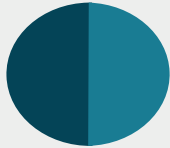
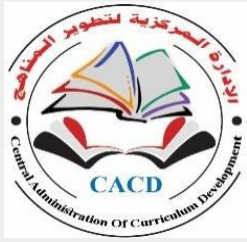


Integrating Life Skills Related to Reproductive Health Education from a Social Gender Perspective in the Lebanese Pre-University Curricula

Professor Hyam Ishac





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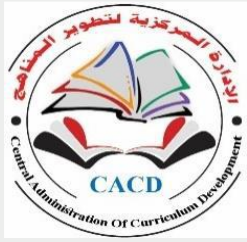


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Integrating Life Skills Related to Reproductive Health Education from a Social Gender Perspective in the Lebanese Pre-University Curricula





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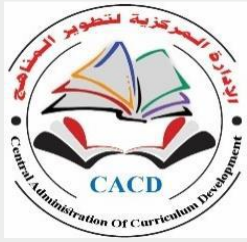


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It exists, and like everything that exists, it should be taught. For if we lag, we would have failed in preparing our children and raising their consciousness, hence retiring from our educational responsibility to guide them and consequently leaving life to fill the emptiness we left in a damaging and harmful manner.

(Reboul cite dans Desaulniers, 1995, préface)



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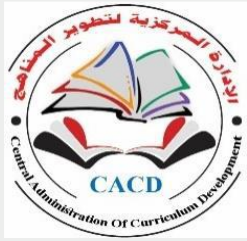
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First: Knowledge, Perceptions, Attitudes, and Behaviors of Teenage Learners in Lebanese Secondary Schools Regarding the Concepts of Reproductive Health Education

Source: Field study concerning "Education and Reproductive Health Knowledge among Teenagers: Reality and Numbers", 2008, as a part of Dr. Hyam Ishacs' PhD dissertation.





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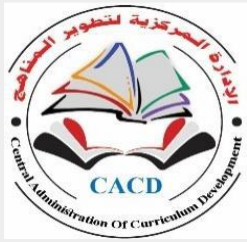
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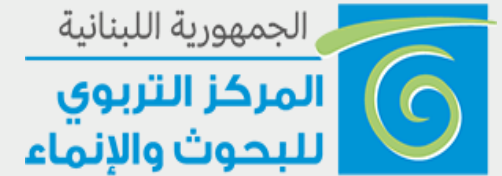
1. Knowledge of Teenage Learners at Lebanese Secondary Schools Regarding the Concepts of Reproductive Health



The survey included the topics of sexual relationships, contraceptives, masturbation, sexually transmitted diseases, and sexual violence in order to estimate Lebanese teenagers' knowledge of sex-related topics.



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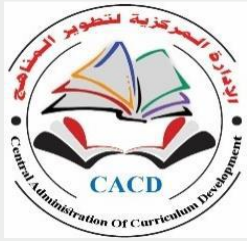
1.1-Sexual Relationships

9% of the learners believe that outercourse and touch result in pregnancy.

23% of them believe that any sexual relationship definitely leads to childbirth.

72% believe that intercourse with a virgin definitely leads to bleeding.

These results clearly reveal that Lebanese learners lack adequate information about sexual relationships.



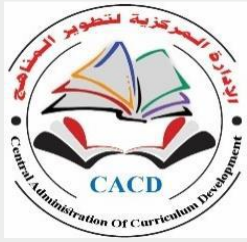
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1.2- Contraceptives

76% of learners successfully identified what contraception really means.

14% of them mixed between contraceptive methods on one hand and abortion on the other.



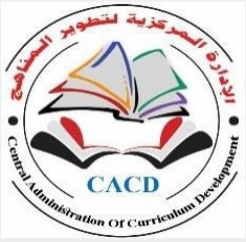
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1.3- Masturbation



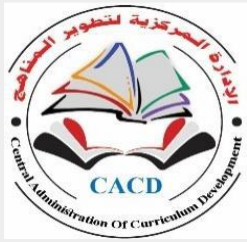
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While 46% of learners believe that masturbation is a source of subsequent diseases and infections, 48% disagree.



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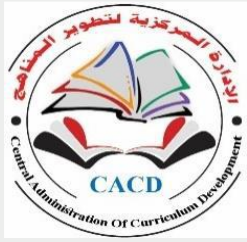
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1.4- Sexual Diseases and Infections

Mentioned Diseases	Percentage of the Sample
AIDS	19
Mental and Neurological Diseases	30
Microbial Infections	18
Various Pains (stomach and backaches, muscle weakness, hair loss, etc.)	16
Different diseases (tuberculosis, anemia, immunodeficiency, etc.)	16
Sexual Illnesses (impotence, premature ejaculation, sterility, etc.)	11

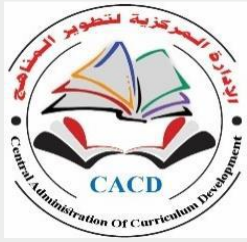
Transmitted Diseases	Percentage of the Sample
AIDS	84
Cancer	6
Syphilis	4
Infections	3
Other Infections	3



1.5- Sexual Abuse

Cases of Sexual Abuse	Percentage of the Sample
Some relations themselves	13
Rape	13
Incest	12
Call to participate in outercourse	11
Stripping	11
Homosexuality	11
Child pornography	11
Prostitution	11
Touching a child inappropriately	8

These results reveal that the learners are adequately educated regarding cases of sexual exploitation, abuse, and harassment.



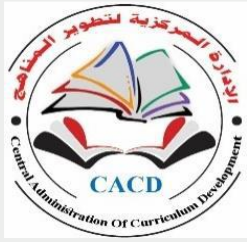
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Based on the results of the first level of reproductive health education (knowledge), we can deduce that the Lebanese teenagers don't have the necessary information that qualifies them to live a safe sexual life. Hence, it is vital to integrate reproductive health education into schools.



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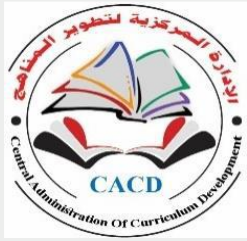
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2. Attitudes and Perceptions of Teenage Learners at Lebanese Secondary Schools Regarding Reproductive Health

This is the second level of knowledge that a learner acquires after information. Within this framework, we investigated perceptions and attitudes that relate to masturbation, premarital sex, the usage of condoms, AIDs, and sexual harassment, from the perspective of Lebanese teenagers.





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2.1- Masturbation

38% of learners believe that masturbation is a sin, which points out the impact of religious views on learners' perceptions and attitudes.



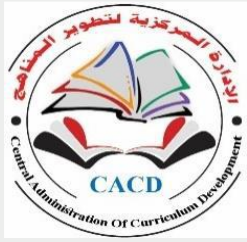
2.2 – Premarital Sex

29% of responding learners reported that they support premarital sex while 71% mentioned that they oppose it.

75% of premarital sex supporters believe that it builds sexual experiences and ensures harmony between the married couple, while the remaining respondents believe that it comes from the desire to fulfill sexual needs and feel free.

79% of learners against premarital sex relate their attitude to religious beliefs, while the others relate it to social or family beliefs.

Some families and religious figures believe that integrating reproductive health education into schools encourages premarital sex.



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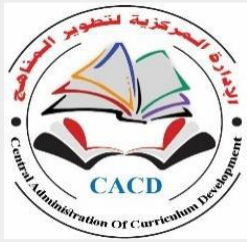


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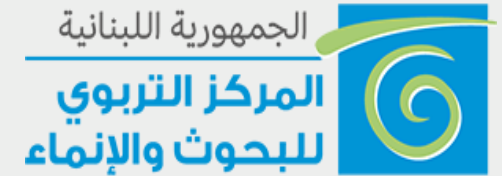


2.3- Using a Condom

84% of the
responding learners
support the use of a
condom during
intercourse.



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In case the partner refuses to use a condom,

37% of learners believe that they have to end the intercourse immediately

55% of learners believe that they have to persuade him to use it

5% do not mind continuing with the intercourse

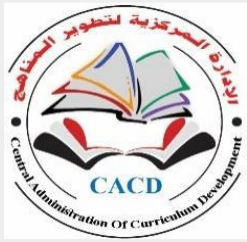


2.4 – Attitude towards carriers of AIDs

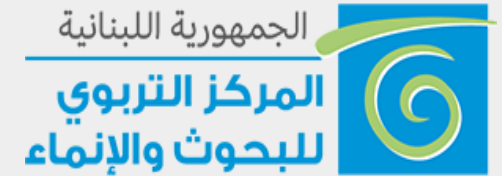
19% of learners
refuse to form
friendships with
a carrier of the
virus

27% of learners
refuse to take
care of an AIDS
patient

15% refuse even
to be in the same
classroom with a
carrier of the
virus



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5.2-Sexual Harassment

69% of learners believe that those who experience sexual harassment must inform their parents about it.

68% of them prefer seeking out a specialized doctor.

55% of them believe that they should inform a security body.

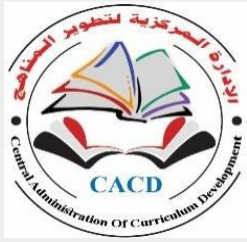
38% of them prefer seeking out a religious figure.

37% of them prefer going to a care center.

29% would rather seek out a friend to inform them about the issue.

6% of them prefer going to the school's administration.

2% prefer remaining silent, keeping the issue confidential and not raising it in public.



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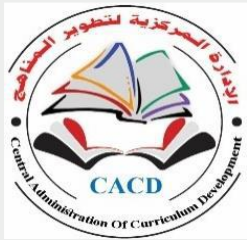
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3-The Behaviors of Teenage Learners in Lebanese Secondary Schools Regarding Reproductive Health Education



How does a teenage learner act in the course of communicating with his/her friends and family regarding the issues of sex, flirting, and sexual relationships?



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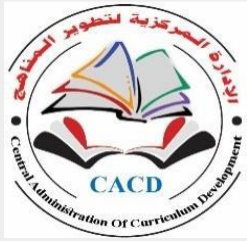
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3.1- Communication

70% of responding learners stated that they communicate with their friends about their sexual interests, while 41% said that they also communicate with their parents. The 59% who don't communicate with their parents cite many reasons that hinder communication, including:

Reasons for Not Communicating with Parents	Percentage %
Difficulty in communicating with them in general	56
Considering the issue of sex a taboo	37
Considering the issue of sex a private matter	8
Feeling shy when the conversation is about sex	7
Not finding a reason to open up a conversation about sex with parents	2



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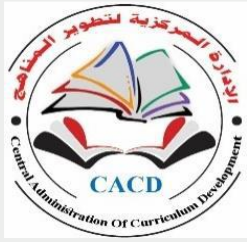


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Responses of these learners regarding the identity of the other person they seek out to talk to about the issue of sex, were as follows:

The Identity of the Other Person Talked to about the Issue of Sex	Percentage %
Friends	47
Relatives	18
Religious Figures	7
Doctors	5
Others	17



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Despite communicating with parents, learners still communicate with their friends to a greater degree.

They might also seek out more than one older experienced person in their surroundings rather than talking to their parents.

This clearly shows that there is an urgent need for guiding these teenagers and raising their awareness, as the relationship between parents and their children could be marred by alienation, especially during puberty.



3.2- Outercourse and Intercourse

43% of the responding learners declared that they preform outercourse while 11% of them reported that they had performed intercourse.

Most sexual relations among teenagers take place between the ages of 17 and 18.

The youngest known age for the first sexual relationship is between 9 and 13.

67% of the responding learners stated that they had used condoms during their first intercourse.

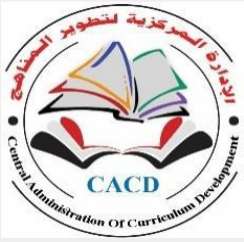
61% of the responding learners stated that they had used condoms during their last intercourse.



This clearly indicates that more than half of the responding learners live an active sexual life (outcourse or intercourse), with the greater majority not using protective methods.

This reflects the recklessness of teenagers as they engage in sexual activities as well as their disregard for the consequences that may result from these practices.

Therefore, we need to deeply work on the issue of reproductive health education and propose the methods that we must dive into to strongly raise the learners' awareness and awaken their consciousness about the dangers looming ahead.



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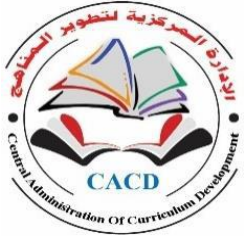


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4- An Untitled Film





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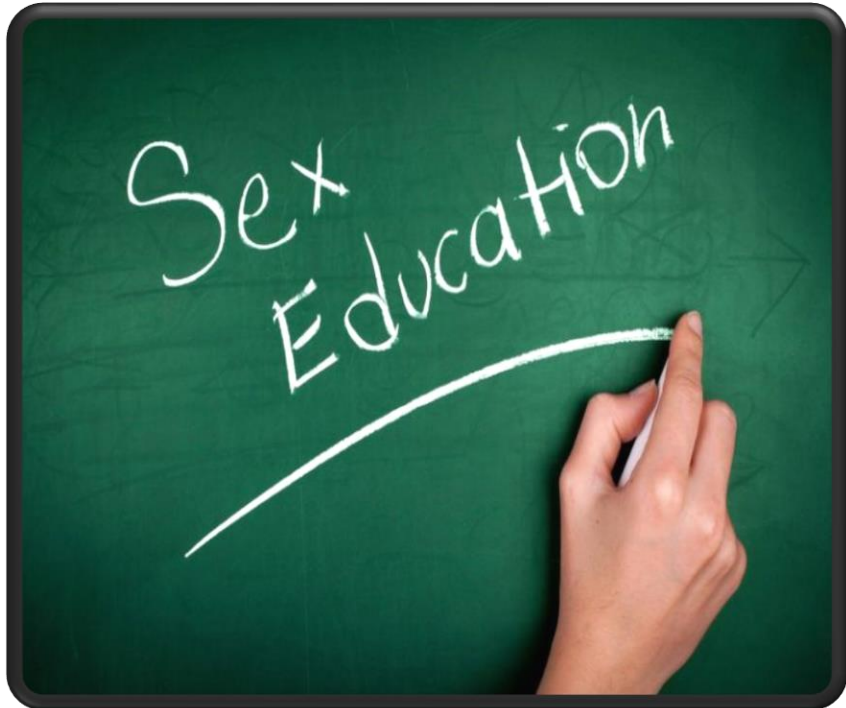


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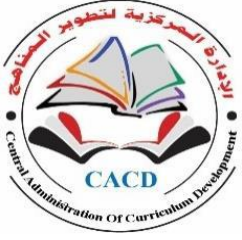


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Second: Reproductive Health Definition



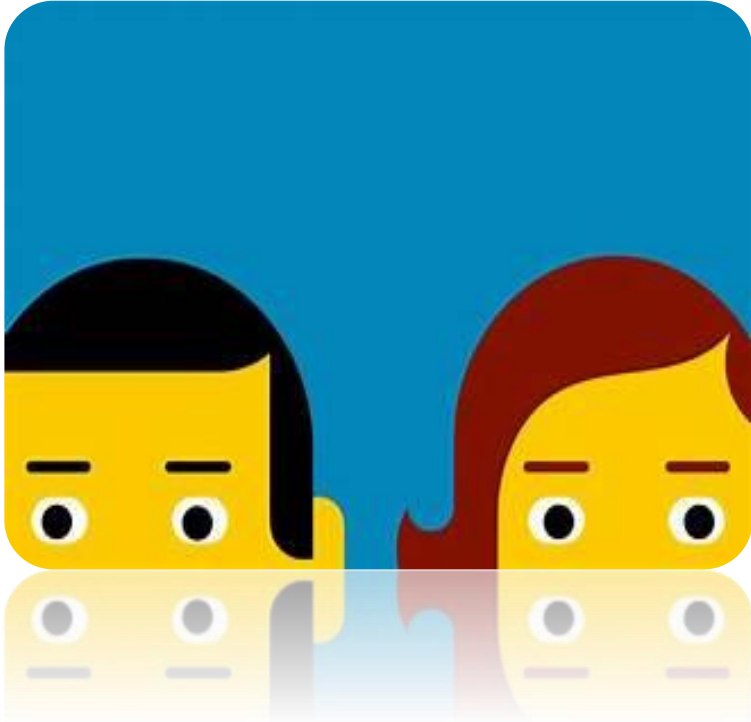
To define reproductive health education, we must pause at the concept of sex and its relation to the traditions and social values of a particular community (Béjin,1996) ،(Brenot, 1996).



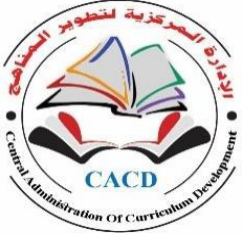
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According to F. Payen (1999), reproductive health education is based on the initiation and the training required to understand the commonly known practice within the social framework of sex.



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On this basis, reproductive health education becomes wide-ranged not only to include diverse physiological, psychological, or even physical information related to the sensual practice of making love, but exceeds this to consider the nature and value of sexual relationships.



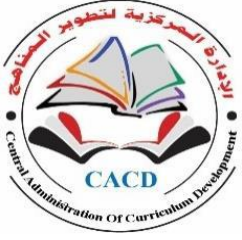
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We finalize the available literature on reproductive health education with (Tremblay) who suggests a multi-faceted approach towards the sexual process. It thus becomes a means for expressing our feelings as it includes a general view of all biological, psychological, social and moralistic domains.



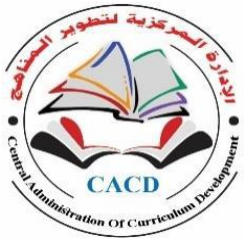
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As far as we are concerned, reproductive health education is a guiding and educational act in the subject of reproductive health to equip adolescents with the necessary information, perceptions and skills that allow them to:



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- Think of the topic of sex i.e. analyze and criticize the diverse, contradictory messages that they receive about this topic on daily basis and to recognize the outcomes and consequences of their sexual behaviors
- Be open sexually and emotionally and liberating themselves from the feeling of guilt towards the sexual process and performing sexual relationships
- Act responsibly and refuse to risk sexual life as well as all forms of harassment, exploitation and sex trade

Third: The Objectives of Reproductive Health

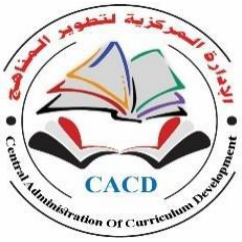
Understanding healthy sexual development and reaching a stage of sexual maturity in addition to the ability to maintain stable and responsible relationships

Empowering the ability to maintain a healthy relationship between the man and woman that is free from violence and other harmful practices related to reproductive life



Guaranteeing the basic right of all people to have access to the necessary information for determining the number of children

Preventing diseases and problems related to reproductive life and receiving appropriate care when needed



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Fourth: The Reality of Integrating the Concepts of Reproductive and Sexual Health in the Lebanese Pre-University General Curricula



The Pathway of the Project of Integrating Topics on Reproductive Health in the Curricula:

Applying the Peer Education project through Theater



Producing two reference guides



Integration

Documenting the best practices to develop a reproductive health curriculum



Producing the reproductive health curriculum



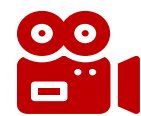
Capacity Building



Implementing several preliminary studies to examine the Lebanese reality

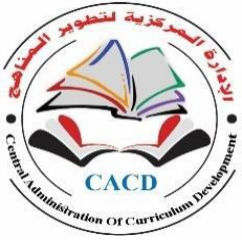


Producing an advocacy package consisting of two manuals and a film



Preparing various activities related to gaining the support of decision makers and prompting them to consider the importance of raising the youth's awareness on reproductive health concepts





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4.1 – Within the Framework of Gaining Support



Stakeholders and decision-makers have been encouraged and prompted to consider the importance of raising awareness among the youth regarding reproductive health concepts and social gender issues through multiple workshops and events.



4.2 – Conducted Studies

Some preliminary studies have been conducted to consider the Lebanese reality, and they include:



- Collecting previous experiences related to the field of population education at schools
- Considering the opinions of learners' parents concerning implementing topics on reproductive health and social gender at schools
- Examining the needs of school teachers in the domains of reproductive health and social gender
- Analyzing school textbooks on whether they contain topics about population education, including reproductive health and social gender



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- Conducting a Field study concerning "Education and Reproductive Health Knowledge among Teenagers: Reality and Numbers", 2008, as a part of **Professor Hyam Ishacs'** PhD dissertation.
- Conducting a study entitled “The Development of Reproductive Health Knowledge among the Lebanese Youth during the Past Ten Years_2018_”
by Professor Hyam Ishac_ Professor Elie Mikhael_ Mrs. Fatima Fadlallah

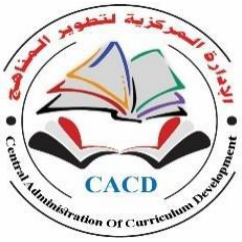


4.3- Raising Awareness

After analyzing the results of the preliminary studies that examined the Lebanese community, and based on the achieved results, an advocacy package for decision makers was produced. The package consists of a short film and two manuals:

- The first manual is directed towards the educational stakeholders/ policy makers
- The second manual addresses educators in the local community





- The short film sheds light on some of the conflicts that necessitate integrating reproductive health topics into schools.





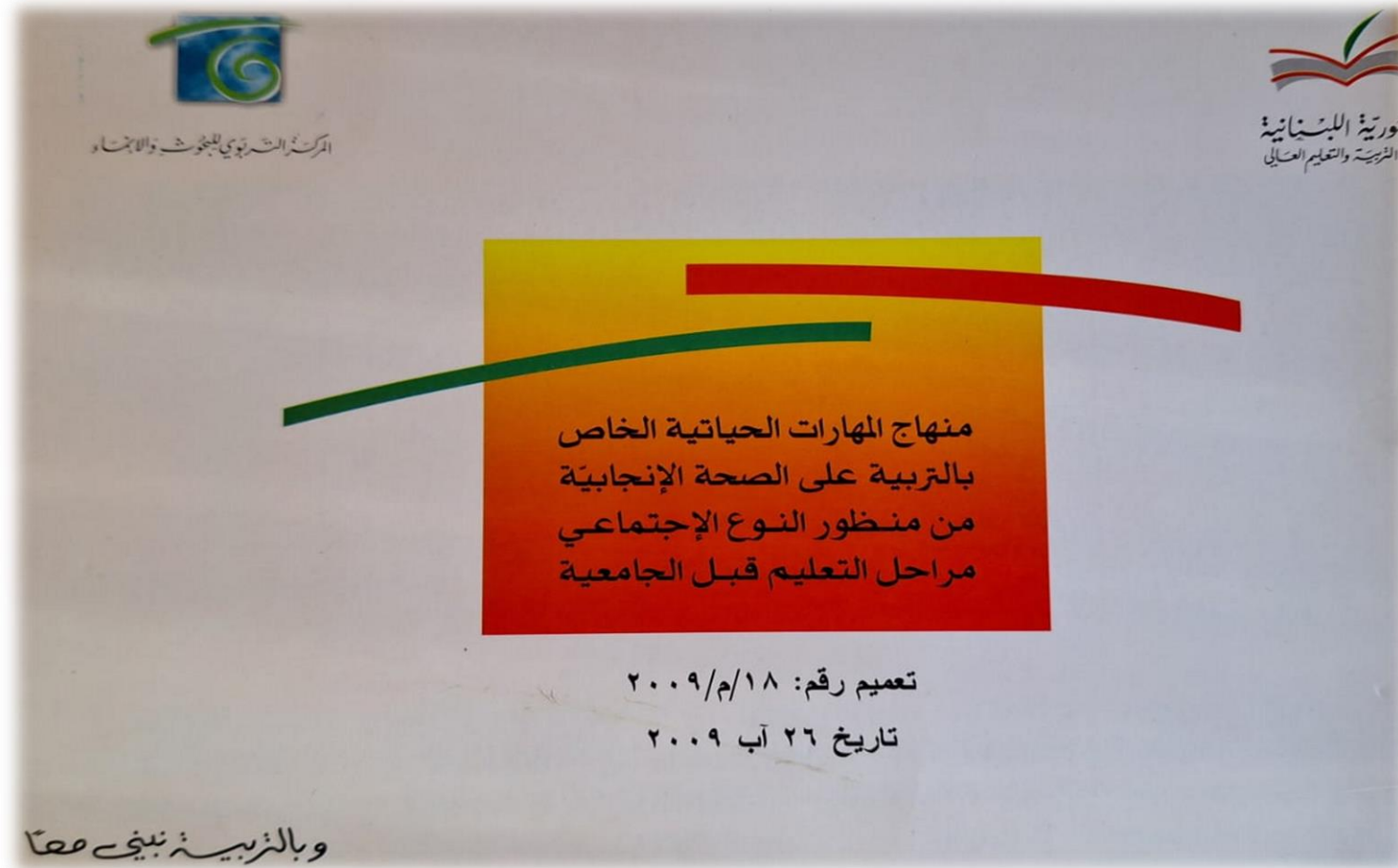
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4.4 – Producing the Reproductive Health Curriculum





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Over the course of two consecutive years, work was undertaken to develop a comprehensive curriculum titled:

" Life Skills Curriculum for Reproductive Health Education from a Social Gender Perspective for All Pre-University Education Stages."

This curriculum was approved through circular 18/M/2009, dated 26/8/2009 and issued by the Minister of Education and Higher Education.





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With the development of this curriculum, all elements to facilitate the process of integrating reproductive health education into the general education curricula and textbooks were set.

Curriculum developers categorized the learning objectives into two main groups: objectives related to scientific knowledge about reproductive health, and those related to life skills associated with reproductive health.



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The objectives agreed on in the field of reproductive health focus on the following issues:

1. Personal hygiene
2. Disease prevention, including prevention of sexual abuse and infection
3. Recognizing physiological and emotional changes in adolescents, including gender differences and accepting them

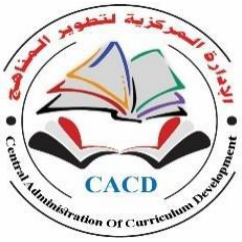


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As for the objectives related to life skills associated with reproductive health, they focus on the following issues:

1. Communication
2. Interpersonal skills
3. Advocacy skills
4. Negotiation and refusal skills
5. Decision-making and critical thinking skills
6. Adaptation and self-management skills
7. Stress management skills, self-confidence development, and self-regulation abilities
8. Taking responsibility and making a difference or a change

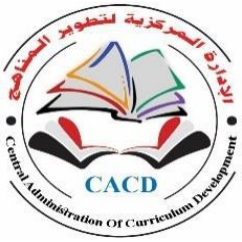


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Most of the methods proposed in the curriculum aim to encourage learners to think critically and view situations from different perspectives to avoid being passive recipients.

The curriculum covers the three cycles of Basic Education and the secondary stage, with two competencies allocated for each school year. These competencies are distributed within detailed tables that include learning objectives, specific objectives, content, and activities, with a section dedicated for comments.

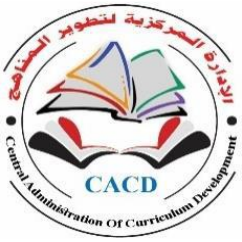


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The suggested topics and their content within the grades of each cycle, based on the learners' age groups, were as follows:

- **Topics suggested in Cycle I of Basic Education:** Personal Hygiene; Basic Needs for Healthy Growth; Risk Prevention; and Excessive Affection.
- **Topics suggested in Cycle II of Basic Education:** Physical, Psychological, and Emotional Changes during Growth; Child's Rights and Responsibilities.



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- **Topics suggested in Cycle III of Basic Education:** The Male and Female Reproductive System and Its Role; Sexually Transmitted Diseases; Life and Behavioral Problems Faced by Adolescents; Harassment; and Sexual Abuse.
- **Topics suggested in the Secondary Stage:** Gender Discrimination in Society and Laws Related to It, Violence and Sexual Assault; Childbirth and Prevention of Genetic and Reproductive Diseases; and Contraception Methods.



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4.5 - Documenting Best Practices for Developing a Reproductive Health Curriculum



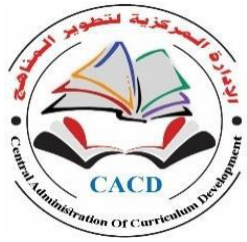
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The development of a life skills curriculum for reproductive health education from a social gender perspective has been a pioneering experience in Lebanon and the region. Therefore, "**Documenting Best Practices**" was framed to develop a reproductive health curriculum that serves as a reference for curriculum designers in Lebanon and the Arab region.



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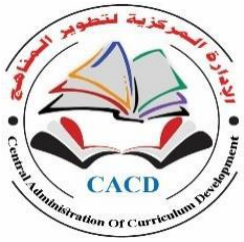


4.6 – Capacity Building





- A large number of teachers were trained on integrating "Reproductive Health and Social Gender Concepts" into their classroom as well as extracurricular activities.
- Several workshops were delivered for national trainers of the Continuous Training Program at the Center for Educational Research and Development (CRDP) with the aim of integrating "Reproductive Health and Social Gender Concepts" into their training plans all over Lebanon.



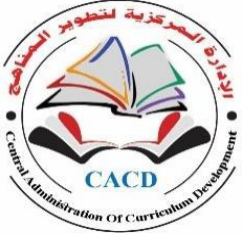
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- A number of counselors and health supervisors from the Department of Guidance and Counseling (DOPS) at the Ministry of Education and Higher Education (MEHE) have been trained on reproductive health topics.
- Training workshops were delivered for curriculum designers and textbook authors for the sake of integrating "Reproductive Health and Social Gender Concepts" into the curricula; within the framework of curriculum and textbook development.



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4.7 Peer Education Project through Theater





4.7.1 - Project Background

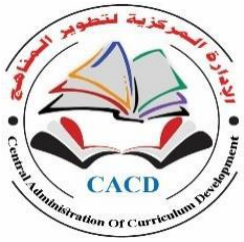


A series of training sessions were organized to introduce the methodology of Peer Education through Theater, for the sake of integrating the concepts related to reproductive health into lessons and extracurricular activity booklets.



4.7.2 - Overall Project Objective

The project aimed to empower a team of theater trainers from CRDP - in collaboration with health counselors from DOPS - on theatrical techniques in peer education to raise awareness among learners aged between 15 and 19 on risky behaviors, focusing on reproductive health including HIV/AIDS.



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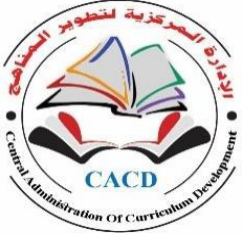


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Peer education can be conducted in small groups or through individual interactions in various settings such as schools, universities, clubs, and different youth gathering places.





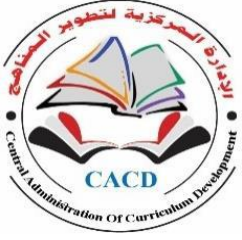
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Based on the results of some educational research and studies in this context, the most successful educational theater programs targeting youth are those designed and performed by the youth themselves after receiving training on theater techniques and peer education. These programs are usually supervised by a facilitator who intervenes after the show, inviting the audience to participate in a discussion with the actors to ensure that the health messages intended for each scene have been conveyed effectively.



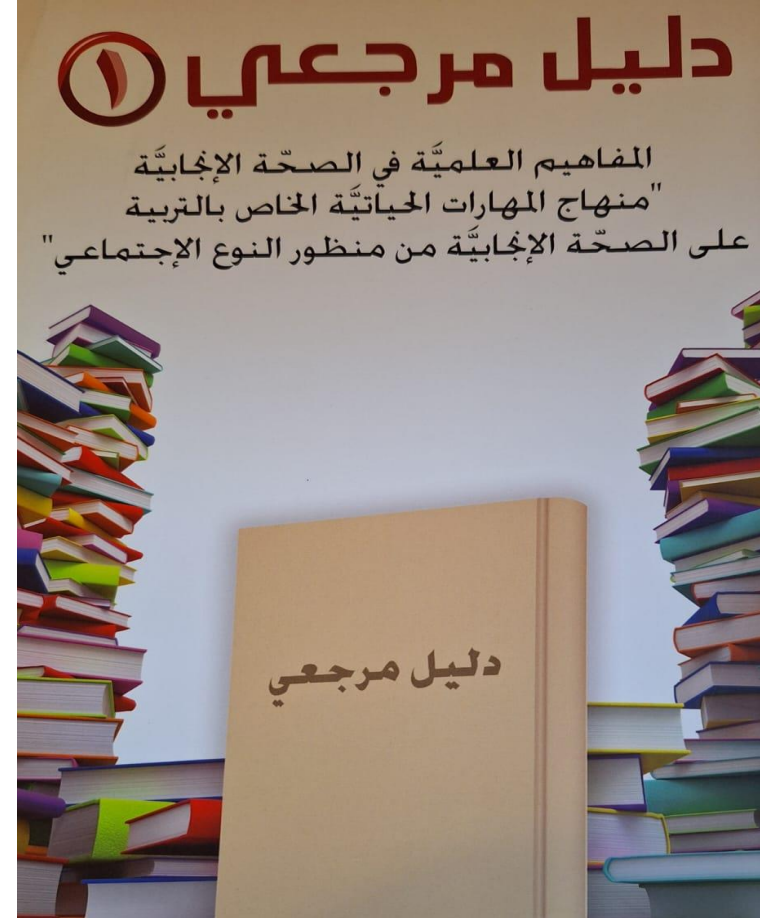
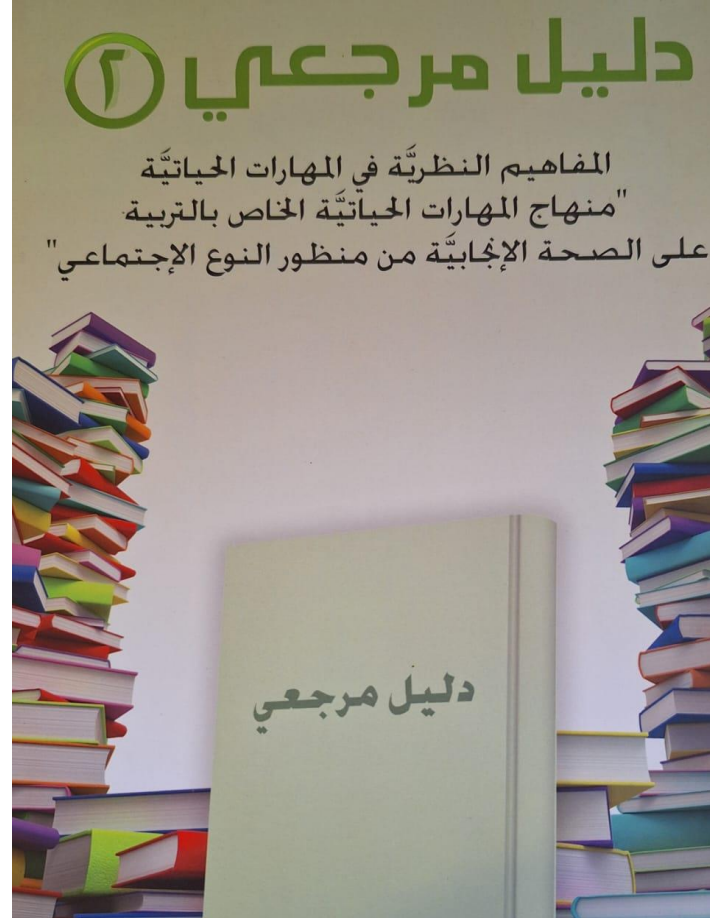
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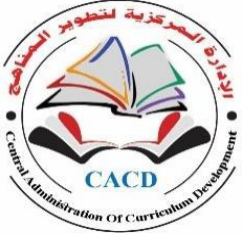


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4.8. Reference Guides

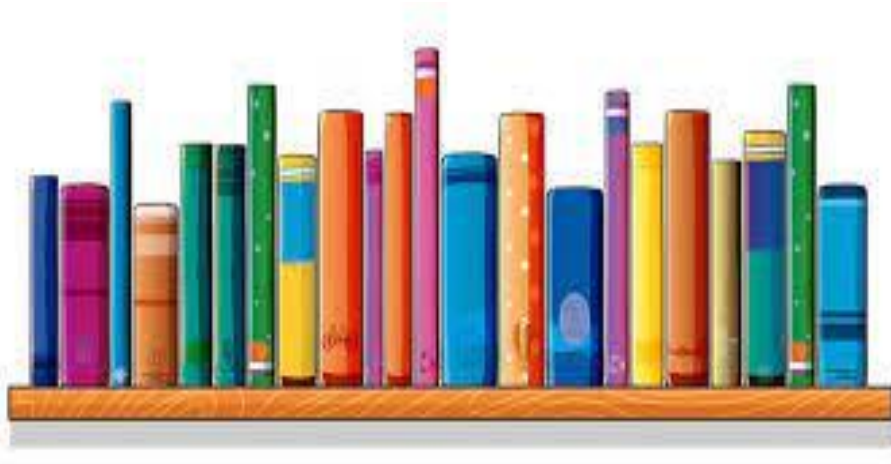




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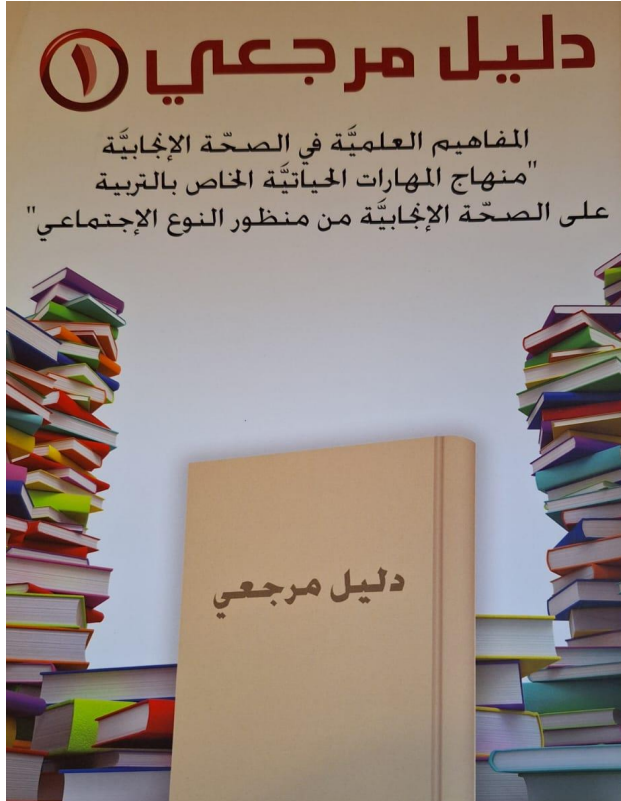
Two reference guides were produced within the framework of topics covered in the "Reproductive Health Curriculum": one which focuses on "Scientific Concepts" and another that focuses on "Life Skills" in reproductive health. These guides serve as references for curriculum designers, textbook authors, and all concerned educators.



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4.8.1 - Reference Guide (1): Scientific Concepts in Reproductive Health

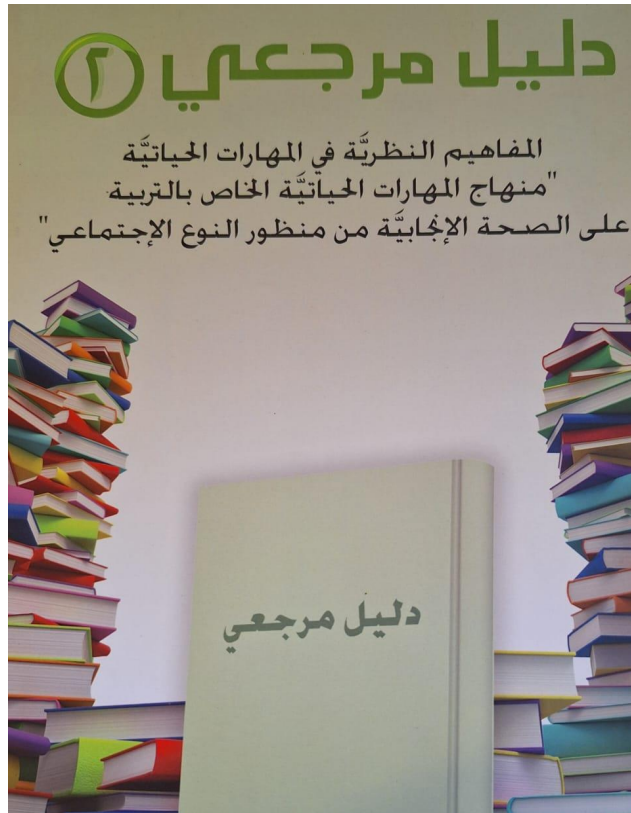


○ Guide Objective

This guide is based on the life skills curriculum and it aims at assisting educators in extracting and disseminating information related to reproductive health education in the classroom as well as through extracurricular activities.



4.8.2 - Reference Guide (2): Theoretical Concepts in Life Skills



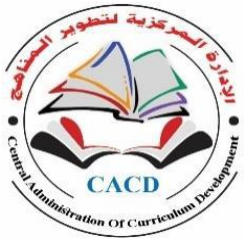
○ Guide Objective

This guide aims to introduce life skills in general and those related to reproductive health from a social gender perspective in particular. It further presents and details such specific skills according to each stage of education; i.e. Cycles I, II, and III of Basic Education in addition to the Secondary Stage.



4.9- Coordination and Networking





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CRDP has coordinated with various stakeholders within this framework and it created a network which includes:

- The General Directorate of Education and its affiliated directorates, educational inspectorate, and private educational institutions - Ministry of Education and Higher Education
- The Media, Education, and Communication project (in the field of Reproductive Health) and the Population Strategies Program - Ministry of Social Affairs
- Representatives from several associations and the Y-PEER education network among youth to draw on their expertise within the scope of the "Peer Education through Theater" project in the school setting



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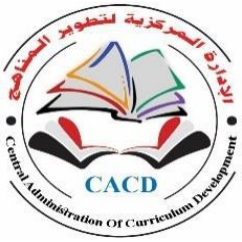


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Despite this, we are still facing several challenges in fostering health education and social development among learners.





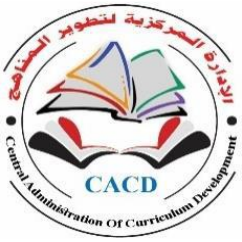
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4.10 – Challenges

○ 4.10.1 - Challenges Related to Learners

59% of school principals reported that learners face difficulties when taking the subject matter, while 41% did not mention any challenges. The most common challenge is the different levels of learners (49%), followed by misinformation and misconceptions among them (26%), considering the topic of sex a societal taboo (18%), and the socio-religious disparity (7%).



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4.10.2 - Operational Difficulties and Challenges

56% of interviewed principals reported that they faced operational difficulties while attempting to enhance learners' knowledge, skills, and attitudes towards reproductive health education both through classroom and extracurricular activities.

These difficulties were distributed as follows: staff shortage (32%), content development (24%), time constraints (16%), lack of resources (14%), and unfamiliarity with relevant methods (14%).



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4.10.3 - Challenges Related to Society

According to the interviewed principals, the biggest challenge hindering the development of reproductive health education in Lebanese schools is the pressure exerted by religious authorities on programs (37%), followed by considering reproductive health education a taboo in the Lebanese society (29%), parental resistance (25%), financial difficulties (5%), lack of educational guidance (2%), lack of a qualified program for reproductive health education (2%), and lack of expertise (2%).

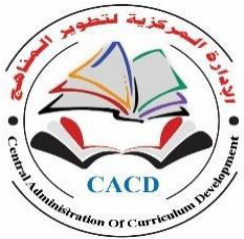


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4.10.4 - Obstacles to Integrating Reproductive Health Concepts into Pre-University General Education Curricula in Lebanon

The biggest challenge lies in the difficulties encountered by CRDP to develop pre-university education curricula despite the numerous attempts to do so. This consequently influenced the integration of a reproductive health curriculum into the general education curricula and textbooks. This could be attributed to several reasons such as the constant changes in political and educational decision-makers (which directly affected support and advocacy for the topic), logistic difficulties, and funding shortages, among many others.



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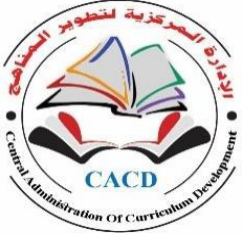
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Fifth: Methods of Implementing Reproductive Health Education in the Lebanese Curricula



Based on what was mentioned earlier, we would like to point out that work to integrate the reproductive health curriculum into public education curricula and textbooks is still in progress as a part of the current process of the curriculum development – noting that all this is taking place under the patronage of His Excellency the Minister of Education and Higher Education, Dr. Abbas Halabi, and the efforts of the CRDP President, professor Hyam Ishac.



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5.1- Highlighting the Pre-university Public Education Curriculum Development Project Currently Implemented by CRDP



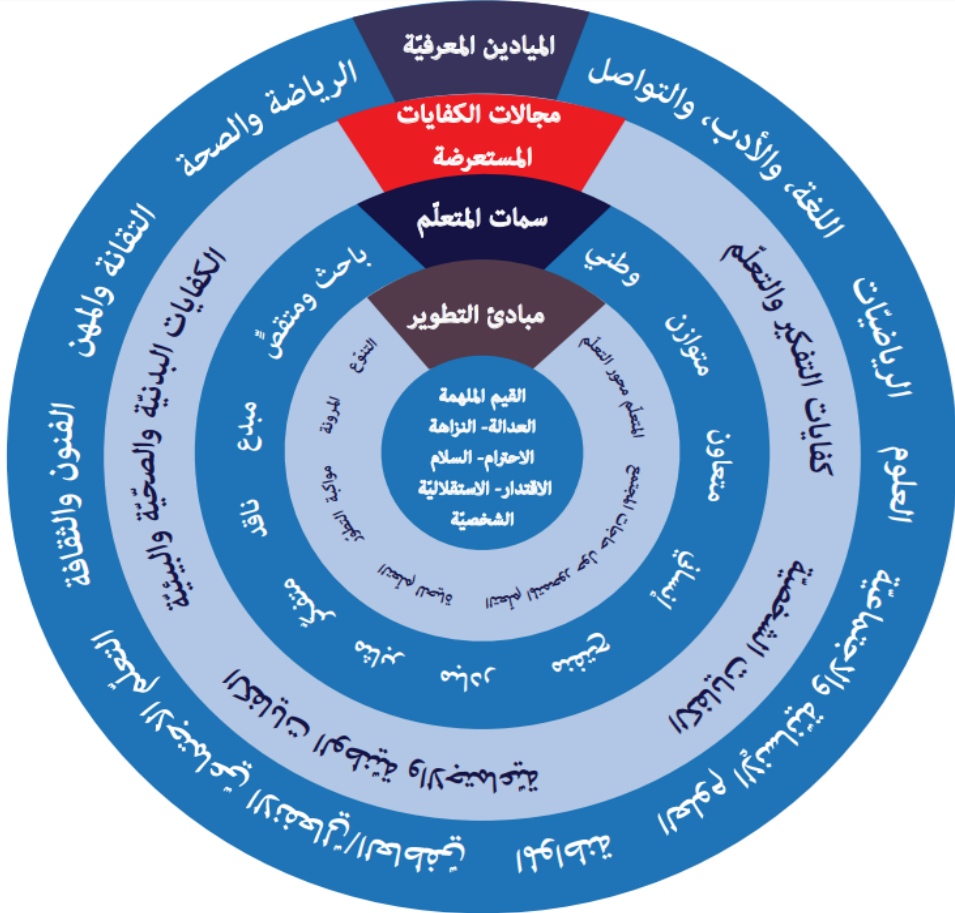
The national framework for developing the Lebanese curriculum outlines a clear, comprehensive, and visionary learner profile; defining him/her as a conscious, creative, and proactive citizen with advanced readiness to confront a changing future filled with challenges and crises.



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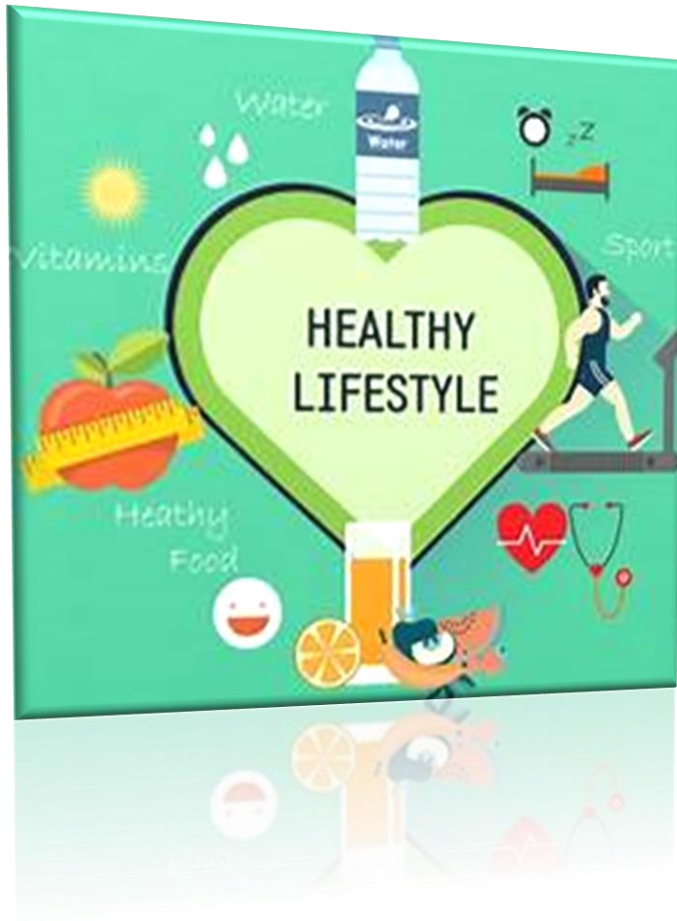
To achieve this profile, the National Framework has established a set of principles that will be adopted during the curriculum development process, centered around a range of foundational values, ethics, and accepted norms. Additionally, the Framework identifies a set of cognitive domains and core competencies necessary to achieve this profile, as illustrated in the attached diagram.



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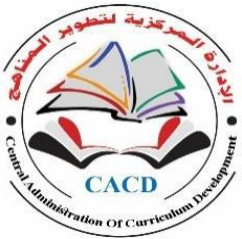


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The National Framework emphasizes the importance of education and health, considering both as essential pillars for developing human capital that impacts productivity, economic development, and individual well-being.

Furthermore, it views investment in education and health as a pathway out of poverty and an essential condition for improving living standards.



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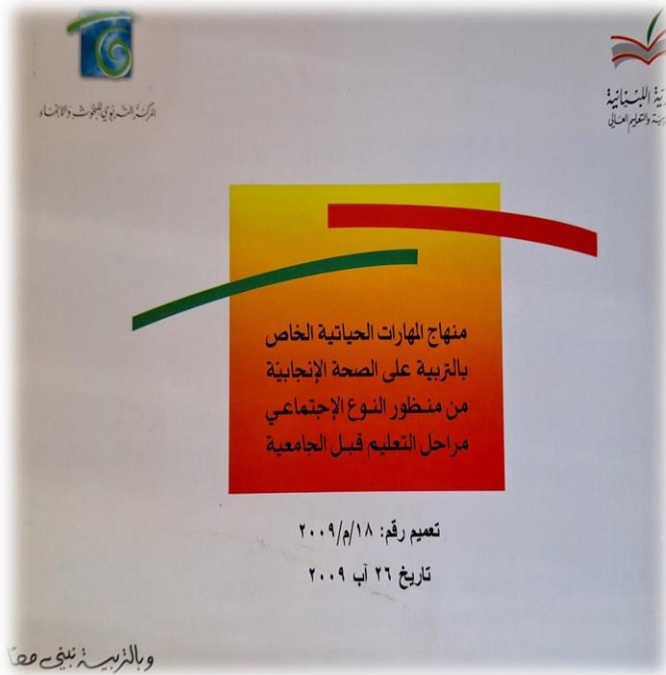


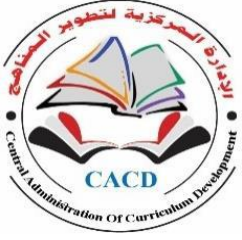
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5.2 - Reviewing the life skills curriculum for reproductive health education from a social gender perspective (issued in 2009)

It has become imperative to revisit the life skills curriculum for reproductive health education from a social gender perspective (issued in 2009), and adapt it in accordance with educational approaches to be adopted by CRDP. Such approaches seek to prepare learners to become citizens who possess the required reproductive health knowledge; and who have sufficient information needed to prevent risks associated with their sexual lives on the one hand and to foster perceptions and attitudes that ensure their openness and understanding on the other hand.





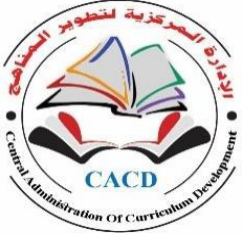
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Therefore, this framework has allocated a transversal competency related to health, termed "**Physical and Health Competency**", which aims to nurture learners in all health dimensions by adopting and practicing healthy habits and activities that correspond to a healthy and active lifestyle within a community open to all options. This is intended to enhance personal responsibility for maintaining one's health and that of others while respecting ethical principles, social justice, and social diversity, all in accordance with our national values.



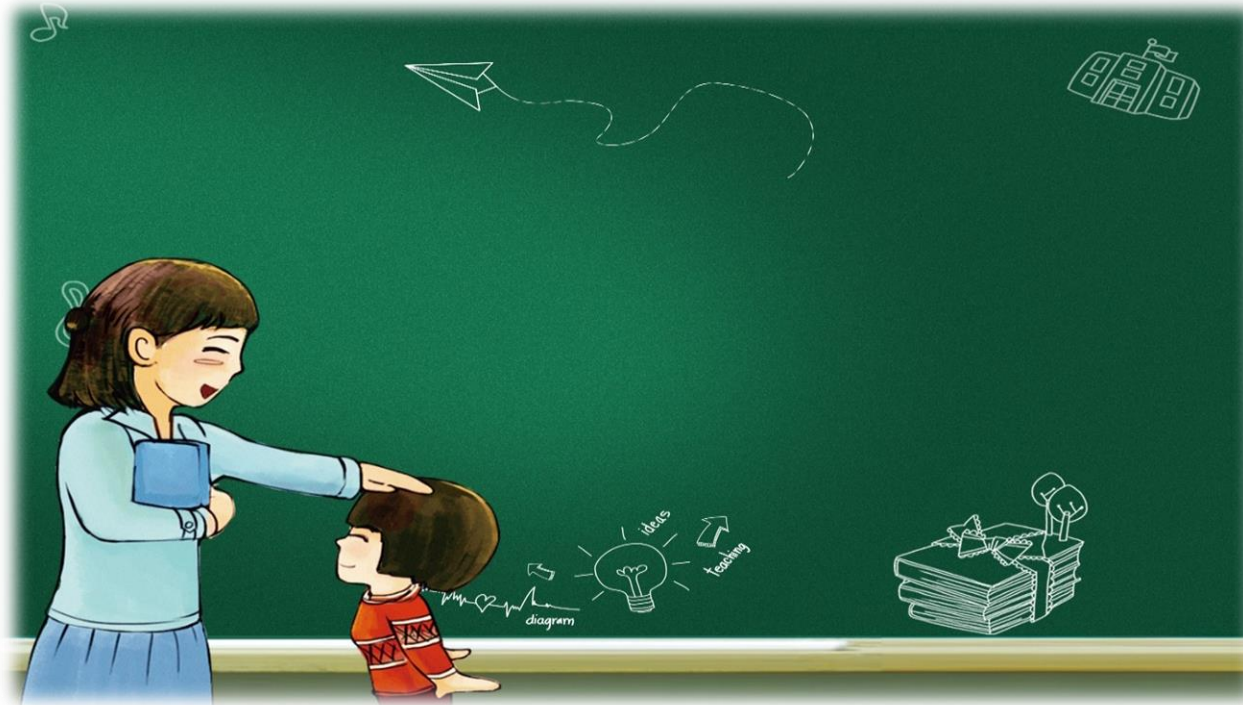
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It is expected for concepts related to reproductive health education to be included within the transversal competency related to health, "Physical and Health Competency," which will be within a separate subject called "Life and Social Activities" at all levels of Lebanese pre-university educational curricula.





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Therefore, through participating in relevant events and activities alongside other Arab countries such as Jordan, Morocco, Egypt, and Tunisia, we aim to exchange shared knowledge and benefit from various experiences in the field of reproductive health education. We also seek to explore the process of integrating this topic into its curricula and textbooks in order to come up with recommendations that assist in overcoming the main obstacles and challenges we may face in our country. This will help us to integrate life skills for reproductive health education from a social gender perspective into the Lebanese pre-university general education curricula.

Thank You!



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