Education is key. On the one hand, 'period poverty' and lack of hygienic menstrual management facilities at schools, early pregnancy and fear of abuse can stop girls coming to school or force them to drop out. On the other, education, focused on reproductive health and rights, can reduce sexual abuse, early pregnancy and bullying, and it can increase attendance, confidence and academic results. In their 2018 *Education Policy*, DFID shine a spotlight on the value of providing menstrual hygiene facilities at schools, tackling discriminatory gender norms (including taboos around menstruation), and promoting relationships and sexual education (RSE) to support girls to stay in education.

It is also why all 27 projects currently supported by the Girls' Education Challenge have interventions to address sexual and reproductive health and rights (SRHR). Project activities range from the provision of health and hygiene kits and learning sessions for girls on SRHR, to life skills training, boys' clubs and community 'Dialogues' (see Table 1 for more detail on these interventions).

This document looks at the challenges faced by both the girls and the projects that are trying to support them, it outlines the work projects are doing to increase awareness and change attitudes and practices, and highlights what 'works best' in achieving real and lasting change.

SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS – DEFINITION

Sexual and reproductive health (SRH) is a state of physical, emotional, mental and social well-being in relation to all aspects of sexuality and production, not merely the absence of disease, dysfunction or infirmity....Achieving SRH relies on realising SRH rights, which are based on the human rights of all individuals to have their own bodily integrity respected, to decide when and with whom to have sexual relations and/or to have children, and to have access over their lifetimes to the information, resources, services and support necessary to achieve this, free from discrimination, coercion, exploitation and violence.

Gutmacher-Lancet Commission, 2018

For the full definition, go to:

<https://www.thelancet.com/commissions/sexual-and-reproductive-health-and-rights>

1 UNFPA: <https://www.unfpa.org/adolescent-pregnancy>
2 UNICEF: <https://www.unicef.org/press-releases/every-three-minutes-teenage-girl-infected-hiv-unicef>
3 WHO: <https://www.who.int/news-room/fact-sheets/detail/adolescents-health-risks-and-solutions>
4 WHO: <https://data.unicef.org/topic/child-protection/violence/sexual-violence/>

The challenges

Early pregnancy and marriage

Low school performance is associated with higher rates of early pregnancy, marriage and drop out. Up to one third of girls aged 15 and over who drop out of school do so because of early pregnancy or marriage. However, in Africa, women with seven or more years of education have an average of two fewer children than those with no education. Each year of secondary education reduces the likelihood of early marriage by 5%.⁵

Each year, 12 million girls are married before the age of 18. That is 23 girls every minute. Nearly one every 2 seconds.⁶

Menstrual hygiene management

Tackling 'period poverty' and the lack of knowledge about menstruation and sex is increasingly emerging as a development priority. Many girls are insufficiently educated about puberty before their first period and some have no idea what is happening to them when they begin to menstruate.

Many cannot afford, or do not have access to effective and appropriate sanitary protection. Nearly one million girls in Kenya do not go to school because they lack access to sanitary pads and corresponding reproductive health education.⁷

According to a 2010 UNICEF study, 62% of girls in Afghanistan managed their periods using old pieces of cloth, 30% of the girls used new pieces of cloth, and 8% used sanitary pads. All girls reported knowing the importance of washing their hands after changing used materials, but only 20% reported having access to soap. A 2016 UNICEF study found that 70% of girls do not bathe when they have their period, for the mistaken and dangerous belief that it may render them infertile. The study also found that 37% of girls miss one or more days of school when they have their period – largely because of the absence of toilets and wash rooms to manage their periods.⁸

An inability to manage a period and menstrual pain can have a significant impact on an adolescent girl's dignity, her ability to attend school or to concentrate in class. Leaking can lead to teasing and bullying, which in turn can make a girl feel embarrassed, uncomfortable and reluctant to participate in class. This can have a major impact on absenteeism, drop out and lower educational attainment.

MENSTRUAL HYGIENE MANAGEMENT – DEFINITION

Women and adolescent girls are using a clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary for the duration of a menstrual period, using soap and water for washing the body as required, and having access to safe and convenient facilities to dispose of used menstrual management materials.

Lack of WASH and waste disposal facilitates

Globally, many schools lack adequate sanitation facilities. If toilets exist they can be shared, insecure spaces where girls lack privacy and are at risk of sexual harassment and abuse. They may not also provide facilities for changing and/or getting rid of sanitary protection. Girls may be expected to carry used pads with them throughout the day, which could lead to much humiliation and embarrassment – and would incentivise girls to stay at home during this time.

Gender-based violence

Every year an estimated 246 million children are subjected to gender-based violence, including sexual abuse, in or on the way to school.⁹ Direct exposure to school-related, gender-based violence can include sexualised bullying, sexual harassment, or forced sexual acts in exchange for good grades, as well as harassment on the way to school. If school is seen as a 'dangerous place', it can be seen as a rational choice for parents to keep girls out of school to avoid this risk.

Social norms, attitudes and policies

There are many taboos linked to adolescent SRHR including contraception, sexually transmitted infections, hygiene, sexual abuse and rape. Menstruation, in particular, is often linked to myths and poor knowledge that affect how women are perceived. The role of menstrual taboos contributing to gender inequality should not be underestimated. Restrictions on women during menstruation include exclusion from rituals and not being permitted to touch animals, water points or food. A girl's first period is a trigger point where gender normative expectations take root and in some communities indicates a perceived readiness of girls to marry.



UNICEF reports that 95% of girls surveyed in Nepal's mid and far-western regions faced some sort of restriction when having their first periods. Of these girls, 44% observed the traditional practice of chaupadi. What are these "restrictions?" Depending on the society and its traditions, these can include not touching men, not touching books, and sleeping and eating in places away from other family members. Not being allowed to touch books for three to seven days per month is a quick way to negatively impact a girl's education.¹⁰

National laws and policies can also have an impact. Twenty-six countries in the African Union have some type of law, policy or strategy in place to guarantee girls' rights to education during or after pregnancy. However, in a minority of countries, there are policies or laws that explicitly allow pregnant students and new mothers to be excluded from school.¹¹

Reporting abuse – understanding the risks

During the first phase of the GEC, the most common in-school activity was developing mechanisms for children to report violence safely, often using female teachers as key participants to encourage reporting. Many projects found a particularly urgent need for this following the introduction of SRHR sessions in girls' clubs, and awareness raising sessions in schools. In some cases, a comprehensive analysis had not been conducted prior to awareness raising activities with children, leaving some projects unprepared for an increase in reporting of violence. This had the potential to lead to direct harm to the girls the projects were aiming to support, as an inadequate or absence of response can put children reporting violence at risk of backlash, teasing and in the long term can discourage further reporting.

5 World Bank: <http://documents.worldbank.org/curated/en/268251542653259451/pdf/132200-WP-PI68381-PUBLIC-11-20-18-Africa-GE-CM-Conference-Edition2.pdf>

6 <https://girlsnotbrides.org/about-child-marriage/>
7 <http://blogs.worldbank.org/education/globally-periods-are-causing-girls-be-absent-school>

8 Report by UN Children's Fund, 30 August 2017: <https://reliefweb.int/report/afghanistan/first-ever-girls-hygiene-day-held-afghanistan>

9 UNESCO and UN Women, 2016: <http://www.un-women.org/en/news/stories/2016/12/press-release-unesco-and-un-women-release-guidance-to-end-gender-based-violence-in-education>

10 UNESCO: <https://en.unesco.org/news/why-comprehensive-sexuality-education-important>

11 Martinez and Odhiambo, 2018



What works – project insights

GEC projects are aware of these challenges related to SRHR and are implementing a range of interventions to address them. Targeted monitoring is providing valuable information on the early impact of these activities and is helping to identify interventions that seem to be working well, particularly in terms of positive impact on attendance, transition and learning outcomes. At this point, the feedback is relatively anecdotal – we will know more when midline evaluations take place in 2019 – but some key insights are emerging.

The interventions being undertaken by projects are outlined in Table 1 below. They are varied and depend very much on the context of the region, community and/or school where projects are working. However, many of the interventions are similar (the provision of sanitary protection for example) and it is clear that, in general, more than one activity is necessary to fulfil girls' rights. Projects tend to cover both 'hardware' (e.g. facilities, waste disposal and sanitary materials) and 'software' (awareness raising – with girls, boys, parents, teachers and communities – and counselling). These are outlined below with some project insights. Some examples include:

1. Providing safe, clean, sex-segregated WASH facilities and sanitary waste disposal

2. Giving access to appropriate absorbent materials

“Link provides reusable/washable sanitary pads and gives training on hygiene around them when distributed. We are looking at local re-useable sanitary product providers for sustainability. We will also be training local mothers' groups and/or beneficiary girls to make reusable sanitary pads and underwear as a vocational opportunity.”
Link Community Development, Ethiopia

Keeping African Girls in School with Better Sanitary Care

DFID Research Impact: SOAS and Plan International Uganda

RCT assessing impact of providing reusable sanitary pads and puberty education on girls' school attendance. Research tested whether attendance improved when girls were given: (a) reusable sanitary pads (b) adolescent reproductive health education (c) neither (d) a combination of both; Better sanitary care and reproductive health education for schoolgirls over two years, did appear to improve attendance. On average, girls increased their attendance by 17%, which equates to 3.4 days out of every 20 days

3. Working with teachers

“We need to engage with teacher codes of conduct as well as trying to address this at school and community level. Teacher codes of conduct are usually fairly clear with regard to professional relationships between girls/students and teachers. However, implementation and monitoring of a teacher CoC is often a challenge. Teachers may sign it but not fully read or understand what the contents actually hold them to. If they violate it, there may be no report or follow-up. This is another area that can be considered in programming to reduce school-related gender-based violence in schools and support sexual and reproductive rights.”
Link Community Development, Ethiopia

“The majority of teachers in Nepal, including those delivering health education, are male. This can often make it more difficult to share questions. In order to address this, we have been working with community female health volunteers. We also believe it is important to create safe and comfortable classroom environments.”

Mercy Corps, Nepal

4. Promoting family and community support

“We felt that SHRH in schools education is incomplete unless it is linked to the local health system. Connecting with the local health system can benefit girls by linking to youth-friendly SRH services.”
Mercy Corps, Nepal

5. Dismantling norms, stigma and taboo at every level

“It's important to remember that if sexual violence is happening in a school, it is highly likely that other forms of violence are also present and that gender-sensitive teaching methods are absent. So it's important to adopt a holistic approach to violence prevention (including corporal punishment) and gender sensitive pedagogy in general.”
Save the Children, Mozambique

A number of projects are also looking at national and regional policies and advocating for change where these policies impact negatively educational access for adolescent girls who are pregnant or have given birth.

6. Providing age-appropriate relationships and sex education (RSE) – more detail on this provided on page 4

CASE STUDY – SISTERS FOR SISTERS, VSO, NEPAL

In Nepal, adolescents aged 10-19 constitute almost a quarter of the population. Child marriage is a leading cause of school drop out for girls¹² and menstruation is a key barrier to regular attendance. Despite being banned in 2005, by the Supreme Court and its recognition as a harmful practice and a form of violence against women in the 2010 the National Plan of Action against Gender-Based Violence, *Chaupadi* is still practiced in parts of Nepal. This practice requires menstruating girls to remain isolated from their family, and are forbidden from entering homes, kitchens, schools, and temples.

While relationship and sex education (RSE) is included in the school curriculum, it is not included in teachers' training and is currently being taught by teachers with no formal training in these topics.

VSO Nepal's *Sisters for Sisters* programme integrates both health and education components and advocates for age-appropriate and comprehensive sexuality education in the school curriculum. It aims to enhance parent-child communication through events and 'dialogues' and trains teachers to deliver the course effectively, focusing on six key concepts:

- Relationships
- Values, attitudes and skills
- Culture, society and human rights
- Human development
- Sexual behaviour
- Sexual and reproductive health

The project has undertaken a holistic approach to delivering RSE.

At the national level, VSO is a member of the National Comprehensive Sexuality Education Technical Working Group. They are advocating for the government to include age appropriate RSE at all levels of education and to include RSE in Grades 11 and 12 through life skills education.

At the school level, training of trainers is being delivered across 49 schools in Lamjung, Surkhet, Dhading and Parsa to develop the capacity of teachers to teach RSE. They are supporting school management committees to incorporate RSE into school improvement plans. 'Big Sisters' are being trained to mentor and guide younger girls on sexuality education.

At the community level, the project delivered an awareness and advocacy programme on menstrual health and hygiene management in celebration of International MHM Day on 28 May 2018.



Project developments

The project follows the government manual for RSE training which was developed to be delivered in formal education settings. However, they soon recognised that diversity in certain areas meant that the needs were different, such as the language. As a result, they adapted government materials, reprinting eight booklets covering the government of Nepal's Comprehensive Sexuality Education in simple local (Nepali) Language. They have also developed other information, education and communication materials to portray positive messages about menstruation, demystify taboos and demonstrate the harmful consequences of *Chaupadi* on girls' education.

Providing information and knowledge – the role of education in SRHR

Sex and relationships education or 'relationships and sex education' (RSE) is perhaps the most vital 'tool in the box' related to SRHR. Early conversations around bodily integrity and sexual consent are crucial. In more conservative societies, puberty education to ensure girls and boys understand menstruation and the changes to their bodies in puberty can act as useful entry points for wider conversations about relationships and sex, and can be a vital part of the RSE curriculum.

It is important to note that RSE – in or out of schools – has not been found to increase sexual activity, sexual risk-taking behaviour or STI/HIV infection rates. Programmes that promote abstinence as the only option are ineffective in delaying sexual initiation, reducing frequency of sex or number of sexual partners. RSE has the most impact when school-based programmes are complemented with the involvement of parents and teachers, training institutes and youth-friendly services.¹³

Ultimately, children and young people who have received RSE are more likely to:

- Delay having sexual relations
- Avoid/reduce frequency of unprotected sex when they become sexually active
- Have fewer sexual partners when sexually active
- Use protective and preventive methods against unintended pregnancy and STIs if they engaging in sexual activities.

Best practice on RSE

Important foundations for effective implementation:

1. No judgement
2. Age-appropriate messaging
3. RSE delivered within the wider context of gender and girls' empowerment
4. Linking to SRHR services (signposting)
5. Not letting "terminology" get in the way – i.e it doesn't have to be called RSE

Those who deliver RSE should have appropriate information, training tools, and

skills. They should have an understanding of young people and a genuine intention to enlighten, transform and prepare them. They also need to be trusted, accessible and non-judgmental and someone with whom young people feel comfortable.

The key content components of successful RSE are:

- **Gender:** exploring gender roles, norms, differences between gender and sex
- **SRH:** across the life cycle, pregnancy, abortion, STIs, HIV
- **Sexual rights and sexual citizenship:** policies and laws, negotiation, consent
- **Pleasure:** positivity, sex should not be coerced
- **Violence:** exploring various forms, non-consensual sex, seeking help
- **Diversity:** recognising diversity in our lives (faith, culture, ethnicity, socioeconomic status, disability, HIV status, sexual orientation)
- **Relationships:** different types, power dynamics

¹² NAYS, 2012

¹³ UNESCO, Why comprehensive sexuality education is important, 2018, <https://en.unesco.org/news/why-comprehensive-sexuality-education-important>



Forward look

The Table below shows the vast array of work that the GEC projects are doing on SRHR. As Leave No Girl Behind projects get started in the coming months – supporting some of the world’s most marginalised girls – this work will increase further. Projects will continue to build stronger education interventions to support SRHR. We will capture the impact of these and the additional lessons that emerge from all of this work. The data collected by projects on these issues, including menstrual health management and RSE, will be invaluable to other policy and decision-makers. We will ensure that projects and external organisations are given more opportunities to share their experiences and insights on these important topics in person and online, and that we begin to influence policy and practice at scale.

Table 1: GEC project activities on SRHR

PROJECT/LEAD ORGANISATION	COUNTRY/COUNTRIES	ACTIVITIES
Steps Towards Afghan Girls’ Education Success (STAGES)	Afghanistan	<ul style="list-style-type: none"> • Provides girls with health and hygiene kits, including sanitary towels. • Delivers MHM modules to overcome social taboos around menstruation and raise awareness on menstrual hygiene.
Community-Based Education for Marginalised Girls in Afghanistan	Afghanistan	<ul style="list-style-type: none"> • Provides learning sessions to improve adolescent girls’ knowledge of sanitation and hygiene. • Development of WASH school facilities assessment and upcoming menstrual hygiene plan to inform construction and awareness campaigns.
Réussite et Épanouissement via l’Apprentissage et L’Insertion au Système Éducatif (REALISE) – ‘Success and Fulfilment Through Learning’ – Save the Children	DRC	<ul style="list-style-type: none"> • Provides SRHR education and awareness sessions in Girls’ Clubs, focusing on girls’ rights and gender-based violence.
Excelling Against the Odds – ChildHope UK	Ethiopia	<ul style="list-style-type: none"> • Provides life skills training for girls in primary school and in Good Brothers’ clubs that discusses and raises awareness around issues such as early marriage, sexual harassment and sexualisation of girls, hygiene, and sexual and reproductive health. • The Girls’ Movement aims to facilitate conversations among adolescents on issues such as reproductive health, masculinity, sex and sexuality. • Letter-link boxes enable girls to speak out about the issues that affect them, including forced marriage; violence in the home, school and community; emotional, physical and sexual abuse. • Distributes sanitary pads to girls in primary school. CHADET, a key partner, has set up sanitary corners and also provides girls with sanitary pads and materials. • SRHR service providers have been identified, referral linkages created and girls have been educated on how to access the services. It also plans to train secondary school focal teachers and principals on SRHR.
Supporting Transition of Adolescent Girls through Enhanced Systems (STAGES) – Link Community Development	Ethiopia	<ul style="list-style-type: none"> • Increases girls in secondary schools’ access to sanitary pads, underwear and soap, and provides appropriately supervised Girls’ Education Advisory Committee rooms/safe spaces for girls to rest and wash during menstruation. • Girls’ Clubs and Gender Clubs deliver SRHR as part of the life skills curriculum, provides girls with school-related gender-based violence (SRGBV) information, informs and provides girls with mechanisms for reporting abuse, and provides social and emotional guidance and counselling programme. • Supports community awareness and action on gender rights, safeguarding and child protection.
Making Ghanaian Girls Great! – Varkey Foundation	Ghana	<ul style="list-style-type: none"> • Provides after-school Wonder Women girls’ clubs to deliver core life skills, including SRHR. These sessions cover topics including, early pregnancy, STDs/HIV and violence, including sexual abuse and harassment, emotional abuse and neglect. • Delivers Boys Boy clubs (male-only after school sessions) which educates boys on SRHR, including early pregnancy and STDs.

Discovery Project – Discovery Learning Alliance	Ghana, Kenya, Nigeria	<ul style="list-style-type: none"> • Supports girls through self-organised girls' clubs with mentors and a My Better World life skills curriculum, developed by Camfed, which provides sessions on SRHR. • Secondary school teachers participate in the full gender responsive pedagogy training, with an emphasis on identifying, analysing and countering gender bias and addressing issues such as sexual harassment. • Provides training to communities that facilitates access to SRHR for adolescents.
Kenya Equity in Education Project (KEEP) – WUSC	Kenya	<ul style="list-style-type: none"> • Provides psychosocial counselling support to at-risk girls at primary and secondary level as part of their life skills programming. This addresses key adolescent development issues including SRHR. • Runs residential life skills camps alongside the counselling which is offered to all girls.
Let our Girls Succeed (Wasichana Wetu Wafaulu) – Education Development Trust	Kenya	<ul style="list-style-type: none"> • Trains teachers on SRHR, child safeguarding and e-safety. • Uses girls' clubs to improve girls' knowledge of reproductive health needs, health risks and girl's confidence. • Uses community facilitation to sensitise young men who influence community decisions in ASALs or Slums (including morans and boda boda riders respectively) to issues of sexual pressure and exploitation. • Holiday Mentorship Forums cover hygiene and SRHR.
Expanding Inclusive Education Strategies for Girls with Disabilities Kenya – Leonard Cheshire	Kenya	<ul style="list-style-type: none"> • Through life skills curriculum the project works in inclusive settings to teach participants about SRHR, healthy relationships and self-confidence to ensure that girls with disabilities are fully informed about their reproductive health, as well as empowered to report instances of abuse if they experience them.
Jielimishe (Educate Yourself) – I Choose Life	Kenya	<ul style="list-style-type: none"> • Conducts training and delivers life skills through girls' clubs and mentorship clubs which includes SRHR and child protection. • Conducts targeted sensitisation and training of boda boda riders and morans as agents in reducing sexual exploitation and violence against girls. • Proposes age appropriate SRHR education as well as sensitisation of the girls and boys on their rights and reporting mechanisms for their protection. Boys are deliberately included in these interventions. • Provides sanitary towels to girls and underwear to boys.
iMlango – Avanti Communications Group	Kenya	<ul style="list-style-type: none"> • Delivers life skills training to in school girls on issues that affect adolescent girls in particular, including personal, social and health education.
Successful Transition and Advancement of Rights for Girls (STAR-G) – Save the Children	Mozambique	<ul style="list-style-type: none"> • Trains gender focal points, including female Matronas, on child rights, SRHR, menstruation management and gender equality to be able to educate, support and build the confidence of members of the girls' clubs to influence and demand for their rights.
Supporting the Education of Marginalised Girls in Kailali (STEM) – Mercy Corps	Nepal	<ul style="list-style-type: none"> • Increases access to and understanding of SRHR through female community health workers and other club facilitators who provide classes on SRHR to in-school and out-of-school girls. • SRHR and life skills curriculum adopted by the schools.
Sisters for Sisters' Education – VSO Nepal	Nepal	<ul style="list-style-type: none"> • Conducts Community Dialogues with parents and communities which focus on issues of child marriage, SRHR changes in young adults, child protection and role of communities in solving child protection cases and issues. • Big sisters will specifically liaise with grooms' families to help out of school married girls return to school and increase SRHR education within the community to prevent early pregnancy. • Improves knowledge, teaching competencies and skills in teaching core subjects including SRHR.
Educating Nigerian Girls in New Enterprises (ENGINE) – Mercy Corps	Nigeria	<ul style="list-style-type: none"> • Uses safe spaces where girls can safely express their concerns around exploitation, sexual violence and harassment, and physical violence, with the project maintaining close relationships with peer mentors, their gatekeepers, men and boys and influential community members to spot protection issues as they evolve and to be as responsive as possible.
Rwandan Girls' Education and Advancement Programme (REAP) – Health Poverty Action	Rwanda	<ul style="list-style-type: none"> • Provides youth friendly SRHR corners which are run by trained custodians alongside Community Health Workers to deliver SRHR sessions on HIV/STDs, behaviour changes and communication, SRGBV, and the consequences of early pregnancy. • Trains project staff and partners, including on practices against inequality and discrimination against groups based on sex, diseases like HIV/AIDs, physical disabilities. • Uses Mother Daughter Clubs to discussion SRHR and reduce early pregnancy.
Girls' Access to Education – Plan International	Sierra Leone	<ul style="list-style-type: none"> • Incorporates an SRHR component which involves disseminating key messages over the radio and in public spaces regarding teenage pregnancy, early marriage, and other SRHR issues.
Educate Girls, End Poverty	Somalia	<ul style="list-style-type: none"> • Delivers life skills, a core element of which is training on Reproductive, Maternal and Child Health (safe motherhood, SRHR, nutrition, dietary diversity, sanitation, drug and substance abuse, general health). • Provides menstrual and hygiene support (sanitary kits) to both primary and secondary students.
Somali Girls Education Promotion Programme (SOMGEP)	Somalia	<ul style="list-style-type: none"> • Distributes sanitary pads. • Works closely with religious leaders to change attitudes around issues, including early marriage.

Girls Learn, Succeed and Lead – Camfed Tanzania	Tanzania	<ul style="list-style-type: none"> • Delivers My Better World life skills curriculum, developed in partnership with young people and communities in Tanzania, which provides sessions on SRHR to secondary school girls. • Learner Guides in schools and communities support girls and integrate focus on SRHR education into the content of their sessions with girls and boys, helping them to develop mutual respect and equal responsibility for making healthy sexual choices. • Facilitates access to SRHR.
The Ultimate Virtuous Cycle of Girls' Education – Camfed International	Tanzania, Zambia, Zimbabwe	<ul style="list-style-type: none"> • Delivers My Better World life skills curriculum, developed in partnership with young people and communities in the local countries, which provides sessions on SRHR to secondary school girls. • Learner Guides in schools and communities support girls and integrate focus on SRHR education into the content of their sessions with girls and boys, helping them to develop mutual respect and equal responsibility for making healthy sexual choices. • Facilitates access to SRHR.
Building Girls to Live, Learn, Laugh and 'SCHIP' in Strong, Creative, Holistic, Inclusive, Protective, Quality Education – Viva/CRANE	Uganda	<ul style="list-style-type: none"> • Delivers children's support groups, Personal, Social, Health Education lessons and counselling to help children understand about SRHR. • Runs Mother and daughter clubs, which includes lessons on making of hygienic washable sanitary pads.
GEARR-ing Up for Success After School – PEAS	Uganda	<ul style="list-style-type: none"> • Delivers life skills curriculum through Girls Clubs, to enable girls and boys to understand gender equality and SRHR choices.
Empowering Girls with Disabilities in Uganda through Education – Cheshire Services Uganda	Uganda	<ul style="list-style-type: none"> • Provides reproductive health (menstrual cycle management) support to girls, including sanitary orientation, sanitary towels, and reproductive health information. • Delivers life skills programme in Learning and Mentoring camps for secondary school boys and girls including communication skills; SRHR talks; personal hygiene; child protection and children rights.
Girls' Education Finance: Empowerment for Girls' Education – Opportunity International UK	Uganda	<ul style="list-style-type: none"> • Girls' Clubs delivers gender-focused life skills training including menstrual management, SRHR, Child Protection and gender awareness.
Improving Girls' Access through Transforming Education (IGATE) – World Vision	Zimbabwe	<ul style="list-style-type: none"> • Trains religious stakeholders, through the Channels of Hope (CoH) community engagement, on the Biblical basis for gender equality, emphasising health, decision-making, education, SRHR decisions. • Delivers life skills curriculum in their girls clubs which addresses SRHR.

USEFUL RESOURCES

- **DFID, 2018**, DFID Strategic Vision for Gender Equality A Call to Action for Her Potential, Our Future
- **DFID, 2018**, Education Policy, Get Children Learning
- **GEC Thematic Paper** on Reducing Violence in Schools
- **Guttmacher**, Comprehensive Sexuality Education
- **IPPF, 2010**, Framework for Comprehensive Sexuality Education
- **Plan International UK, 2016**, Qualitative Study Assessing the Links Between Comprehensive Sexuality Education and Violence Against Women and Girls
- **Population Reference Bureau, 2017**, reviews of education and health sectors
- **Save The Children**, Operational Guidelines Menstrual Hygiene Management
- **UNESCO, 2018**, International Technical Guidance on Sexuality Education
- **WaterAid**, Menstrual Hygiene Matters
- **WHO, 2017**, A never-before opportunity to strengthen investment and action on adolescent contraception, and what we must do to make full use of it and Video summary



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Girls' Education Challenge



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