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BY

SARA A. HANAFY,
OMNEYA G. ELSHARKAWY,
MOHAMED A. ABDELBAQY,
MAY M. TEWFIK,
IBRAHIM KHARBOUSH,
ADEL MALEK,
AND HANAA M. ISMAIL

MINDING THE GAP IN ALEXANDRIA

TALKING TO GIRLS IN SCHOOLS ABOUT REPRODUCTIVE HEALTH

Reproductive health (RH) is one of the cornerstones of an individual's health and well-being, and an important component of a country's human social development. Universal access to reproductive health services is a target under the Millennium Development Goals, reflecting international consensus that RH issues are linked to development, social justice, human rights, and gender equality.¹ Limited access to RH information among female adolescents can increase their vulnerability to health problems. Therefore, it is important to provide them with accurate and age-appropriate information.

But in the Middle East and North Africa, cultural norms dictate that girls should not be exposed to information about RH until they are married. Providing unmarried girls with RH information, education, counseling, and services has long been a challenge because of cultural, social, and religious sensitivities.

This working paper presents key findings of a recent study conducted by the Alexandria Regional Centre for Women's Health and Development, Egypt, highlighting gaps between female adolescents' needs for appropriate RH information and what they actually have access to, as expressed by the girls. The study, covering the Alexandria Governorate, also reveals that school teachers, doctors, and social workers are unprepared to take on the task of accurately informing young girls about RH and responding to their questions and concerns. Both the girls and the school officials expressed a desire to gain the information and skills to address these gaps.

Current RH Education in Schools

While schools can serve as secure venues to inform young people about reproductive health, young Egyptians receive insufficient RH education through the formal school system. Rather, they rely mainly on their peers for information.² The 2009 *Survey of Young People in Egypt* shows that less than 15 percent of boys and only 5 percent of girls received information on puberty in schools. More than 50

percent of young men and 25 percent of young women relied on their friends for this information, yet their friends were an unsatisfactory source to half of them.³

The coverage of RH topics in standard school curricula in Egypt is not only limited, but is often skipped by teachers because they are embarrassed and feel unprepared to discuss these topics with their students. Neither teachers nor school doctors and social workers receive any special training to prepare them for discussing these issues with their students. Thus, due to the marginalization of RH topics by school authorities, an important opportunity to educate adolescent girls is lost, leaving profound gaps in girls' knowledge, attitudes, and practices.

Alexandria Reproductive Health Project

With the support of the Ford Foundation office in Cairo, the Alexandria Regional Centre for Women's Health and Development is implementing the "Reproductive Health Awareness Program Among Female Youth in Secondary Schools in Alexandria." The goal of the project is to raise awareness about the needs of adolescent girls for age-appropriate RH information by identifying gaps that exists in the school system for meeting such needs.

SARA AHMED HANAFY participated in a joint PRB-Assiut University training on policy communication held in Hurghada, Egypt, in October 2011, and helped prepare this report. She is a research program officer at the Research and Community Development Unit, Alexandria Regional Centre for Women's Health and Development. Hanafy is also an MPH candidate in the High Institute of Public Health at Alexandria University, Egypt. This paper is based on some of the findings of an ongoing project conducted by the centre. Hanafy can be reached at sarahanafy25@gmail.com.

The two-year project (2011-2012) has three components:

- **Research** that includes both qualitative and quantitative data collection, as well as interventions to test different approaches.
- **Training and development** of a culturally sensitive model for integrating RH into school curricula and activities that can meet girls' needs for correct information as well as respond to their concerns.
- **Testing** that applies the model in various schools and assesses its impact.

The project began with qualitative research, collecting data on knowledge and attitudes of teachers, school doctors, and social workers in secondary schools in Alexandria Governorate to identify barriers they face and how they can strengthen their potential role for communicating RH information to girls. After obtaining permission from Egyptian government authorities to involve students and school staff in the study, the Alexandria Centre conducted four separate focus group meetings with 22 school doctors, 15 teachers, 16 social workers, and 15 girls at its headquarters from March to April 2011. The key findings from these focus groups are presented below.

Girls Know Little About Reproductive Health

In their focus group meetings, the school staff alarmingly pointed at the girls' lack of correct knowledge about RH, and thought that misinformation was more prevalent among girls than boys. Several noted that part of the problem of misinformation is due to cultural norms about where and how girls and adolescents can discuss RH issues:

"Of course girls are reluctant to ask for help from adults in their family or at school because a good girl shouldn't speak about these sensitive issues." *School social worker*

"Girls rely on dangerous untrustworthy sources of information, primarily their peers, followed by the media and the Internet." *School doctor*

"Some girls have insufficient or lack of information while others have wrong or misleading information." *Teacher*

"Peers are the most influential source of information to girls while a parent is the last source they can use." *School social worker*

On the other hand, many students in the focus group said that their mother was their preferred source of information on RH (followed by their peers). But they also expressed reticence in talking to their mothers due to their shyness and their mothers' lack of knowledge.

"I prefer to ask my mother, but I feel shy to talk with her about these issues."

"I feel comfortable to talk with my friend because she is my age."

"My mother doesn't give me the answer I need and she feels shy."

Students were equally hesitant to seek information from their school staff. Shyness was the main barrier faced by girls, preventing them from seeking advice from their school teachers, doctors, or social workers.

"I am afraid of being misunderstood. I am not allowed to talk about these issues while in this young age group."

"It's not appropriate to ask adults for advice due to cultural and social norms."

Common Communication Challenges

In asking school teachers, doctors, and social workers about barriers they face in discussing RH issues with their female students, they all agreed that they were not comfortable in addressing them. Reasons included their limited communication skills and knowledge about RH, concerns about responding to unexpected questions, and the lack of support from school authorities.

"The topic of reproductive health is already marginalized by the school authority, so why should I take the risk of talking about this sensitive issue?"

"We are overburdened by our limited reproductive health communication skills, so we feel uncomfortable and embarrassed."

"We lack the required proper reproductive health information that is related to this age group."

"We are afraid to initiate a discussion because we don't feel confident about responding to various questions that may be raised."

Staff also acknowledged cultural norms as a significant barrier to talking about RH. School staff admitted to lack of knowledge on these issues and the communication skills to be able to overcome cultural barriers and talk to girls about sensitive topics. Concerns about confidentiality or backlash from parents who believe teachers should not give this information to their daughters were other reasons preventing communication between students and staff.

"I feel that my knowledge on reproductive health is limited, so I omit the topic while teaching." *Teacher*

"We describe our level of knowledge on reproductive health as medium-to-low. Our sources of information are mainly through TV shows, reading, and the Internet." *Teachers and school social workers*

"I think girls don't seek advice on reproductive health problems at school because they lack trust in the confidentiality and fear that their request for advice could be leaked to school authorities." *School doctor*

"Parents may express their reservations if we talk with the girls about this issue." *Teachers and school social workers*

Students and Staff Want to Increase Knowledge

All the school staff members who participated in the focus groups said that keeping girls in the dark about RH is hazardous to their health and well-being. They showed a positive attitude and a willingness to try to overcome these challenges and strengthen their role in communicating appropriate RH information to their female students. As one official said, "Girls should have correct knowledge on reproductive health but within cultural and religious boundaries."

Several staff also acknowledged that schools can be an appropriate and safe venue to convey this information to girls, saying:

"Schools are an important and secure venue to properly inform girls about reproductive health." *School doctor*

"We are supposed to prepare healthy future wives and mothers." *School social worker*

The students in the study also agreed on the importance of learning about RH while they are in school, stating, "We have limited knowledge so it is important to gain more information if it's within culture and norms."

Together, these data suggest that both adolescent girls and school officials are aware of the gaps in communication and knowledge about RH. Both acknowledged the importance of closing this gap and wanted to gain the skills and knowledge to begin that process.

Road Map for Intervention

All the school teachers, doctors, and social workers who participated in the focus groups agreed to continue their collaboration with the second phase of the project (the intervention component) and to receive training to increase their knowledge on RH issues related to adolescent girls and improve their communication skills. These school officials specified certain criteria and a "road map" that they deemed necessary for initiating effective communication channels between school officials and students on RH.

They proposed the following next steps:

- To obtain necessary approvals from authorities in ministries of health and education.
- To establish a task force in all secondary schools for girls in the Alexandria Governorate, consisting of representatives from teachers, doctors, and social workers from the school.
- To develop and conduct unified training programs for members of the task forces on RH topics and communication skills.
- To provide resource materials in schools, such as booklets on girls' RH and guides to frequently asked questions.
- To assist members of the task forces in achieving their goal of communicating relevant and quality RH information to female students.

References

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- 3 Population Council, *Survey of Young People in Egypt, Final Report, 2010* (Cairo: Population Council, 2010).

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Alexandria Regional Centre for
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مركز الإسكندرية الإقليمي لصحة وتنمية المرأة

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1875 Connecticut Ave., NW 202 483 1100 **PHONE**
Suite 520 202 328 3937 **FAX**
Washington, DC 20009 USA popref@prb.org **E-MAIL**