



UNESCO'S SERAT METHODOLOGY

OVERVIEW OF COMPREHENSIVE SEXUALITY EDUCATION STATUS IN GEORGIA, KYRGYZSTAN, THE REPUBLIC OF MOLDOVA AND TAJIKISTAN



Sexuality education status

Comprehensive sexuality education (CSE) is vital, as it supports children and young people in their sexual and overall development. According to a number of UN agencies, including UNFPA, the main aim of CSE is “to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and understand and ensure the protection of their rights throughout their lives”.¹ There is substantial evidence demonstrating the effectiveness of CSE in increasing knowledge of and improving attitudes related to sexual and reproductive health (SRH), promoting safe sexual practices, and reducing sexual and gender-based violence. Good-quality sexuality education has a positive impact on attitudes and values, including gender-equitable attitudes and respect for sexual diversity.²

This overview presents a summary of the results of an assessment of the status of sexuality education in four countries in Eastern Europe and Central Asia: Georgia, Kyrgyzstan, the Republic of Moldova and Tajikistan. The assessment was initiated in 2021 and was conducted by the German Federal Centre for Health Education (BZgA), the United Nations Population Fund (UNFPA), the International Planned Parenthood Federation (IPPF), the United Nations Educational, Scientific and Cultural Organization (UNESCO) and the World Health Organization (WHO). The data were collected using the standardized Sexuality Education Review and Assessment Tool (SERAT)³ via desk reviews of relevant policies, curricula and national data, questionnaires, stakeholder interviews (e.g. with teachers, representatives of technical working groups and ministries of education, young people) and discussions to validate the findings. The data collection took place between December 2021 and July 2022.

The findings demonstrate that all four countries teach sexuality education, which is supported by adequate legal and policy frameworks, and integrate it into their school curricula. The comprehensiveness of the curriculum, teacher training and learning methods differ across the four countries. More details on the methodology and results are provided in the country reports.

The following paragraphs summarize the findings from the SERAT sections on (1) legal and policy context, (2) objectives and principles, (3) integration into the official curriculum, (4) sexuality education content (ages 5–18+), (5) teaching and learning approaches and environment, (6) teacher training and (7) monitoring and evaluation, and at the end there is a summary overview of the findings.

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1. United Nations Educational, Scientific and Cultural Organization (UNESCO) and others, *International Technical Guidance on Sexuality Education: An Evidence-Informed Approach*, 2nd rev. ed. (Paris, UNESCO, 2018).
 2. Kristien Michielsen and Olena Ivanova, *Comprehensive Sexuality Education: Why Is It Important?* (Brussels, European Union, 2022). Available at [https://www.europarl.europa.eu/RegData/etudes/STUD/2022/719998/IPOL_STU\(2022\)719998_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2022/719998/IPOL_STU(2022)719998_EN.pdf) (accessed on 4 January 2023). Also see a series of four policy briefs on sexuality education produced in 2021 by the United Nations Population Fund (UNFPA), the World Health Organization (WHO) and the German Federal Centre for Health Education (BZgA). Available at <https://www.bzga-whocc.de/publikationen/kurzdossiers/kurzdossiers-zum-thema-sexualaufklaerung/> (accessed on 28 April 2023).
 3. SERAT is an Excel-based tool that helps to collect data on school-based sexuality education programmes, and to generate reflection and discussion about strengths and areas for improvement. SERAT is based on international evidence and good practice related to the development and content of effective CSE programmes. For the main source material used in the development of this tool, see UNESCO and others, *International Technical Guidance on Sexuality Education: An Evidence-Informed Approach*, 2nd rev. ed. (Paris, UNESCO, 2018). The tool includes questions that assess the status of CSE in such areas as the legal and policy context, objectives and principles, curriculum content by age group, integration into the national curriculum, teaching and learning approaches and environment, teaching training, and monitoring and evaluation. Although SERAT is a comprehensive and participatory tool, it contains many questions, and some of them may be interpreted differently across different contexts. It also requires a significant amount of time and effort to complete. For more on the SERAT tool and reporting template, see UNESCO, *Sexuality Education Review and Assessment Tool (SERAT)*, 2020. Available at <https://healtheducationresources.unesco.org/library/documents/sexuality-education-review-and-assessment-tool-serat> (accessed on 28 April 2023).

Legal and policy context

All four countries have a favourable legal and policy basis for sexuality education. National strategies, programmes and policies on reproductive health ensure access to information and education on sexuality-related matters for children and young people. This section of SERAT also addresses questions concerning links with health-care services in schools, in particular SRH services, and referral systems for learners. All four countries noted a lack of such services, qualified personnel and supportive guidelines in schools. Nevertheless, in the Republic of Moldova, there is an active network of youth-friendly health centres that provide information, contraception, and testing for sexually transmitted infections (STIs) and HIV for young people, as well as mental health services. In addition, they manage cases of sexual violence. In Georgia, a Doctor's Hour programme, led by school doctors, was piloted in six schools in 2021 to introduce components of CSE.

Objectives and principles

On average across the four countries, 54.4 per cent of relevant CSE objectives and principles are integrated into overall programmes and national educational curricula. Countries scored particularly high on prevention of teenage pregnancies, contraception use and other public health priorities. However, effective skills such as negotiating contraception use, analysing gender norms and understanding consent are not sufficiently specified in the curricula. The curricula in all four countries were mostly developed with the participation of relevant stakeholders and the involvement of relevant specialists; however, young people, parents and human sexuality experts were involved to a lesser degree than other stakeholders. One more observation reported by the majority of countries is that terms such as “sexuality”, “sexual behaviour” and “sexual rights”, among others, are rarely used in the relevant documents.

Integration into the official curriculum

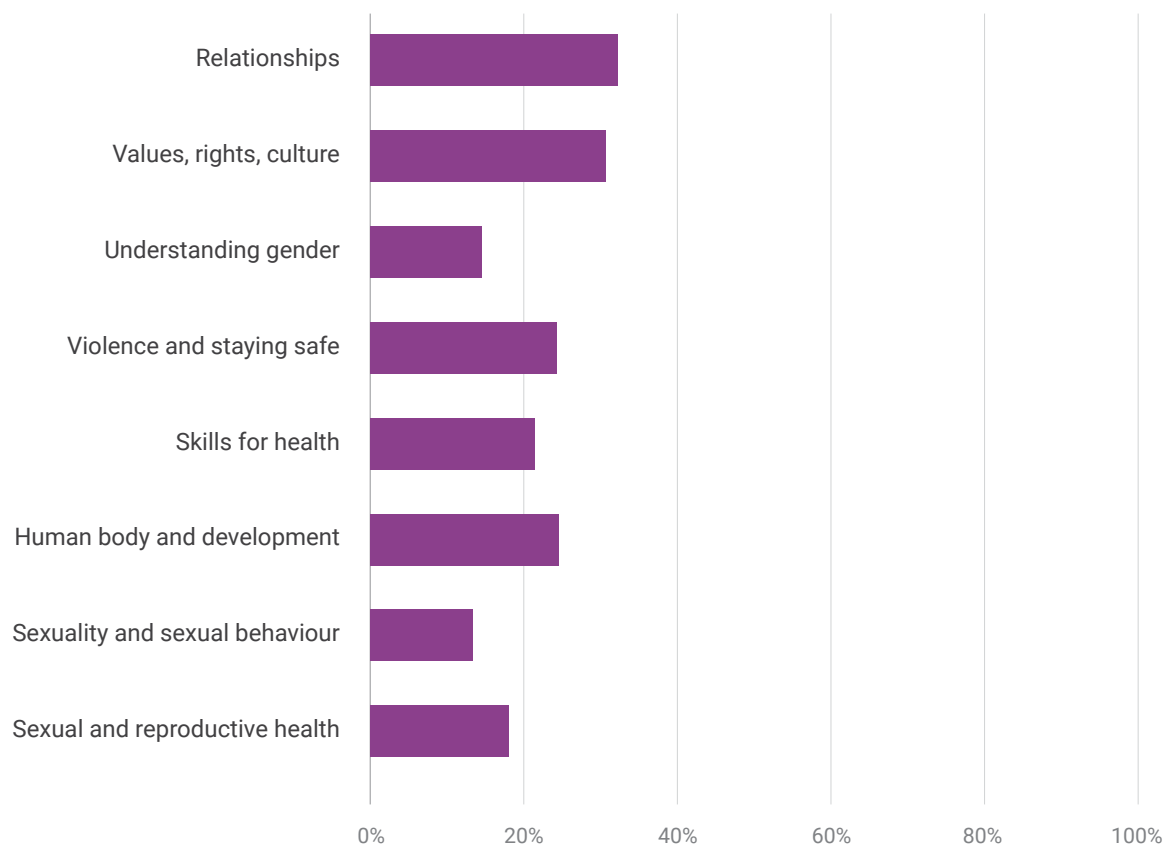
In all four countries, sexuality education topics are part of other subjects (e.g. biology, healthy lifestyles) or provided as an extracurricular activity. Sexuality education topics are often neither mandatory nor examinable. The time allocated for teaching sexuality education topics is reported to be insufficient and sometimes depends on teachers' comfort and confidence in discussing CSE topics.

Sexuality education content (ages 5–18+)

This section reflects on the topics and learning objectives covered in the content of the sexuality education curriculum for different age groups (ages 5–8, 9–12, 12–15 and 15–18+). Content areas are based on the eight key concepts outlined in the publication *International Technical Guidance on Sexuality Education* and also reflect a mix of knowledge, attitudinal and skills-based learning objectives.

The integration of sexuality education concepts varies across countries. The topics of relationships and values are generally more present in the curricula across all age groups, scoring slightly above 30 per cent. Topics that are given less attention are gender, sexual behaviour and sexuality (see Figure 1).

Figure 1. Integration of key concepts into the curricula for all age groups



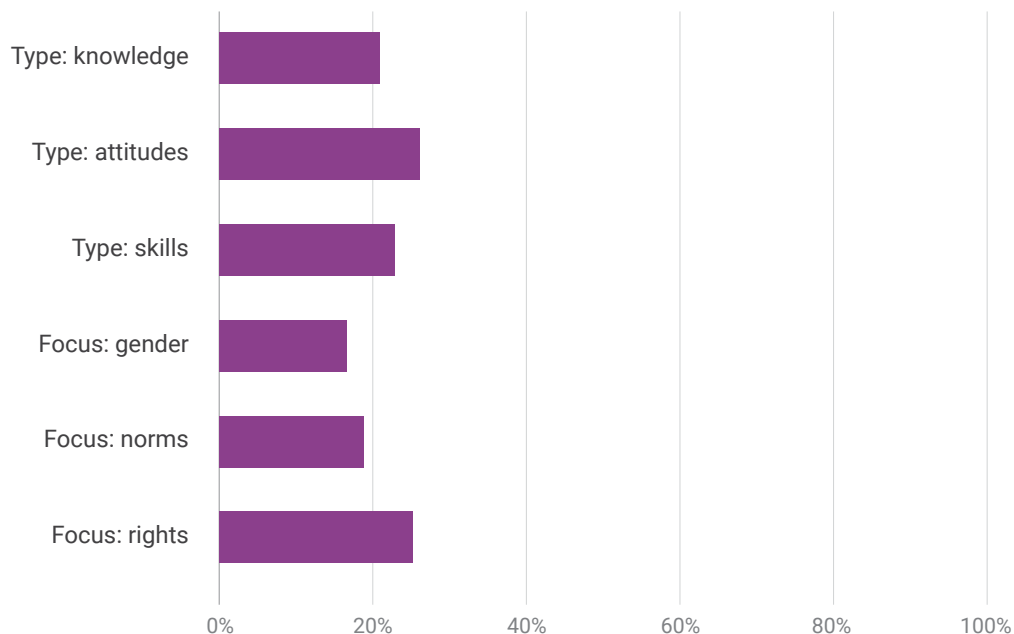
Source: Data collected through the SERAT tool in Georgia, Kyrgyzstan, the Republic of Moldova and Tajikistan



Photo: UNFPA Georgia/Gela Bediamashvili

When learning objectives (skills, knowledge and attitudes) and the focus of learning (rights, norms and gender) are analysed, all countries score less than 20 per cent, on average, in gender and norms, with slightly higher scores for other categories (see Figure 2).

Figure 2. Integration of learning objectives into the curricula for all age groups



Source: Data collected through the SERAT tool in Georgia, Kyrgyzstan, the Republic of Moldova and Tajikistan

On average, the content for all age groups across the four countries corresponds to 26 per cent of the recommended international standards, with the highest coverage of key concepts and learning objectives in the Republic of Moldova (51.3 per cent) and the lowest in Kyrgyzstan and Tajikistan (both 11.8 per cent). The content is more comprehensive for the 12–15 age group, followed by the 15–18+ age group in all countries. It is important to highlight that sexuality education curricula in the Republic of Moldova and Georgia scored 61 per cent and 30.5 per cent, respectively, on concepts and learning objectives for the 5–8 age group. Meanwhile, in Kyrgyzstan and Tajikistan this age group remains overlooked.

Teaching and learning approaches and environment

All countries integrate learner-centred learning techniques and employ different teaching strategies for sexuality education, including participatory methods (on average, 52.5 per cent of teaching and learning standards were met). Teachers mostly have access to materials and guidelines that integrate learning objectives and pedagogical approaches. However, sometimes there are not enough materials, and they are not always piloted for use. The situation with textbooks and study materials for students is more challenging; the four countries pointed out that there is a lack of suitable and comprehensive materials. Some student materials could be found online or are provided by international organizations without being a direct part

of the official curricula. There is also a lack of school-based SRH services and commodities, including contraception. In countries where school-based health services exist, nurses often do not have guidelines or a mandate to provide relevant information. In the Republic of Moldova, for example, teachers are trained to refer students to medical and social services.

Teacher training

Competence and preparation on the part of teachers are central aspects of good-quality CSE. Teacher training remains patchy in all four countries and on average meets 39 per cent of the required standards. There is high demand for pre- and in-service teacher training that integrates skills, competencies and aspects of CSE, including norms, attitudes, communication with parents and response to violence. Joint initiatives with international and civil society organizations exist to provide professional support to teachers.

Monitoring and evaluation

This is one of the weakest components of all programmes in three of the four countries, alongside content (meeting 22 per cent of standards on average). Sexuality education is rarely an examinable subject, and there are hardly any systematic efforts to collect data on its delivery, quality, costs and effectiveness. In some instances, national data are available on SRH needs and indicators in respect of young people (e.g. national HIV indicators, Demographic Health Surveys [DHS] and the Health Behaviour in School-aged Children [HBSC] study).



Photo: UNFPA Republic of Moldova/Vladislav Culiomza

Summary of the findings

The table below summarizes the SERAT scores per section, and it demonstrates each sexuality education programme's strengths and areas for improvement.

Table 1. SERAT scores* per country and section

SERAT section	Republic of Moldova	Georgia	Tajikistan	Kyrgyzstan	Average for all countries
Legal and policy context	86%	75%	40%	66%	67%
Objectives and principles	58%	43%	67%	50%	54%
Content (ages 5–8)	61%	31%	2%	0%	23%
Content (ages 9–12)	51%	5%	4%	7%	29%
Content (ages 12–15)	55%	18%	19%	25%	29%
Content (ages 15–18+)	39%	11%	24%	15%	22%
Integration into the official curriculum	50%	28%	15%	15%	27%
Teaching and learning approaches and environment	49%	66%	50%	46%	53%
Teacher training	50%	24%	42%	41%	39%
Monitoring and evaluation	44%	21%	24%	0%	22%
Average for all sections	53%	33%	28%	26%	36%

Source: Data collected through the SERAT tool in Georgia, Kyrgyzstan, the Republic of Moldova and Tajikistan.

* The formula for determining the weighted score ("present" x 1 [100%] + "present to some extent" x 0.5 [50%]) is outlined in a 2021 global status report on comprehensive sexuality education produced by several UN agencies, including UNFPA.⁴ The percentages for "present" and "present to some extent" are derived from the graphs automatically generated by SERAT.



Photo: UNFPA, Kyrgyzstan/Kanat Kubatbekov

4. UNESCO and others, *The Journey towards Comprehensive Sexuality Education: Global Status Report* (Paris, UNESCO, 2021).

Conclusions and recommendations

This study demonstrates that the four countries assessed are on a positive track in implementing and expanding their sexuality education programmes, which are supported by a favourable legal and policy environment. However, gaps still remain in teacher training, monitoring and evaluation, and the comprehensiveness of the delivered content. These findings resonate with the available evidence, including the most recent study commissioned by the International Planned Parenthood Federation European Network and BZgA (2016–2017) in 25 countries of the WHO European region, which included Georgia, Kyrgyzstan and Tajikistan.

Outlined below are the broad categories of recommendations derived from the findings, which should be refined and converted into advocacy efforts in each country:

- Enhance content in all age groups.
- Improve teacher training (pre- and in-service) and provide materials (digital and print) to teachers and students that include age-specific CSE topics.
- Strengthen links with services, including youth-friendly centres, or if the services are available in schools, make sure that SRH issues are adequately addressed.
- Involve relevant stakeholders in programmes and curricula development and ensure that mechanisms for youth participation are in place.
- Introduce indicators to monitor the delivery, quality and impact of sexuality education.

Acknowledgments

We would like to thank the national consultants and UNFPA focal points and governmental counterparts in the four assessed countries who performed desk reviews, collected data and drafted the national reports. We thank all the participants for their time and valuable input during interviews and discussions.

5. Evert Ketting and Olena Ivanova, *Sexuality Education in Europe and Central Asia: State of the Art and Recent Developments* (Cologne, Federal Centre for Health Education and International Planned Parenthood Federation European Network, 2018). Available at <https://www.bzga-whocc.de/en/publications/studies/> (accessed on 4 January 2023).

