SONKE GENDER JUSTICE

HIV/AIDS • GENDER EQUALITY • HUMAN RIGHTS

STAKEHOLDER ENGAGEMENT TOOLKIT

Developed for:

- Community and traditional leaders
- Religious leaders
- Parent teacher associations
- Teachers and school administrators
- Ministries of education and health
- CSOs and NGOs

This resource has been developed as part of Sonke Gender Justices' SRHR4All Programme: Toolkit and Digital Platform for Strengthening Accurate, Supportive Information on Age-Appropriate Comprehensive Sexuality Education and Learner Wellbeing.

Developed by **ALT Advisory** for Sonke Gender Justice. Designed by **Hunch**. **2026**

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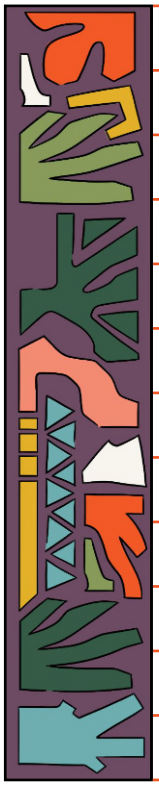
ACRONYMS



CBOs	Community-based organisations
CSE	Comprehensive Sexuality Education
CSO	Civil Society Organisations
GBV	Gender-based violence
HIV	Human immunodeficiency virus
LSE	Life Skills Education
NGO	Non-government organisation
SRHR	Sexual and Reproductive Health Rights
STIs	Sexually transmitted infections
UN	United Nations
UNESCO	UN Educational, Scientific and Cultural Organization
YPAR	Youth Participatory Action Research

Shared language helps us learn, connect and take action together.

INTRODUCTION

This Stakeholder Engagement Toolkit serves as a Comprehensive Sexuality Education (CSE) counter-messaging resource. It is developed in conjunction with a Digital Toolkit comprising of social media templates and a Digital Platform complete with ready to use information. All three of these resources seek to equip stakeholders with the necessary tools and resources to respond to anti-CSE messaging and to strengthen evidence-based, culturally appropriate CSE information.

It is designed to be used directly in a classroom, a community meeting, a policy briefing, or a media interview in a practical and useable manner. Each module builds toward a specific, practical output, and several modules include standalone resources designed to be used on their own with the appropriate audience.

This Toolkit is developed for:

- Community and traditional leaders.
- Religious leaders.
- Educators, including teachers and school administrators.
- Parents and parent teacher associations.
- Government stakeholders, including ministries of education and health.
- Non-governmental organisations (NGOs) and Civil Society Organisations (CSOs) working on sexual and reproductive health, education, or children's rights.
- Other actors working directly with communities on CSE acceptance and delivery.

Every module in this Toolkit leads with the values CSE already reflects such as **protection, care, dignity, responsibility and partnership** rather than opening with statistics, legal argument, or rights-based language. Starting from shared values can be a useful way to bring people to the table. Finding common ground tends to open conversations. Facts and evidence matter, and they appear throughout, but are used to support the values-based approach.

This approach is anchored in a single master narrative that every message in this Toolkit should trace back to:

> CSE **protects** young people so that they can grow up **healthy, safe** and **equipped** to build strong families and communities reflecting the very values of care, protection and responsibility that families, faiths and traditions already hold.

Much of the country specific findings and research that informed this Toolkit are based on Youth Participatory Action Research (YPAR) which was funded by Sonke Gender Justice, with technical support from the Centre for Human Rights at the University of Pretoria, financial and technical support from UNESCO and financial support from the Norwegian Agency for Development Cooperation (NORAD). This Research highlights youth voices as central to conversations around CSE and showcases their lived experiences within each of the three countries: Uganda, Malawi and Ethiopia. With over 1000 surveyed participants, these findings offer both quantitative and qualitative insights into how young Africans experience CSE, both in formal settings, such as schools and non-government organisation (NGO) programmes, and in social settings, such as peer groups and social media networks.

How to use this Toolkit

The Toolkit is organised into four modules, each building toward a practical, usable output:

UNDERSTANDING CSE

What CSE is, what it is not, and why it matters.

MODULE 1

THE EVIDENCE BASE

The regional and country-specific evidence.

MODULE 2

CLAIMS-RESPONSE MATRIX

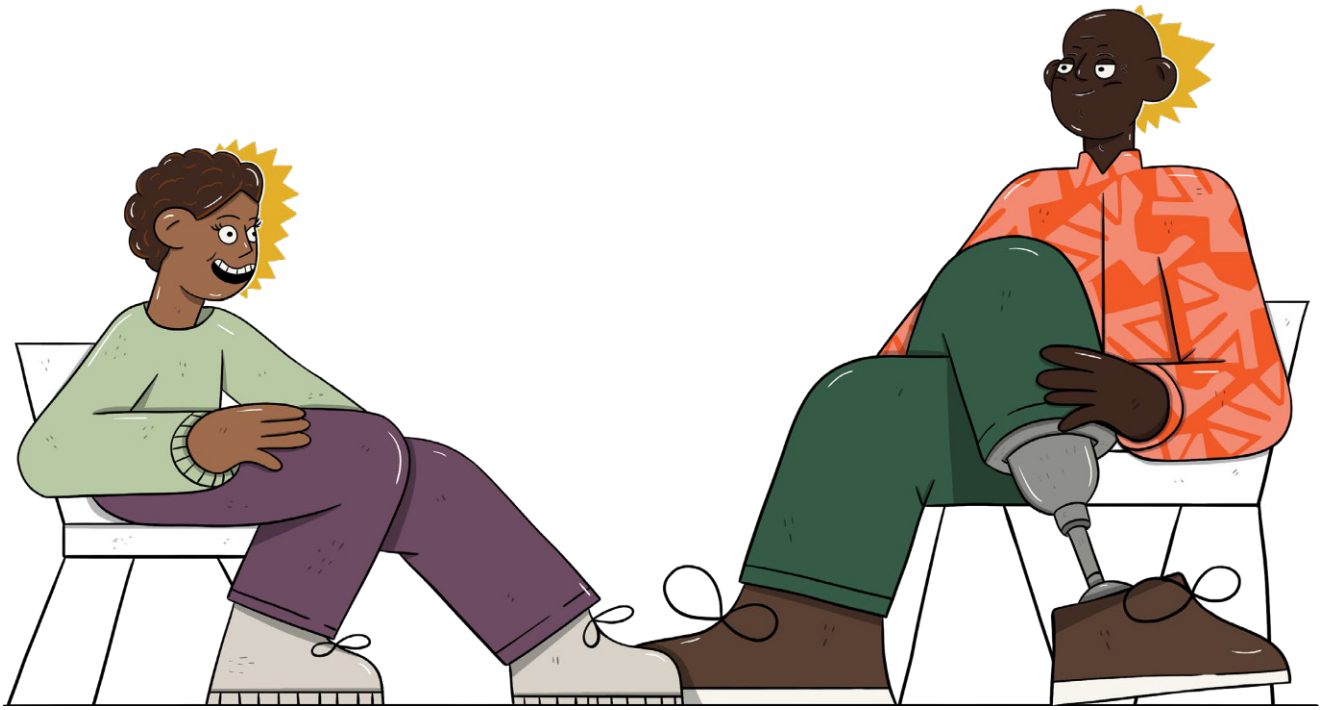
Direct, sourced responses to the dominant false and misleading claims about CSE.

MODULE 3

AUDIENCE-SPECIFIC MESSAGING GUIDES

Guides tailored to Community and Traditional Leaders, Religious Leaders, teachers and school administrators, parent teacher's Associations; ministries of education and health and civil society and NGOs.

MODULE 4



The Toolkit and its pull-outs are also available on the accompanying digital platform available at the button below, which allows content to be searched, filtered by audience, and downloaded individually rather than as a single long document.

Visit the Digital Platform

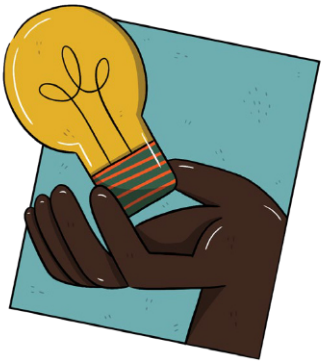
MODULE 1

UNDERSTANDING CSE

WHAT IT IS, WHAT IT IS NOT, AND WHY IT MATTERS

"Comprehensive Sexuality Education" is a technical term that UNESCO describes as a —

> *curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realise 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.*



This definition is useful when engaging with policymakers, media, and in formal written materials. However, the term CSE is rarely used in national policy in Malawi, Uganda or Ethiopia, and as such, is not easily recognisable by community audiences. To connect with more informal audiences such as parents, and community and religious leaders, it may be helpful to lead with that country's own familiar terms instead, rather than starting off with having to explain the acronym CSE. Once you have connected with the audience, the term CSE and its corresponding definition can be introduced.

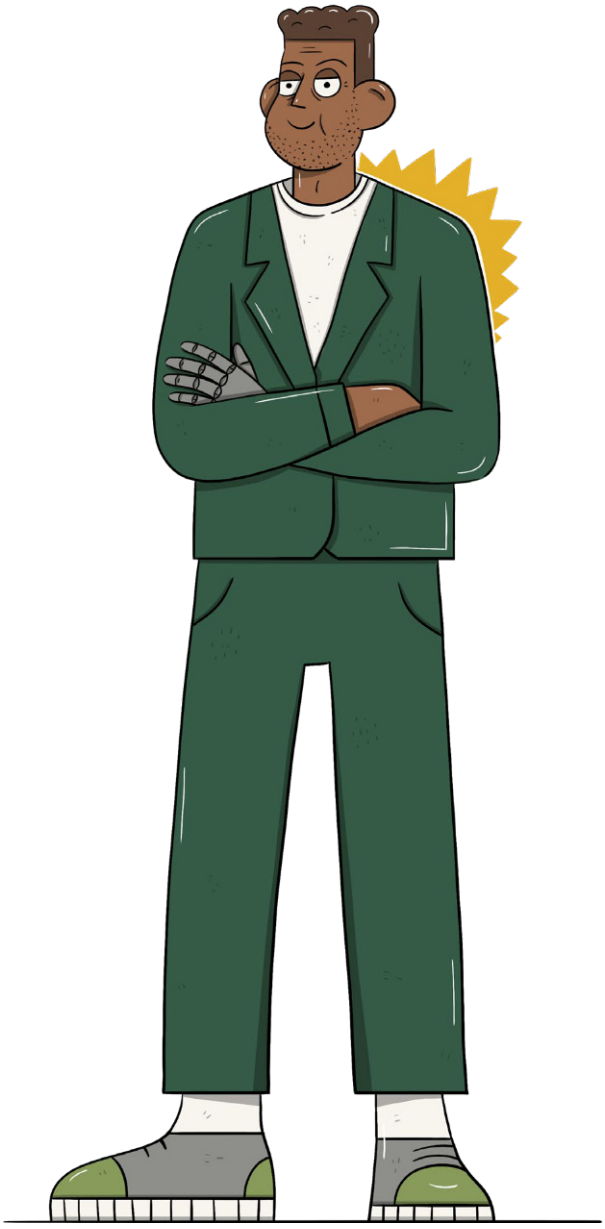
The below table shares some useful guidelines on what language may be more accessible within each country:

Malawi	"Life Skills Education" at primary level; "HIV Education" or "Sexual and Reproductive Health Education" at secondary level.
Uganda	"Sexuality Education" is taught as part of "Life Education".
Ethiopia	"Sexual education" "AIDS education" or "life-skills education".

In addition, this Toolkit centres around the following master narrative that connects the definition of CSE with the shared values and goals of individuals and communities:

> CSE **protects** young people so that they can grow up **healthy, safe and equipped** to build strong families and communities **reflecting the very values** of care, protection and responsibility that families, faiths and traditions already hold.

Every message in this Toolkit traces back to this statement, and to the three pillars below.



What CSE is?

In order to effectively counter mis and dis-information surrounding CSE, it is vital that stakeholders understand what it is, what it is not and why accurate and reliable CSE is important for individuals and communities to thrive.

CSE can be described using the below three pillars of:

PROTECTION

PARTNERSHIP

INVESTMENT

PROTECTION

CSE keeps children and young people safe from:
- HIV.
- Unintended pregnancy.
- Sexual violence; and Abuse.

This is directly relevant to the issues facing individuals in many African countries.

In Uganda, approximately 5,000 new HIV infections were recorded weekly in 2024, with 70% of these among adolescents and youth.

In Malawi, unsafe abortion is estimated to occur roughly 141,000 times annually, contributing to between 6–18% of maternal deaths.

While 13% of adolescent girls aged 15–19 in Ethiopia have begun childbearing.

This is exactly the kind of harm CSE is designed to help prevent.

PARTNERSHIP

CSE should be nationally owned and implemented. Its effectiveness depends on partnerships between:
- National ministries and education sectors; and
- families, faith and cultural communities.

For example:

Uganda's Ministry of Education and Sports developed and owns the National Sexuality Education Framework (2018).

Malawi's Ministry of Education, Science and Technology has overseen Life Skills Education since it was introduced in 2002; and

In Ethiopia, the Ministry of Health is responsible for delivery of "life skills" under the National Adolescent and Youth Health Strategy (2021–2025).

INVESTMENT

CSE is a smart, cost-effective investment in health, education and economic development. Evidence shows that CSE results in:
- Reduced adolescent pregnancy.
- Girls staying in school; and

That life-skills gains link to better long-term economic outcomes for young people and their communities.

AT A GLANCE

5,000

Weekly HIV infections in Uganda (2024)

141,000

Estimated unsafe abortions in Malawi

13%

Ethiopian girls aged 15–19 have begun childbearing

At their core, **UNESCO's technical guidance on sexuality education** states that **CSE policies** should aim to:

- Prioritise the establishment of youth-friendly health services for accessible and non-judgmental stigma-free care;
- Prevent early and unintended pregnancy through comprehensive strategies that address the social issues that drive adolescent pregnancy.
- Combat gender-based violence (GBV) by advocating for legal reform and expanding access to holistic support services;
- Promote meaningful youth participation in policy design and implementation;
- Prioritise data collection and research to inform SRHR policies and programmes

What CSE is not?

CSE is **NOT** a single-fixed curriculum but should be adapted to each country and context. CSE is **NOT** and should **NOT** be a replacement for parents, faith or culture.

Why it matters?

CSE matters because the harms it addresses are real, and because families, schools and communities already share the goal of protecting young people from them. The country evidence below is offered as support for that shared goal, not as the starting point of the conversation. Module 2 sets out the comprehensive evidence base to further inform conversations around why CSE matters.

Malawi

Young people aged 10–35 **make up over** half of Malawi's population and **disproportionately** experience SRHR challenges, including high rates of HIV, adolescent pregnancy and unmet contraceptive need.

The YPAR Report for Malawi indicates that early pregnancy remains closely associated with school dropout, early marriage, and long-term socioeconomic vulnerability for girls in Malawi.

Uganda

Uganda is one of the world's youngest countries with children aged 0–17 years constituting about half of the population. An **estimated** 649,000 adolescent girls aged 15–19 are sexually active and do not wish to conceive within the next two years, yet over 55% have an unmet need for modern contraception. According to YPAR findings, young people between 10–24 years in Uganda face many SRHR challenges because of early, unprotected, and forced sexual activity.

Ethiopia

Adolescents and youth **comprise** 33% of Ethiopia's population with 13% of adolescent girls aged 15–19 having begun childbearing. YPAR evidence shows that early marriage remains a major reality for young women, with nearly 40% of women aged 20–24 years reported being married before the age of 18 in some regions. Furthermore, adolescents and young people account for a substantial proportion of new HIV infections, particularly among young women, who are disproportionately affected due to gender inequality and limited access to information and services.

Who should CSE reach?

CSE is designed for **every young person**, not only those most easily reached through mainstream, in-school, urban programming. YPAR research found that although the positive outcomes of CSE are reflected across learner groups, including in-school and out-of-school youth, and for youth with disabilities, access to and effective delivery of CSE is still focused on urban areas within mainstream schooling.

YPAR research in Ethiopia specifically noted the need for CSE to —

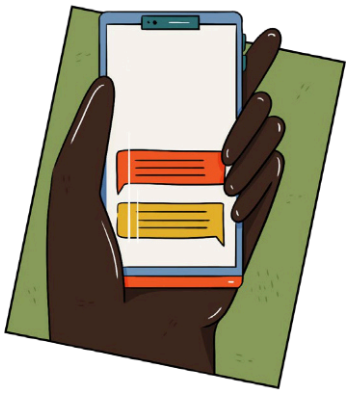
> *extend **to rural youth** and **young people with disabilities**, given how they are often marginalised from the kind of urban centric and able-bodied NGO programmes available to urban and able-bodied youth.*

Where do youth and adolescents' access CSE?

While young people access CSE primarily through exposure within the school setting, YPAR findings indicate that they also access it through multiple other sources including from health facilities, youth centres, and during activities facilitated by local NGOs and community-based organisations (CBOs). Further, YPAR findings show that young people are increasingly accessing CSE related content online.

To this end the report shows that:

> *When youth did attempt to speak with their parents, aunts,or uncles, they felt shame and were sometimes silenced. Thus,* ***youth often turned to social media and peer networks to gain exposure to CSE and knowledge about SRHR. Researchers in all three countries worried about the reliability and safety of accessing accurate, reliable sexuality-related information from the internet, because of the lack of regulation of online messaging*** *on popular platforms such as TikTok, YouTube, and Instagram. These sites were major sources of information for youth in the three countries, which shows that African youth are actively part of a global youth culture that is expressed, negotiated, and regulated in online communities.*

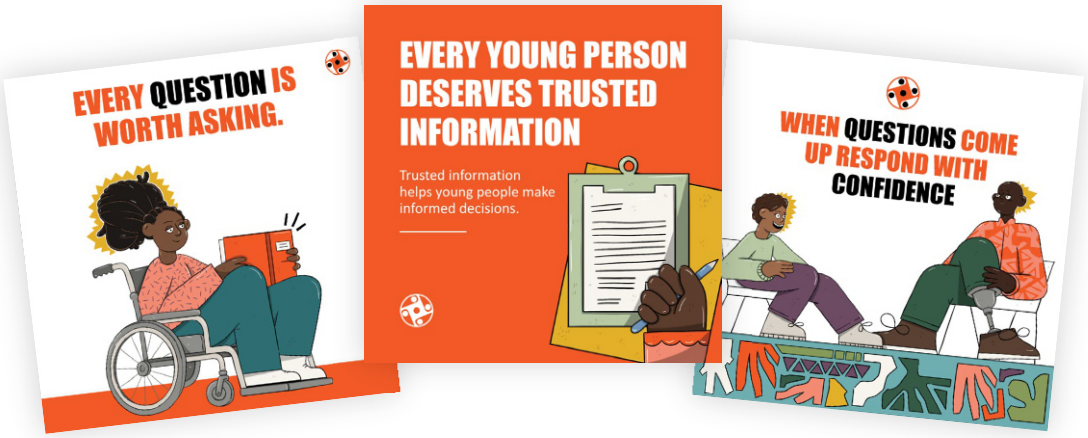


Knowledge is just the beginning.

RESOURCE

In order to engage these online spaces, the Digital Messaging Toolkit contains social media templates to be used by all Stakeholder groups. These are specifically useful for reaching youth audiences across each country. They are editable and customisable for use within each context specific setting.

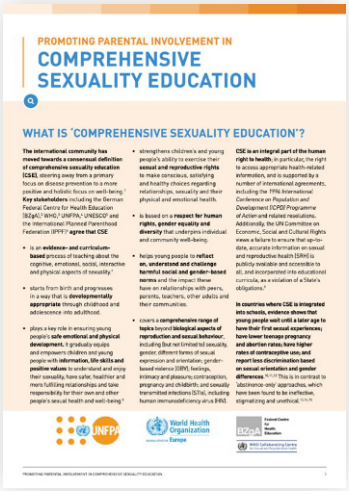
View examples of the editable templates through the button below.

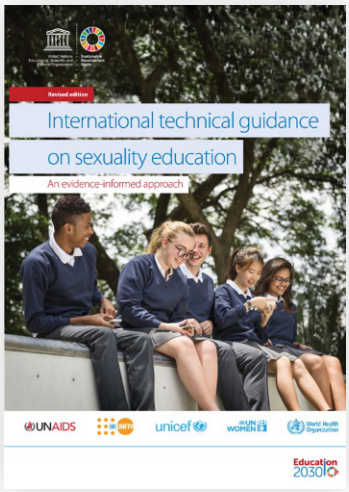


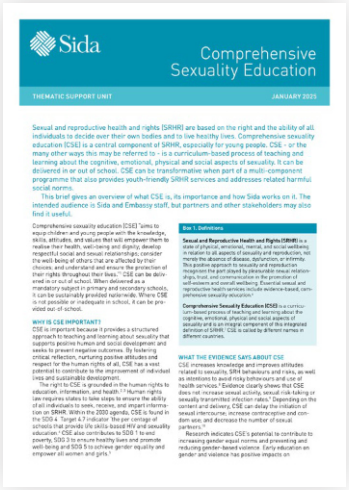
View Example Templates

ADDITIONAL RESOURCES FOR EXPLAINING CSE

(click on the image to access)







MODULE 2

THE EVIDENCE BASE

This Module synthesises the regional and country-specific findings on CSE implementation, uptake and barriers thereto in Malawi, Uganda and Ethiopia in an easy and accessible format. It is designed to give any user the **evidentiary confidence to make accurate claims about local CSE implementation and outcomes, and to push back on assertions that CSE lacks evidence**. YPAR findings are integrated throughout and provide useful youth centred findings that highlight how young people perceive and access CSE in Malawi, Uganda and Ethiopia.

This module leads with evidence, but the evidence itself is offered in support of the shared values approach set out in Module 1, not as a replacement for them. In direct conversation with a persuadable audience, **lead with values and then use this module to make sure that whenever evidence is needed, it is accurate, sourced, and used with confidence**. All resources used and referenced throughout this module are listed in the Resources section at the end of this Toolkit.

The regional and international evidence base

Decades of large-scale, peer-reviewed research on CSE point in a **consistent direction**. International findings include:

- CSE is **associated** with safer behaviour. It does not lead to earlier sexual activity.
- Young people who receive CSE **report** increased contraceptive use, lower teenage pregnancy and abortion rates, and less discrimination based on sexual orientation and gender differences.
- CSE is **linked** to improved recognition of, and response to, abuse, and to more gender-equitable attitudes among young people.
- Involving parents in CSE **improves** parent-adolescent communication about relationships and sexuality and is linked to safer-sex behaviours.

International evidence consistently shows that CSE supports safer, healthier outcomes for young people without encouraging earlier sexual activity.

Decades of peer-reviewed research point in the same direction.

THE BOTTOM LINE

14%
of adolescent girls
gave birth before 18

01

2 IN 7
new HIV infections
were among young people

02

55%
of unintended adolescent
pregnancies end in abortion

03

Various UN experts, including the Special Rapporteur on the right to Health; which includes the rights of everyone to the highest standard of physical and mental health conclude that the cost of inaction is high.

Their compendium on CSE highlights the **social cost of neglecting CSE implementation**:

- Pregnancy related conditions are among the top causes of morbidity and mortality among girls from 15-19 years old.
- Globally in 2021, an estimated 14 per cent of adolescent girls and young women gave birth before the age of 18.
- Fifty-five per cent of unintended pregnancies among adolescent girls aged between 15–19 years end in abortions, which are often unsafe.
- Two out of every seven new HIV infections globally in 2019 were among young people (15–24 years) and adolescent girls and young women are still disproportionally affected.

These are the findings to lead with whenever evidence is needed. Module 3's Claims-Response Matrix shows how to deploy each of these in response to anti-CSE narratives.

Malawi

CSE, referred to as Life Skills Education (LSE) in Malawi, was introduced in 2002 and made compulsory in primary schools by 2004. Aspects of CSE were integrated into LSE in 2015 to better respond to gender, rights, health and SRH needs. At secondary level, however, LSE is examinable but elective, making consistent delivery to older adolescents a real challenge. According to YPAR findings, CSE delivery has largely followed traditional models and has inadequately included marginalised groups such as young people with disabilities and young people living with HIV and AIDS.

Notable YPAR findings

Exposure and access

Exposure to CSE was relatively common among the 384 young respondents in Malawi, although the breadth and depth of topics covered were often limited. Young people in rural areas reported fewer opportunities to access sexuality education due to limited outreach activities, shortages of trained teachers, and irregular engagement by health workers or development practitioners.

Primary settings for CSE exposure

Schools were the predominant setting, followed by community settings, which respondents described as “more interactive and supportive of open discussion.”

Sources of CSE information

Young people were found to further access CSE through multiple informal information pathways including their peers, social media, radio programmes, and, occasionally, parents or religious institutions. While these sources expanded access to sexuality information, they also contributed to uneven quality and reliability.

Barriers

The most prevalent barrier to accessing SRHR services in Malawi was found to be religious barriers followed by a lack of knowledge and general access issues. Stigma and cost were found to be the lowest barriers. Young people in rural areas, out-of-school youth, girls, and with disabilities face greater barriers to accessing accurate and comprehensive information.

CSE outcomes

Improved SRHR knowledge and confidence among young people led to an enhanced sense of agency and decision-making skills. These findings extended to both in- and out-of-school youth, as well as youth with disabilities.

Policy

The Education Act,2013

Does not directly refer to life skills or HIV education.

The National Education Policy

States as one of the policy objectives to "coordinate and **sustain a comprehensive response** to HIV and AIDS" with a strategy to "provide Life Skills Education, voluntary HIV-testing, guidance and counselling services to all learners including victims of drug and substance abuse and victims of gender-based violence."

The National Sexual and Reproductive Health and Rights Policy

Calls on Ministry of Education to implement life skills curriculum in both **primary and secondary schools**. As well as the Ministry of Labour, Youth, Sports and Manpower Development to "equip youth with Life Skills and mobilse youth to participate in programmes that promote safe sexual behaviour.

The 2018/19 Education Sector Performance Report

References **CSE programs** implemented with assistance from UN bodies. The programme description includes the following: "the project aims at primary education and will focus on competence building for teachers, capacity building for government at all levels, curriculum and policy development and advocacy for CSE in Malawi."

Positive outcome 01

Young people have reported that youth friendly spaces such as community centres have created safe and supportive environments to talk about CSE.

YPAR youth voice

…youth centres have fellow young people, so we understand each other, we can talk and advise each other when we go there or when we are in our groups.

Out-of-school Youth, Male 1

Positive outcome 02

Young people highlighted how learning about puberty, menstruation, and general sexual health helped them feel more prepared for adolescence.

YPAR youth voice

One participant explained:
It [CSE] has really helped me. Understanding my body has been helpful, I know when and what to do.

In-school Youth, FGD 2, Part 2

Uganda

According to Uganda's National Sexuality Education Framework, historically, sexuality education "was primarily handled by parents and relatives within the cultural setting of each family and community. This was reinforced by the teaching of the religious denomination that a family and child belonged to." Therefore, evidence and conversations surrounding CSE should always be cognisant of the role that family and religion play in its uptake and implementation.

Currently, "Sexuality Education" is part of "Life Education" in the reformed lower secondary curriculum and is mandatory and examinable. Human Rights Watch has noted, however, that the Framework does not fully comply with international human rights standards, and focuses on a values-based approach rather than a rights-based one.

Notable YPAR findings

Exposure and access

YPAR findings indicate high levels of exposure to CSE among the 422 young participants. With 86.2% indicating exposure to some form of CSE. However, findings reveal important gaps in the content and depth of CSE delivered to young people.

Primary settings for CSE exposure

School settings are the primary source for CSE at 82.6%.

Sources of CSE information

In addition to school settings, social media and online communities were identified as key extensions to peer networks in influencing young people's attitudes around sexuality and CSE. Participants noted that they access information through social media platforms, including WhatsApp, YouTube, and TikTok.

Barriers

Structural, sociocultural, and individual-level barriers, particularly stigma, geographic location, and institutional limitations, interact cumulatively to shape young people's ability to access and engage with CSE services. In addition, safety, privacy, and comfort were identified as central to meaningful access to CSE.

CSE outcomes

Participants noted that CSE empowered young people to make informed SRHR-related decisions with an increased confidence in protective and help-seeking abilities, particularly in refusing sex, thereby increasing safe behaviours among young people.

The YPAR study in Uganda notes that the study faced challenges in reaching a larger number of young people with disabilities and as a result, the perspectives of young people with disabilities were underrepresented. This means that although the Uganda findings do not speak specifically to the experiences of young people with disabilities, this should not be read as evidence that their needs are absent but rather that this particular study was not able to capture them in depth.

CSE backlash

The Ministry of Education withdrew the national sexuality education curriculum in 2016, after materials referencing sexual orientation were found in over 100 schools. A subsequent lawsuit by the Center for Health, Human Rights, and Development, supported by Save the Children and the International Planned Parenthood Federation, led to the National Sexuality Education Framework (2018). After three years without implementation, the Kampala High Court instructed the Education Ministry in November 2021 to develop and implement the policy within two years, reporting progress every six months.

Backlash may change how CSE is discussed, but it does not change the realities young people face or the need for accurate, age-appropriate information.

WHY THIS MATTERS

Accurate and reliable CSE implementation in Uganda would **assist with the following challenges**:

- Over 55% of adolescent girls aged 15–19 are sexually active but have an unmet need for modern contraception.
- In 2024, approximately 5,000 new HIV infections were recorded weekly, with 70% of these found among adolescents and youth. In addition, adolescent girls and young women are nearly four times more likely to contract HIV than their male peers.
- There are high rates of teenage pregnancy with one in four teenage girls becoming pregnant by age 19, and nearly half marry before 18.

Positive outcome 01

Youth in Uganda reported that CSE teaches valuable life skills.

YPAR youth voice

They teach us about our rights, testin for HIV, [and] how to make decisions… like using condoms.

Out-of-school Youth, Male 2

Positive outcome 02

In addition, CSE has been shown to increase informed decision making in sexual activity such as the choice to abstain from sex and avoid pregnancy.

YPAR youth voice

As one in-school youth noted in Uganda:
I decided to abstain [from sex]. I am not ready to engage in those things.

Ethiopia

Notable YPAR findings

Exposure and access

While findings from the 438 young participants in Ethiopia show that overall exposure to sexuality education is relatively high, the depth and comprehensiveness of content remain limited. According to the report, CSE is predominantly delivered through biology-focused instruction, emphasising physical and disease-related aspects such as puberty and HIV, while critical components, including sexual relationships, consent, gender norms, decision-making, and life skills, are inconsistently addressed or largely absent.

Primary settings for CSE exposure

School is the primary setting for CSE, which leaves those outside the school system with far less access. Only 17.4% of participants not enrolled in school had been exposed to CSE.

Sources of CSE information

Education received at school is often supplemented with “informal sources” in Ethiopia. This includes through social media, radio and television.

Barriers

Structural limitations include the absence of a standardised national CSE curriculum, weak coordination across sectors, and limited institutional capacity. Personal and social barriers include sociocultural and religious norms that often discourage open discussions of sexuality. The research highlighted the critical need for CSE to extend to rural youth and young people with disabilities, given how they are often marginalised from the kind of urban centric and able-bodied NGO programmes available to urban and able-bodied youth.

CSE outcomes

CSE has been found to correlate to stronger SRHR knowledge for both men and women. This knowledge was then found to be positively and significantly associated with increased confidence in exercising safer sexual behaviours including the ability to say “no”, report abuse, buy and use condoms, discuss sexual activity, control risky sexual behaviours, and seek help. These findings extended to both in- and out-of-school youth, as well as youth with disabilities.

Ethiopia has the least established formal legal landscape governing the implementation of CSE of the three countries with adolescents with disabilities being largely excluded from existing interventions. Ethiopia faces steep challenges with stigma and misinformation surrounding CSE with additional challenges including the fact that only 17.2% of married women in high-fertility regions have autonomy over contraceptive use decisions, and stigma and misinformation hinder access for young or unmarried people. In addition, 13% of adolescent girls aged 15–19 have begun childbearing, with higher rates in rural areas.

In the absence of a standalone Education Act, the 2009 Education Sector Policy and Strategy on HIV & AIDS governs related content, calling for HIV and AIDS information to be mainstreamed into the school curriculum.

Socio-cultural barriers are documented as the main obstacle to CSE implementation, and teachers have been found to adapt content to local norms in ways that undermine the curriculum’s key points. Ethiopia’s federal system also produces significant regional variation in implementation, alongside a documented rise in opposition from national ministries to a nationwide curriculum.

Positive outcome 01

YPAR findings indicate a desire for CSE:

YPAR youth voice

It would be good if it [CSE] came out as an independent subject… like Biology, like Chemistry.

(In-school Youth).

Positive outcome 02

CSE teaches valuable life skills.

YPAR youth voice

An out of school youth from Ethiopia noted: *I feel confident… using condoms and getting regular health check-ups is essential. I often report this and tell other kids about it.*

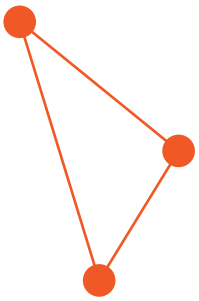
Positive outcome 03

Further, in Ethiopia, one out of school youth described an increased awareness about preventive measures, especially to avoid pregnancy:

YPAR youth voice

After taking the [CSE] training, I know what I should use so that there won't be unplanned pregnancies or [STIs].

A CROSS-CUTTING FINDING: Policy on paper is not the same as delivery in the classroom



Across all three countries, some form of policy grounding for sexuality or life-skills education already exists but research indicates that none delivers it fully or consistently.

- In Malawi, it is examinable but elective, so comprehensive roll out is compromised.
- In Uganda, it is mandatory and examinable on paper, but rollout has been repeatedly delayed by political constraints.
- In Ethiopia, it is not yet consistently formalised at national curriculum level, and a federal system makes its delivery inconsistent across the region.

Being honest about the evidence

Confidence in the evidence base does not mean overstating what is known. Each country's own gaps should be acknowledged rather than glossed over:

- Malawi lacks adequate national-level data on the coverage, cost, outcomes and impact of its own LSE programme.
- Uganda's evidence base is strong on policy and legal history, but weaker on classroom-level delivery data since the 2018 Framework.
- Ethiopia's evidence base is the least developed of the three, reflecting its less formalised policy landscape.

Where a user is asked for country-specific evidence this module does not yet contain, the honest answer is to say so rather than to overstate what is available.

MODULE 3

CLAIMS-RESPONSE MATRIX

This module provides **direct, evidence-based responses to the dominant false and misleading claims about CSE**. Each response is designed to be used directly in community meetings, media engagements, policy dialogues, and online spaces. As throughout this Toolkit, lead with the shared values set out in the Introduction and Module 1; use the evidence below to back that up with confidence, not to open the conversation. The matrix will be searchable through the digital platform and downloadable in full.

RESPONSE 01

Leading counter frame

Age-appropriate CSE protects, it does not provoke. International evidence consistently shows delayed not increased first sexual activity, and better recognition of and response to abuse, following exposure to CSE.

Concern addressed

Concern around early exposure and increased sexual activity.

YPAR & evidence anchor

Overall YPAR findings showed that CSE generally wielded positive outcomes for young people. This included increased levels of confidence in the ability to say “no” to sex and sexual advances, to report cases of abuse, to buy and use condoms, to negotiate sexual activity

Youth in Uganda reported that CSE teaches valuable life skills. One out of school male youth reported that “they teach us about our rights, testing for HIV, [and] how to make decisions… like using condoms”.

Best messenger

A parent or caregiver already familiar with the actual curriculum content, ideally speaking alongside a teacher; not an external advocate.

Audience: Community and Traditional Leaders; Religious leaders and PTAs.

Useful resources

One-page message card (“CSE as community protection, not cultural threat”); Parent FAQs; counter frames poster for community noticeboards.

RESPONSE 02

Leading counter frame

National CSE curricula are developed and contextually adapted by national ministries, not imposed from outside. In many cases the best-resourced anti-CSE campaigns are themselves foreign-funded and foreign-led.

Concern addressed

Concerns regarding cultural and religious incompatibility as well as foreign influence.

YPAR & evidence anchor

The YPAR research found that several multi-sectoral frameworks exist to implement SRHR-related commitments in all three countries. In Malawi, policy aims to bring together government departments of education, health, and youth developments to ensure enhanced access to SRHR. In Ethiopia, policy mandates collaboration between the health and education sectors to manage the governance of CSE and SRHR-related access. In Uganda, robust policy frameworks guide the roles of government ministries of sport, education, and health.

Best messenger

A ministry champion or peer government official, ideally drawing a comparison to a comparable government-led, donor-supported programme (e.g. HIV response), rather than an international partner.

Audience: Religious leaders; community and traditional leaders; ministry officials and CSOs/NGOs.

Useful resources

FAQ document with responses to the most common arguments from governments against CSE. stakeholder engagement guide.

RESPONSE 03

Leading counter frame

CSE is designed as a partnership with parents and communities, which should reinforce not replace their role. Families remain central to how young people learn responsibility and healthy relationships.

Concern addressed

Concern that CSE displaces parental or religious authority over a child's upbringing.

YPAR & evidence anchor

In Malawi, YPAR findings showed that when youth were exposed to CSE, they were more likely to follow advice from teachers and parents, not take away from their authority.

In addition, YPAR findings show that when youth did attempt to speak with their parents, aunts, or uncles, they felt shame and were sometimes silenced indicating that youth express a desire to communicate on these topics.

Best messenger

A respected parent or PTA member, or a religious leader who frames CSE as consistent with protective family values.

Audience: PTAs; Religious leaders; community and traditional leaders.

Useful resources

Meeting facilitation toolkit, agenda, talking points and activities for structured parent conversations.

RESPONSE 04

Leading counter frame

CSE's content is age-appropriate health, safety and relationship-skills education grounded in each country's own national curriculum. It is not a vehicle for a separate, externally driven identity agenda, and its stated purpose is protection from HIV, pregnancy and abuse.

Concern addressed

Concern that CSE promotes or normalises LGBTIQ+ identities and undermines the heterosexual family, often bundled with wider anti-rights "gender ideology" framing.

YPAR & evidence anchor

YPAR research shows positive findings that CSE is an important factor for achieving improved sexual and reproductive health.

This extends to young person's developing a sense of agency with increased ability to make informed, safe, healthy decisions about their sexual lives which could in turn decrease STIs and incidents of rape or sexual assault.

Best messenger

A religious leader already engaged in child-protection or health work, briefed individually rather than addressed as part of a collective statement.

Audience: Religious leaders (primary); traditional and community leaders; policymakers.

Useful resources

Theological response brief; pulpit talking points; faith-framed messaging guide. This is the most sensitive claim in the matrix, avoid open/public formats.

RESPONSE 05

Leading counter frame

CSE reinforces values of care, protection and responsibility that families, faiths and traditions in these countries already hold. Traditional leaders are framed as partners in delivering that protection, not obstacles to it.

Concern addressed

Framing that opposing CSE defends authentic African or traditional values against imported ideology.

YPAR & evidence anchor

The research found that in each of the countries, the relevant policy frameworks that govern CSE recognise the important role of communities and multi-stakeholder engagement. This includes mothers' groups and parents in Malawi, youth and cultural clubs in Ethiopia, and local community leaders and families in Uganda.

Best messenger

A traditional or community leader already on record as supportive, speaking peer-to-peer with fellow leaders.

Audience: Traditional and community leaders (primary); religious leaders.

Useful resources

Dialogue facilitation guide with scripts for common objections; one-page message card ("CSE as community protection, not cultural threat").

Every audience is different. Lead with what matters most to them.

MODULE 4

AUDIENCE-SPECIFIC MESSAGING GUIDES

This module consists of 6 individual guides tailored for engagement with the following groups:

01 **Community and Traditional Leaders**

02 **Religious Leaders**

03 **Teachers and School Administrators**

04 **Parent Teacher's Association**

05 **Ministry of Education and Health**

06 **Civil Society Organisations and NGOs**

Research has shown that it is useful to engage with key groups separately before bringing them together. These individual guides allow each stakeholder to engage in robust and extensive dialogues and to raise their own concerns within their familiar groups. Once each group has used these resources to talk through any concerns and have reached some settled ground, they can be brought together for a wider national dialogue. Engaging groups separately means that the people who are genuinely open to CSE are not silenced by the few who are set against it.

STARTING POINT
SAFEGUARDING THE RIGHTS OF CHILDREN

Every resource in this Toolkit, across all stakeholder groups, operates under one non-negotiable principle:

The safety and wellbeing of children and young people always comes first.

This means that safety considerations should take precedence before any other considerations, including institutional reputation, political sensitivity or cultural expectation.

If a child or young person discloses, or you suspect, abuse, neglect, exploitation, violence, child marriage, or any other form of harm, this stops being a conversation, a lesson, or a dialogue, and becomes a **safeguarding** matter. No stakeholder group in this toolkit is asked to act as a counsellor, investigator, or safeguarding authority.

Your responsibility is to **RESPOND, PROTECT AND REFER**.

RESPOND with care.

PROTECT the child's confidentiality and dignity, and

REFER immediately through your organisation's or school's child protection procedure.

Children with disabilities require specific, deliberate care throughout this Toolkit's implementation. Evidence from YPAR identifies young people with disabilities, alongside out-of-school and rural youth, among those structurally excluded from CSE delivery in the region. This exclusion also leaves them more exposed to harm and less likely to be heard when something is wrong. Every stakeholder group should ask, deliberately, whether the format, language and setting of any CSE-related engagement is genuinely accessible to children with disabilities, and whether local referral pathways are actually equipped to receive and act on a disclosure from a child with a disability, not only from other children.

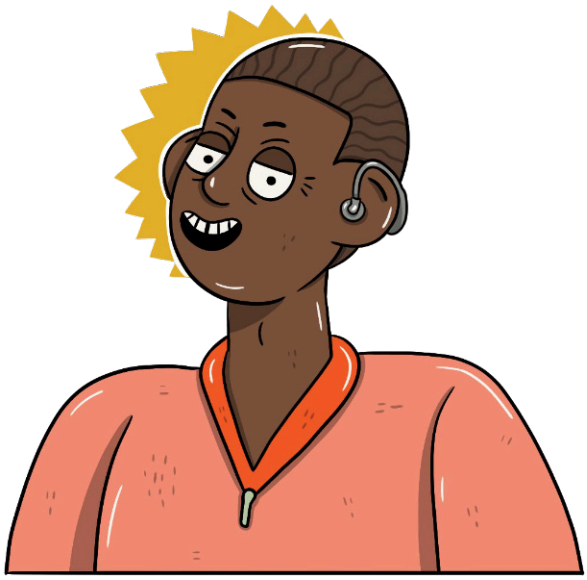
While each of these guides should be used separately for each Stakeholder group, they all have emerged from the premise of a **framework of shared values**.

A FRAMEWORK OF SHARED VALUES

Anti-CSE messaging is often organised, disciplined, and repetitive across countries, and works, in large part, by setting the terms of the debate.

There are several ways to respond or counter harmful narratives. Direct responses with facts and statistics are commonly used to correct falsehoods and present a position grounded in evidence. This is an important and powerful tool, but it can have its downsides. In an effort to disprove false or harmful claims, the harmful claim itself often gets restated and amplified. This keeps the conversation anchored to the anti-CSE narrative. For example, the act of debunking a myth requires restating it, which can inadvertently spotlight it. Each repetition, even one framed as a correction, gives the harmful claim more airtime, extends its reach to audiences who may not have encountered it, and makes it more familiar. A strategy built solely on responding claim by claim therefore risks amplifying the very narratives it sets out to dismantle and keeps CSE permanently on the defensive.

Mindful of this, this Toolkit, and each individual guide, advances **values-based communication**, a conscious approach to advocacy and messaging, which grounds messages in the audience's own deeply held values rather than only in facts, statistics or rights-based arguments. It leads with a positive, values-anchored account of what CSE is and does, expressed in accessible vocabulary. It does not deny the attack or repeat it but rather aims to it makes the attack less resonant by offering a more compelling lens through which to see the issue. This addresses the backlash without amplifying it.



The principles of values-based communication include:

VALUES AND FACTS

Leading with what audiences already care about. This includes protection, care, responsibility and family rather than opening with statistics on HIV incidence, contraceptive use or pregnancy rates, which rarely persuade on their own. Facts still matter, and evidence is a valuable tool for substantiating the case and countering disinformation. But finding common ground first opens the door for the evidence to land. Values start the conversation and facts help deepen and defend it.

SHARED LANGUAGE AND HUMAN RIGHTS

Uses accessible and relatable terms and concepts that the audience already uses, such as the words “care”, “protection”, “family” and “tradition”, rather than leading with or only using technical language like “sexual rights” or “bodily autonomy,” which can feel imposed and trigger defensiveness, especially with conservative and religious groups. Rights remain the foundation of CSE, and the aim is to translate them, not ignore them. Concepts like bodily autonomy and consent lose nothing by being expressed as “keeping children safe” or “helping young people make responsible decisions”; they simply arrive in language the audience already trusts, rather than language that puts them on guard.

SUSTAINED REPETITION FOR IMPACT

Recognising that values-based framing shifts durable, underlying attitudes through consistent repetition across channels and audiences over time, not through a single persuasive fact or appeal. Values-based framing works by changing durable, underlying beliefs, and that happens through consistent repetition across channels, messengers and audiences over time. This mirrors how anti-CSE actors operate. The impact comes not from any one argument but from disciplined, repeated messaging. Countering it therefore means committing to a coherent narrative that is reinforced everywhere and often, rather than relying on individual campaigns or standout moments to carry the case.

SHARED VALUES

Showing how CSE already serves values that a parent, faith leader or policymaker holds rather than asking them to adopt new ones. When CSE is framed as protection, care and responsible preparation for adulthood, it is no longer a foreign idea to be resisted but an expression of goals the audience already shares.

EQUIPPING AND EMPOWERING

Anti-CSE narratives weaponise “empowerment” “agency” and “autonomy” as concepts that encourage sexualising children, displacing parents, or encouraging promiscuity. Values-based communication frames empowerment as a way for young people to be equipped to recognise risk, make safe and responsible decisions, and protect themselves and their peers. This framing aligns with values aligned with protection that parents, faiths and traditions already hold.

Community and Traditional Leaders

Community and traditional leaders play a pivotal role within Ugandan, Malawian and Ethiopian society. According to **Afrobarometer** survey findings, Ethiopians trust their traditional leaders more than state institutions and elected officials and they would like to see this influence increase. In Uganda, **Afrobarometer** findings show a similar pattern of increased trust in traditional leader compared to other officials. While other **research** shows that in Malawi, traditional leaders play an important role in mobilising community resources for public initiatives but that this influence is weakened due to limited integration within government structures.

While community and traditional leaders do not play a formal role in education, they continue to play a gate keeping role within some communities when it comes to how information is perceived, received and implemented. Within YPAR findings, 53.5% of surveyed participants in Malawi cited that cultural norms strongly shape how sexuality education is perceived and delivered within communities. Therefore, engaging with them is essential to ensure holistic access to communities. Importantly, culture and religion are often intertwined so religious and community leaders may find benefit from engaging with resources across both stakeholder guides.

DIALOGUE FACILITATION GUIDE

This dialogue facilitation guide is designed specifically for community and traditional leaders working directly within their own communities on CSE acceptance. It seeks to give structured guidance and tools for running a dialogue, asking and answering questions, and navigating difficult conversations.

Starting point: Your role in the dialogue

Your role is not to "win an argument" or lecture at fellow community leaders and members. Instead, a participatory approach in which you act as a convenor rather than a persuader or advocate is recommended.

Your role as a convenor is to **create** a space for people to raise their concerns, be **heard** and work through issues that arise **without judgement** or pressure. The community's own concerns should set the direction, and participants should be treated as people with something to contribute. This does not mean that you cannot offer knowledge or challenge mis and dis-information, rather, it means that your voice should be equally considered **alongside** the voices of everyone else.

Lead with shared values and the right terminology

Throughout this module, and the Stakeholder Engagement Toolkit as a whole, you will be guided to start from the values that a community already cares about. In practice this means leading with values such as **care, protection, and responsibility**, bringing in evidence once trust has been established.

In addition, terminology and words matter within these types of conversations. Therefore, in order to build trust and common ground, consider referencing terms commonly used within the local community to refer to CSE.

The table below provides a useful guide for how CSE is more commonly referred to in Uganda, Malawi and Ethiopia:

Malawi	"Life Skills Education" at primary level; "HIV Education" or "Sexual and Reproductive Health Education" at secondary level.
Uganda	"Sexuality Education" is taught as part of "Life Education".
Ethiopia	"Sexual education" "AIDS education" or "life-skills education".

BEFORE the dialogue: Planning for community engagement

Community engagements are best managed by **planning** and ensuring the right people are in the room. Start by ensuring that the chosen venue feels safe and comfortable for all participants. Throughout YPAR findings, youth referenced privacy considerations as a barrier to meaningfully engaging with CSE. As these considerations may extend to other members of the community, choosing a neutral venue that allows participants to speak freely without fear of judgment is critical.

Before hosting the dialogue, ensure that you have done the following:

STEP 01

Do your homework

Have a basic to good understanding of CSE and its associated positive outcomes. While facts and statistics alone do not change behaviour, this will help you address misconceptions and build credibility.

STEP 02

Map who needs to be involved

Start by working out who holds influence over CSE acceptance in this particular community, and who is affected by it. It may also include local officials or others whose backing (or opposition) will shape whether CSE is accepted.

STEP 03

Consider forming a community advisory group

Where you can, form a small advisory group drawn from the community to review your language, the topics you plan to raise, and the objections you are likely to meet.

STEP 04

Sensitise leaders and potential gatekeepers before the engagement

Ensure you have provided resources to high-trust stakeholders ahead of any engagements, as they are the biggest risk to the effectiveness of your session.

DURING the dialogue: Running a successful, respectful and thought-provoking dialogue

There are four key stages for running the dialogue in a community engagement. The stages are the same whether you are working with a single group or the wider community.

STAGE 01

Setting objectives and dialogue rules

Open by establishing why you are all there and how the conversation will work. Communicate your objective plainly and in the above mentioned shared-values terms. For example, you can say that you are here to talk together about how young people in this community can grow up safe, healthy, and well-prepared.

Co-create dialogue rules with the group so that there is agreement on how to react if the conversation becomes heated or difficult later on. Ask for their input, rather than imposing your own rules on them.

Some suggestions that are critical to fostering a productive engagement include:

- Everyone gets a chance to speak.
- No interrupting.
- No judgement of what someone raises.
- What is shared here is treated with respect.

STAGE 02

Start from the community's own concerns

Focus the dialogue on the community's own concerns about young people's health and wellbeing. Invite them to name these concerns themselves without pre-empting their answers. This is helpful information for you so that you can focus reflection and discussion on the topics that matter most to them, and it also signals to the participants that you are there to listen rather than only to talk. From there, guide the conversation with reflective questions rather than making statements.

These could include:

> *What worries you most about this?*

> *What experiences have led you to be concerned about this?*

> *Could you explain what this looks like in your community right now?*

The aim is to unpack their concerns so that they feel completely heard and understood. Although some of their concerns may rest on mis and or dis-information, you do not need to correct them immediately. When listening to their concerns, try to identify the values that are at play. For example, a parent worried about promiscuity is actually expressing the value of **protection**, and an elder worried about the erosion of cultural practices and values is expressing the value of **community**. This can help you speak to the root of the concern and truly empathise with their fears of what accepting CSE might mean for their community.

You will need to monitor engagement and encourage input from diverse participants. This diversity will depend on the group in the room, but could run across gender, age, religion, etc.

STAGE 03

Engage the concerns and bring in evidence

Once concerns are on the table, work through them, once again leading with shared values and offering what you know as something to consider rather than a correction. Where a worry rests on mis or dis-information, put accurate information alongside it and let the group raise their thoughts and questions.

You don't have to cover each area in depth within the first engagement, but the six broad topics that could be covered in these dialogues on CSE are:

This is the stage where you will start bringing in evidence. This can take the shape of facts and findings, but it can also encompass local stories or bringing in an expert voice. You can also refer to the resources mentioned throughout the Stakeholder Engagement Toolkit as well as module 2 for country specific findings. Always keep the evidence concrete, short, and relevant to the community. By bringing evidence to the table only after people feel heard, it means the same evidence lands as help rather than as a rebuttal to what they've shared.

In order to personalise what CSE can mean for adolescents and communities. You can also share some quotes from the YPAR findings, indicating the positive effects of CSE from young people themselves:

Positive outcome 01

CSE teaches valuable life skills.

Quote from adolescent

They teach us about our rights, testin for HIV, [and] how to make decisions… like using condoms.

Out-of-school Youth, Male 2

After taking the [CSE] training, I know what I should use so that there won't be unplanned pregnancies or [STIs]".

Positive outcome 02

Young people highlighted how learning about puberty, menstruation, and general sexual health helped them feel more prepared for adolescence.

Quote from adolescent

One in school participant from Malawi explained:
It [CSE] has really helped me. Understanding my body has been helpful, I know when and what to do.

Positive outcome 03

Findings indicate a desire for CSE.

Quote from adolescent

It would be good if it [CSE] came out as an independent subject… like Biology, like Chemistry.

In-school Youth from Ethiopia

Keep young voices at the centre.

STAGE 04

Agree on next steps

Close by drawing together what the group has agreed and what it still wants to work through. The point is not to force consensus on everything, but hopefully to find points of connection and understanding. Where a group reaches agreement, try to identify participants who would be willing to **champion** and move the conversation forward outside of your engagement. This could be a leader willing to speak to peers. Make sure to offer them support and tools so that they are equipped to lead their own conversations.

Where a group has not reached agreement, acknowledge that in the room and leave the door open to further discussion and exploration. If, however, a disagreement escalates, this is the time to slow things down. Don't try and force agreement but rather hold the space open to disagreement and to returning to the engagement at another time when everyone has had the time to process and reflect.

Not every conversation ends in agreement.

AFTER the dialogue: Don't forget to follow-up

Discussion and dialogue with community members and leaders should be part of a wider campaign to promote CSE. You may consider distributing educational materials or resources to support and reinforce your community sensitisation efforts. Behaviour shifts require ongoing interventions and cannot work with a once-off engagement.

Scripts for common objections

These are the five objections' leaders most often meet. Each script follows the same pattern:

- **Identify** the concern before it can be used against you. This does not mean that you have to repeat the claim or myth presented. You should identify what is causing it.
- **Connect** it to the value underneath it and
- **Offer evidence** as something to weigh rather than a correction.

Use the wording as a starting point and adapt it to how people actually speak in your community.

OBJECTION 01

Centres around concerns about CSE encouraging early and more risky sexual behaviour.

THE VALUE: Protection

Suggested script

> *You may already have heard people say that if we talk to young people about this, we're inviting them to try it. That's a fair worry, and it comes from wanting to protect our children. So let me put something next to it. What young people in this community themselves told our researchers, is that silence, not information, it is what leaves them exposed. When they don't understand what's happening to them or how to say no, that's when they're at greater risk. Age-appropriate information is there to prepare them, not to push them.*

Evidence anchor

Overall YPAR findings showed that CSE generally wielded positive outcomes for young people. This included increased levels of confidence in the ability to say "no" to sex and sexual advances, to report cases of abuse, to buy and use condoms, to negotiate sexual activity.

In addition, CSE has been shown to increase informed decision making in sexual activity such as the choice to abstain from sex and avoid pregnancy, as one in-school youth noted in Uganda: *"I decided to abstain [from sex]. I am not ready to engage in those things".*

Refer instead if

If someone asks a specific clinical or statistical question about HIV or pregnancy risk then you should rather refer to a health worker who may be better equipped.

OBJECTION 02

Centred around cultural barriers and threats to continuity of cultural values.

THE VALUE: Community and dignity

Suggested script

> *I hear that this feels like it's coming from outside and doesn't fit how we do things here. That worry comes from wanting to protect what makes us who we are, and that matters to me too. But let's look at what CSE is actually trying to protect. It's children who understand their own bodies, who can say no, who are not shamed into silence, and who are brave and know that if something is wrong, they can turn to a trusted adult. Those aren't foreign values; they are the same care and responsibility our own culture already asks of parents and elders. This is community protection, not a cultural threat.*

Evidence anchor

YPAR research found that in each of the countries, the relevant policy frameworks that govern CSE recognise the important role of communities and multi-stakeholder engagement. This includes mothers' groups and parents in Malawi, youth and cultural clubs in Ethiopia, and local community leaders and families in Uganda.

OBJECTION 03

Centred around requests for evidence or challenges around statistical proof of CSE effectiveness.

THE VALUE: Responsibility

Suggested script (when you want to refer to evidence)

> *That's a fair challenge, and it deserves a proper answer rather than a quick one. I'd rather not just throw numbers at you that you can't check for yourself. Let me point you to the written evidence brief and our evidence hub, so you can go through it and judge it on the merits.*

Evidence anchor

Ask if you can show them the evidence hub on the website so that they can go through the evidence for themselves.

OR

Suggested script (when you can speak to the evidence)

> *That's a fair thing to ask. The evidence is actually pretty consistent. CSE is linked to safer choices, not to young people having sex earlier. But you don't have to trust me on that, should we look at the evidence together and talk it through?*

Evidence anchor

Offer to look at the evidence hub with them, or to walk through it together, rather than only sending a link. The aim is shared scrutiny. It can help to invite them to test the evidence, not just receive it.

OBJECTION 04

Concerns around CSE replacing the roles of parents, families and faith.

THE VALUE: Responsibility and dignity

Suggested script

Raising young people takes all of us, family, faith and community. CSE adds to that support rather than standing in for any of it. CSE isn't there to replace you as a parent, or to replace your faith. It can't, and it isn't trying to. What it does is add another layer of support around what you're already doing to support them. It doesn't pull young people away from their families or their faith, it just gives them the language and confidence to understand themselves and their bodies and bring their questions back to you.

Evidence anchor

In Malawi, YPAR findings showed that when youth were exposed to CSE, they were more likely to follow advice from teachers and parents, not take away from their authority.

Cross-refer to the parent-facing FAQ and PTA meeting materials in parallel, which carry this same message for a parent audience.

Illustrative dialogue scripts

The script below shows the flow described above in practice. The facilitator lines are marked F and the other speaker is marked by their role.

Script: An honest concern expressed at the community level dialogue

Community member or leader:

If we start teaching this in the school, aren't we just telling our children it's fine to start having sex?

F:

That's a real worry, and I think most people in this room share it. Can you tell me a bit more about your concern. Can you tell me what you have seen or heard that makes you worried about this?

Community member or leader:

I've heard that in other places, once children learn about this, they start experimenting earlier.

F:

Thank you for being honest about that. What I hear is that you want to protect your child, and that you don't want the school doing anything that puts them at more risk. Is that right?

Community member or leader:

Yes, exactly.

F:

I want to put something next to that worry, not against it. What young people in this community have told researchers is that it's silence, not information, that leaves them exposed. YPAR findings, which come from young person's themselves, found that when they don't understand what's happening to them, adolescents feel as if they can't protect themselves or say no. So age-appropriate teaching is actually there to prepare them, not to push them toward anything.

Community member or leader:

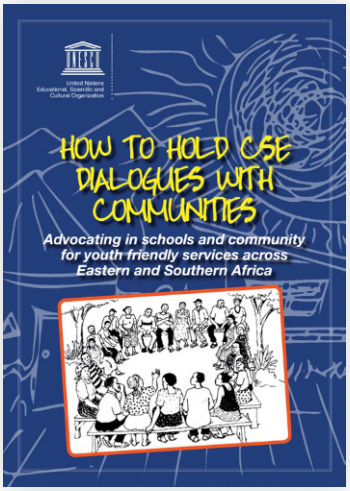
I hadn't thought of it that way. I'd still want to know what exactly is being taught to my child, at what age.

F:

That's a fair thing to ask for, and it's your right as a parent. Let's make sure you get the actual materials for your child's age group before this goes any further, so you can see for yourself rather than take my word for it.

ADDITIONAL RESOURCES

(click on the image to access)



COMMUNITY PROTECTION, NOT A CULTURAL THREAT

What Comprehensive Sexuality Education (CSE) really does for our children

View One-Page Pull-Out Resource

Every Community and Traditional leader in this room wants the same outcome: children who grow up safe, healthy, and ready to make responsible choices. **That is exactly what age-appropriate CSE is for**.

PROTECTION

Gives young people the understanding to recognise risk, protect themselves, and say no. Thereby closing the silence that leaves children exposed, not opening a door to harm.

DIGNITY

Treats every young person, including those out of school, in rural areas, or living with disabilities, as worth investing in, not as a problem to manage.

RESPONSIBILITY

Supports, and does not replace, the role of parents, families and faith in raising young people who make responsible choices.

> CSE **protects** young people so that they can grow up **healthy, safe** and **equipped** to build strong families and communities **reflecting the very values** of care, protection and responsibility that families, faiths and traditions already hold.

Here's what we know

CSE protects the same things our culture already protects, namely, children who are safe, respected, and prepared. It should be delivered in a way that fits this community and shaped by young people's own experiences here.

Evidence anchor

CSE reinforces values of care, protection and responsibility that families, faiths and traditions in African countries already hold.

Here's what we know

CSE doesn't push young people toward sex. It informs young people and means they are better able to protect themselves, and recognise abuse, and know how to be safe. The goal is safety, not encouragement. Silence, not information, is what leaves them exposed and at risk.

Evidence anchor

Age-appropriate CSE protects, it does not provoke. The **evidence** is clear it doesn't lead to earlier or more sexual activity.

Here's what we know

CSE works alongside parents, families and faith leaders, reinforcing the values you already teach, and adding support in the moments you can't always be there for. It's designed to stand with Community and Traditional leaders, not in place of you.

Evidence anchor

YPAR findings in Malawi show that when youth were exposed to CSE, they were more likely to follow advice from teachers and parents, not take away from their authority.

YOUR ROLE

Not to defend CSE or oppose it, but to help your community talk it through, ask its own questions, and reach its own understanding.

YOUR INVITATION TO THE COMMUNITY

Ask questions. Raise concerns. Let's work through this together.

*For structured conversation flows and full scripts for these and other common questions, see the accompanying Dialogue Facilitation Guide for Community and Traditional Leaders.

Religious Leaders

Religious leaders are still considered the trusted moral authorities in many African countries, meaning that their endorsement of CSE and related concepts carries much weight within communities. YPAR findings also indicate that socio-cultural and religious influences continue to shape both policy debates and classroom delivery of sexuality education. Therefore, once equipped with the correct information and resources, **religious leaders are perfectly situated to engage with various stakeholders to champion and amplify CSE messaging**.

Religious leaders further play a vital role within many of the barriers identified by youth respondents to meaningful and effective CSE access within the YPAR. These include socio-cultural norms, stigma, taboos and beliefs which were all found to be major barriers for young people. In addition, **nearly 64% of young participants interviewed within the YPAR research identified religion as a whole as a barrier to accessing CSE, supporting the claim that moral and religious frameworks often position CSE as a threat to social values**. Therefore, the below resources are a vital first step to engaging with religious leaders to effect long term change in how CSE is perceived and implemented in countries such as Uganda, Malawi and Ethiopia.

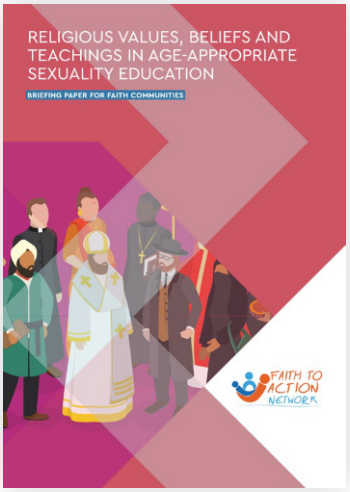
Importantly, culture and religion are often intertwined so religious and community leaders may find benefit from engaging with resources across both stakeholder guides.

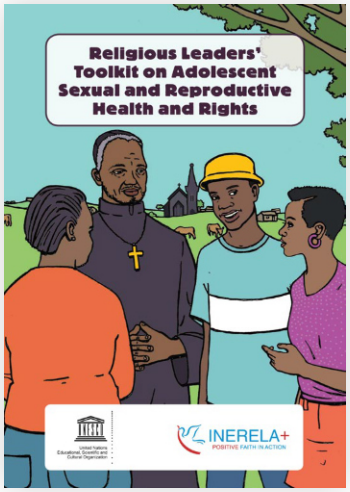
The below standalone resources have been adapted from existing faith-framed resources on CSE.

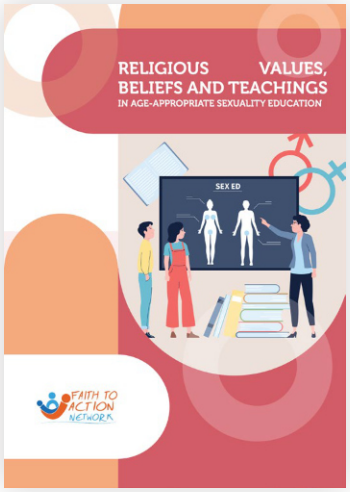
These include:

(click on the image to access)

- The Faith to Action Network's Religious Values, Beliefs and Teachings on Comprehensive Sexuality Education (2023/2024) and Interfaith Dialogue Guide on Adolescence Sexual and Reproductive Health and Rights (ASRHR)
- The UNESCO Regional Office for Southern Africa and INERELA Religious Leaders' Toolkit on Sexual and Reproductive Health and Rights (2021)







FAITH-FRAMED MESSAGING GUIDE

Religious and faith leaders are uniquely positioned to offer support for comprehensive sexuality education based on the privileged position that they hold within communities. This position should not be taken lightly and can make a difference in whether a community accepts or rejects CSE implementation.

This is because of the advantaged positions and social status within communities that religious leaders hold. These platforms should be used to provide accurate and informed CSE information that is guided by their values and beliefs which will in turn mainstream the right teachings in various sexual health topics for adolescents and youth.

This guide gives religious and faith leaders and faith-based communicators short, ready counter-messages that respond to the most common objections without importing language that feels foreign to their own traditions and culture. It draws its authority from values that faith communities already hold such as protection of the young, the dignity of every person, and shared responsibility between parents, congregations, schools, and the state.

The aim is to support relevant initiatives that empower adolescents to live healthy lives and have respectful relationships.

Remember the core narrative used throughout the Stakeholder Engagement Toolkit:

> CSE **protects** young people so that they can grow up **healthy, safe** and **equipped** to build strong families and communities **reflecting the very values** of care, protection and responsibility that families, faiths and traditions already hold.

This guide is a companion to two related documents produced alongside it:

01 **A Theological Response Brief, which sets out fuller, claim-by-claim theological responses; and**

02 **A set of Talking Points for Faith Leaders for public advocacy.**

When engaging in faith framed messaging, the following strategies or considerations are useful:

PART ONE

Always focus on ensuring that you clearly communicate the three shared values of protection, dignity and shared responsibility in response to any counter messaging that may arise.

UNESCO's International Technical Guidance on Sexuality Education states that CSE aims to:

- Help learners "realise their health, well-being and **dignity**
- Develop r**espectful** social and sexual relationships
- Consider how their choices **affect** their own well-being and that of others
- Understand and ensure the **protection** of their rights throughout their lives

The three values below map directly onto that aim, and onto language already used within existing briefing materials.

PROTECTION

CSE's own framing is protective

It exists to help children recognise abuse, coercion and exploitation, and to know what to do when they encounter them.

Faith-anchored counter-message

- When children are given the right information by trusted teachers and leaders, they are able to **protect themselves** and learn how to make **informed decisions**.
- Age-appropriate CSE teachings gives a child the words to **name abuse, refuse coercion, and report it**.
- Protection is an **active duty** shared by every adult in a child's life. Guiding and teaching children as they grow is how they learn to recognise harm and stay safe. CSE supports adults in carrying out that duty, rather than taking it from them.

Scriptural anchor

- **Christianity: Proverbs 22:6** requires us to train up a child in the way they should go. This frames raising a child as active guidance, not passivity. Protecting a child means preparing them and giving them the understanding to recognise harm and respond safely. CSE supports that preparation.
- **Islam: Qur'an 6:151** (Surah Al-An'am) affirms the sacredness of a child's life and the duty of adults to honour and protect those in their care. Protection of this kind is active, not passive. It means guiding and teaching children as they grow so they can recognise harm and stay safe. CSE supports adults in carrying out that duty.

DIGNITY

Dignity is foundational to many faiths, which teach that every person's worth is inherent, not earned. CSE is, at its core, about that same dignity. It affirms that young people are worthy of respect and equips them to extend respect for others dignity.

A faith leader can support age-appropriate CSE, including its content on consent, non-violence and non-discrimination, while continuing to teach their own tradition's position on marriage and sexual ethics.

Faith-anchored counter-message

- Every young person **carries inherent worth** from the moment they are created, a conviction that many faiths share.
- Dignity is not protected by silence; it is **protected by knowledge**. That knowledge lets a young person treat others with respect and enables them to recognise when their dignity is being violated.
- Faith leaders do not need to resolve theological debates in order to support a **child's right to safety, information, and respect**. The Faith to Action Network's own position affirms that "the dignity and psychological and physical integrity of each person should be protected," while being explicit that theological views on sexual diversity remain genuinely contested within and across our traditions.

Scriptural anchor

- **Christianity: Psalm 139:14** affirms that every person carries inherent, sacred worth. If that worth is inherent, protecting it means ensuring young people can recognise when it is being violated. CSE serves that dignity rather than diminishing it.
- **Islam: Qur'an 17:70** (Surah Al-Isra) teaches that human beings have been honoured and given inherent dignity. If that dignity is inherent, protecting it means ensuring young people can recognise when it is being violated, through abuse, coercion or exploitation, and respond. CSE serves that dignity rather than diminishing it.

LEARNING AND KNOWLEDGE

Knowledge itself is honoured in faith traditions. CSE offers access to knowledge and information to enable accurate understandings so young people can make wise and responsible choices.

Faith-anchored counter-message

Faith traditions call believers to **actively seek knowledge and understanding**. Equipping young people with accurate information is part of that calling. It is a lack of knowledge, not knowledge itself, that leaves young people vulnerable. CSE offers understanding that helps them make wise and responsible choices.

Knowledge is honoured, not feared. Giving young people accurate understanding equips them to make safe, informed decisions and to protect themselves.

Scriptural anchor

Christianity: Proverbs 4:7 calls believers to seek wisdom and understanding. If we are called to pursue understanding, then equipping young people with accurate knowledge is part of that calling. CSE offers knowledge that helps them make wise and responsible choices, rather than leaving them unprepared.

Islam: Qur'an 96:1–5 (Surah Al-'Alaq), teaches the value of reading and humanity being taught what it did not yet know. Knowledge here is therefore honoured, not feared. CSE extends that same principle, giving young people accurate understanding so they can make safe and informed decisions, rather than leaving them in ignorance.

RESPONSIBILITY

CSE should not seek to replace or challenge the role of parents or faith communities as they are an integral part of ensuring its consistent enforcement and uptake. CSE is designed to reinforce the roles and responsibilities of adults.

Faith-anchored counter-message

Both tradition and culture places **parents** first in the role of guiding their children. CSE's own design reinforces, rather than replaces, that responsibility, and asks faith leaders, who are already among the first moral leaders of children and adolescents, to reinforce it further, not to step aside.

Faith leaders are key stakeholders in every credible CSE framework, including the UNESCO technical guidance and national frameworks in all three countries. Where consultation has been thin, that is a legitimate gap to raise; it is a reason to ask for a seat at the table, not a reason to reject the content itself.

Scriptural anchor

Christianity: Proverbs 4:7 frames raising children as an active, ongoing responsibility. CSE supports parents and faith leaders in carrying out this responsibility , rather than taking it over.

Islam: Qur'an 66:6 frames the responsibility to protect, care, and guide one's family as a serious duty. That duty is exercised, not surrendered, when adults guide young people toward safety. CSE works alongside parents and faith leaders in carrying it out.

PART TWO

Ensure that your messaging includes country specific references and information, including the correct use of terminology and language. Religious and faith-based leaders should understand where the implementation and roll out of CSE within schools and other spaces currently stands and ensure that they are part of policy formulation where possible.

Uganda

Uganda's National Sexuality Education Framework was launched in 2018 into an environment already shaped by a 2016 national controversy over claims that foreign-linked curricula were teaching children concepts foreign to Ugandan values and culture. The then Minister of Education explicitly rejected the term "Comprehensive Sexuality Education" in favour of a more familiar term, "sexuality education," and a coalition of Catholic, Anglican, and Muslim leaders, whose institutions oversee the majority of primary and secondary schools, rejected the National Sexuality Education Framework outright. Therefore, in this context, avoid leading with the words "comprehensive sexuality education" in public messaging, rather use "age-appropriate sexuality education" or the Framework's own language, and anchor every message in the shared commitment to "God-fearing" values that the Framework itself claims to uphold. The Framework starts off by acknowledging the "significant sexual and reproductive health challenges" such as high cases of teenage pregnancy, early marriages, HIV and gender based violence in schools. Therefore, religious leaders may also lead with these issues that Ugandan society can attempt to solve together with age appropriate and culturally sensitive CSE.

Malawi

CSE is delivered in Malawi mainly through Life Skills Education (LSE) in primary schools. The Ministry of Education, Science and Technology (MoEST) in Malawi introduced the LSE programme in 2002 and by 2004 it was made a compulsory subject in primary schools. UNESCO's situational analysis of LSE delivery found that content varies significantly from classroom to classroom, with some teachers omitting topics to align with their personal religious beliefs, and recommends stronger partnership with religious and community leaders as the main route to more consistent delivery. In Malawi, the practical entry point for faith leaders is therefore less about contesting the curriculum's existence and more about ensuring their own congregations, and the teachers who are members of their congregations, receive accurate briefing on what LSE actually contains. It can be useful for Religious Leaders to first have a solid understanding of what CSE entails and how it is implemented in their specific country.

Ethiopia

CSE is referred to as “Sexual education” “AIDS education” or “life-skills education” in Ethiopia. Ethiopia has the least established formal legal landscape governing the implementation of CSE of the three countries even though it faces steep challenges with stigma and misinformation surrounding CSE. Therefore, CSE messaging within Ethiopia should be grounded in fact and religious leaders should ensure that they are part of policy formulation at an early stage.

Module 1 and 2 of the Stakeholder Engagement Toolkit has some useful information and additional resources for this purpose. In addition to the **Digital Platform** developed for this specific purpose.

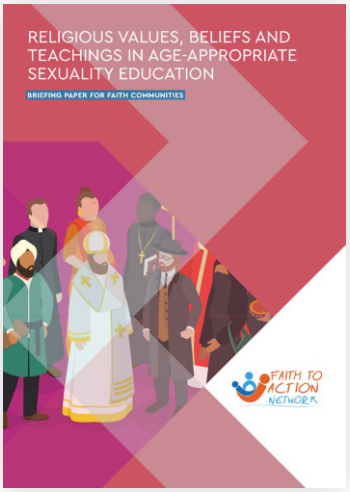
PART THREE

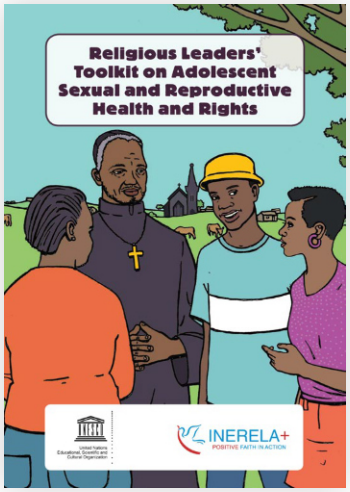
Make use of existing resources mentioned at the outset of this guide for specific content and activities related to CSE discussion groups and dialogues.

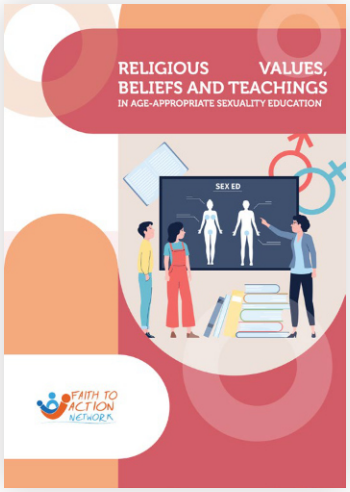
These include:

(click on the image to access)

- The Faith to Action Network’s **Religious Values, Beliefs and Teachings on Comprehensive Sexuality Education** (2023/2024) and **Interfaith Dialogue Guide on Adolescence Sexual and Reproductive Health and Rights (ASRHR)**
- The UNESCO Regional Office for Southern Africa and INERELA Religious Leaders’ **Toolkit on Sexual and Reproductive Health and Rights** (2021)







THEOLOGICAL RESPONSE BRIEF

Addressing specific claims that comprehensive sexuality education violates religious teaching: Christian and Muslim perspectives for Uganda, Malawi, and Ethiopia

This brief responds directly to specific claims raised against comprehensive sexuality education on religious grounds. It is written for faith leaders who support age-appropriate CSE and need a considered, sourced response when a claim is put to them publicly, rather than a general statement of support.

Christianity and Islam are each internally diverse, and denominations and schools of thought within them reach different conclusions on some of the questions below. This brief is not an exhaustive systematic theology and does not claim to speak for every tradition or school. The guidance set out here is informed by faith-based sources; they are not rulings issued by any religious authority. Faith leaders who need a definitive position for their own community should consult their denominations or institution's own doctrinal authority.

CLAIM ONE

CSE is encouraging early and risky sexual behaviour and is in direct contrast to abstinence-based teachings.

This is the most frequently raised objection across all three countries. As a starting point, it may be useful to hear from youth themselves on this topic.

> From the YPAR reports, surveys conducted with youth specifically, it is clear that this is not the case. For example, these findings showed that CSE generally wielded positive outcomes for young people. This included increased levels of **confidence in the ability to say "no" to sex and sexual advances, to report cases of abuse, to buy and use condoms and to negotiate sexual activity**. In addition, youth reported that CSE allowed them to make better and informed decision making when it comes to sexual activity such as the choice to abstain from sex and avoid pregnancy, as one in-school youth noted in Uganda:
>
> *"I decided to abstain [from sex]. I am not ready to engage in those things.*

From an evidentiary perspective, according to the **UNESCO technical guidance on sexuality education**, CSE addresses developmentally relevant topics when it is most timely for a child's health and well-being.

This means that what is taught to a five-year-old is not what is taught to a fifteen-year-old, and the CSE curriculum is structured in stages precisely to prevent premature exposure.

CSE does not encourage sexual activity, but instead seeks to ensure that if, and when, youth do engage in such activity that they are able to make informed decisions that reflect their stage of development, including how to report abuse and any coercive conduct directed against them. CSE also directly addresses the risks of engaging in sexual activity and includes content that covers issues such as "menstruation; reproduction, modern contraception, pregnancy, and childbirth; and STIs, including HIV and AIDS". These are prevalent issues facing youth in Uganda, Malawi and Ethiopia and religious leaders have the opportunity to ensure that young people are protected from STIs and situations that may place their lives at risk including unsafe abortions due to a lack of knowledge.

The claim that CSE and abstinence-based teachings are mutually exclusive rests on a misunderstanding of what CSE actually includes. Abstinence is not excluded from CSE; it is one of the life skills CSE is explicitly designed to support, alongside preparation for those who are already sexually active or who will become so in future.

Theological underpinnings

The theological case for early, honest instruction is a positive one, not merely defensive.

- Christian communities draw on Hosea 4:6 to argue that it is ignorance, not knowledge, that endangers the young. Proverbs 22:6 frames the early, deliberate formation of a child as a sacred responsibility, laying a firm foundation that good teaching endures into adulthood. CSE supports that formation rather than competing with it.
- In Islam, the pursuit of knowledge is itself a mark of faith. Qur'an 96:1–5 (Surah Al-'Alaq), suggests knowledge as something honoured, not feared. Understood this way, equipping young people with accurate, age-appropriate knowledge so they can make safe and responsible decisions is faithful to a tradition that treasures learning, not a departure from it.

CLAIM TWO

CSE is being "foreign" or "colonial", against culture and religion.

The concept of sexuality education has never been foreign to African societies, according to Uganda's 2018 National Sexuality Education Framework:

> ***In the past, sexuality education in Uganda was primarily handled by parents and relatives*** *within the cultural setting of each family and community. This was reinforced by the teaching of the religious denomination that a family and child belonged to.*

Therefore, religious and cultural communities have, for the longest time, engaged with these types of topics.

What has changed is terminology and curriculum structure, not the underlying practice of preparing young people for adult life.

CSE intends to address gaps in delivery as not every child has had the same type of access to these spaces and teachings. Using schools as the primary setting for CSE roll out closes this delivery gap and ensures that all children have the same access to information that will allow them to make safe and informed decisions about their bodies and relationships.

However, these contestations should not be dismissed as Uganda's history of policy development around CSE clearly showcases the reality of these types of claims. Importantly, as much as there has been contestation from internal groups leading to the ban of CSE in schools in 2016, there has also been extensive support from its own High Court. After Uganda failed to implement its **National Sexuality Education Framework** the High Court, in its **judgment**, supported the need for CSE as provided for in multiple UN documents including the UNESCO technical guidance on sexuality education and ordered that the Ministry develop a comprehensive sexuality education policy in line with Uganda's international obligations.

Where a national framework has been authored and owned locally, such as Uganda's NSEF, which its own government described as "**home-grown**," the fairer response to the colonial-imposition claim is to point to that **local ownership** and to invite **continued local adaptation**.

As Ethiopia has the least developed national framework on CSE, religious leaders should ensure that they have a seat at the table for policy formulation and play an active role in ensuring that CSE reflects the cultural values and traditions of society to the extent possible while still complying with international standards. This will encourage community to buy in and ensure that CSE is accepted as an inclusive and reflective curriculum.

CLAIM THREE

CSE undermines parental authority and seeks to replace their role in their children's lives.

CSE does not seek to replace the role of parents or religious leaders. Instead, it positions parents and religious leaders are well-placed to accompany young people as they transition from childhood, through adolescence into adulthood.

In order to ensure that this transition is as seamless as possible, these groups should actively engage in open discussions about sexuality, reproductive health, and HIV within the context of faith communities. The socio-ecological model underlying the UNESCO guidance places parents and family as the layer closest to the adolescent, ahead of school, faith community, media, and government.

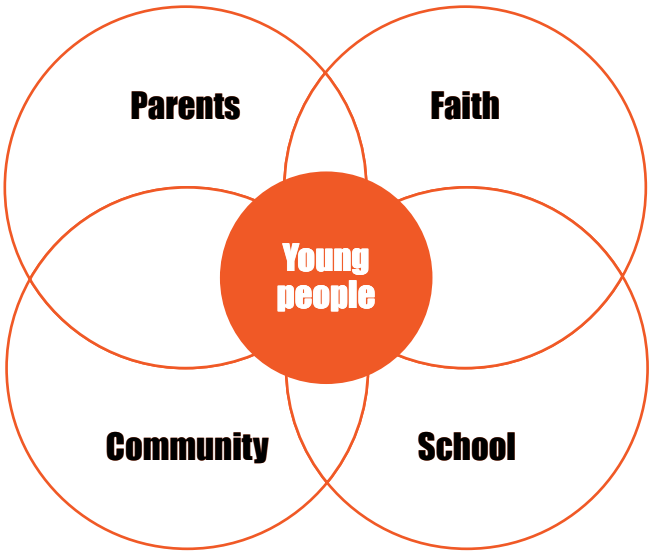
In addition, in Malawi, YPAR findings showed that when youth were exposed to CSE, they were more likely to follow advice from teachers and parents, not take away from their authority.

Theological underpinnings

Both Christianity and Islam place parents first in the raising of children, and frame that role as active teaching rather than passive oversight.

- In Christianity, Deuteronomy 6:6–7 instructs parents to teach diligently, casting instruction as a continuous, everyday duty woven through family life.
- In Islam, the care and guidance of one's family is likewise a serious, ongoing responsibility placed on parents and guardians.

CSE is designed to support adults in carrying out that duty, extending and reinforcing the teaching that begins at home, not to take it from them.



TALKING POINTS FAITH LEADERS

This document sets out some talking points for religious leaders who are already persuaded that age-appropriate CSE protects children, and who want public, sermon-ready language. If you are still weighing the question yourself, the companion Faith-Framed Messaging Guide and Theological Response Brief may be the better starting point.

Overarching core message pillars

Protection is a sacred duty

Caring for children, including for their safety, their dignity and their future is one of the clearest responsibilities placed on parents, elders and faith communities alike. Supporting age-appropriate CSE is an expression of that duty, not a departure from it.

Silence is not the same as innocence

Where children are left without honest, age-appropriate guidance, it is silence, not information, that leaves them exposed to harm, exploitation and shame. Speaking truthfully with children, in a manner fitting their age, is consistent with a faith tradition's call to raise children in truth.

This supports the family and the faith community. It should not and will not replace either

CSE is not positioned as a substitute for what happens in the home or in the church, mosque, or community of faith. It exists for the moments a parent or faith leader cannot always be present for, and it is strongest when it reinforces, rather than competes with, what children are taught at home.

Compassion for the vulnerable is a public calling

Our communities already include young people who are pregnant, living with HIV, or recovering from abuse. A faith leader's public voice can either add to their shame or offer them safety. Speaking about CSE with compassion is a way of choosing safety for them, publicly and deliberately.

Talking points

Why you are speaking about this:

> *I speak about this today because protecting our children is not someone else's responsibility to carry alone. It belongs to all of us: to parents, to elders, and to this community of faith.*

Protection versus threat:

> *What I have come to understand is that this is not a threat to what we believe. Instead, it is a form of the same protection our faith already asks of us: children who are safe, who are respected, and who know they can come to a trusted adult when something is wrong.*

Truth and silence:

> *Our silence has never protected a child. What protects a child is truth, spoken with care, at the right time, in the right way for their age.*

Supporting parents, not replacing them:

> *This does not ask you to hand over your role as a parent, or your role as a person of faith. It asks us to stand alongside you, for the moments you cannot always be there.*

Compassion for those already struggling:

> *Somewhere in this room is a young person carrying a fear, a shame, or a secret they have not told anyone. What we say from here today will decide whether they feel safe enough to come to us, or whether they carry it alone.* [Insert your tradition's teaching on mercy and compassion for the vulnerable.]

A closing call to action:

> *I am asking you, as parents and as this community, not to fear this conversation, but to have it with your children, with each other, and with me. Come and ask your questions. Let us work through this together.*

Where to use these

Moment: Opening

How to use it

Use the "why I am speaking about this" line to frame your authority to speak as a matter of protection and care, not politics.

Moment: Addressing a concern directly

How to use it

Use the protection-versus-threat and truth-and-silence points to reframe CSE in the communities' own values before offering any detail.

Moment: Closing

How to use it

Use the closing call to action to invite conversation rather than end on a contested note.

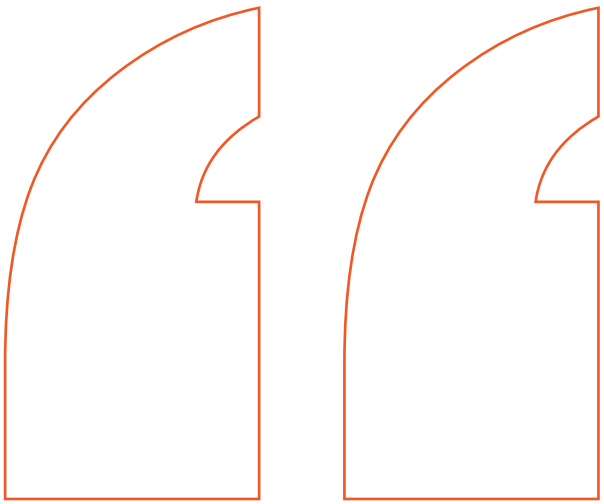
Moment: A public Q&A or press conference

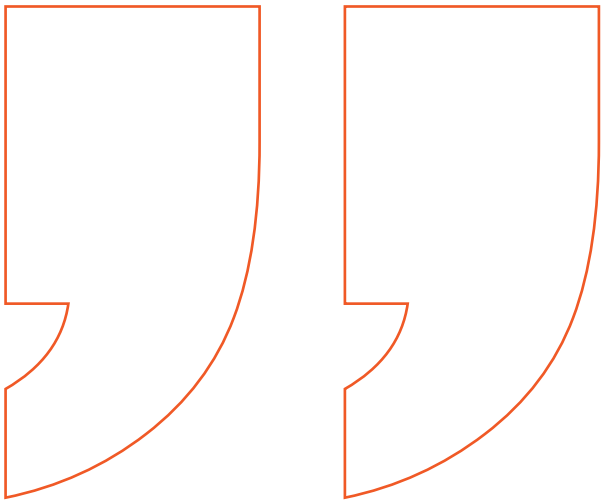
How to use it

Keep to the compassion and protection framing; where a specific doctrinal question is raised, it is appropriate to say you will respond after further reflection or consulting with your peers or advisors.

Language to use with care

- Lead with **protection, dignity and compassion**, avoid framing that sounds like it is defending an external programme or organisation.
- Avoid language that could be read as taking a public position on contested political debates unrelated to child protection; keep the focus on **safety, honesty and care** for the vulnerable.
- Avoid presenting yourself as having every answer. “I will reflect on that and come back to you” protects your credibility better than an improvised theological position.





Teachers and School Administrators

YPAR findings consistently showed that schools are the primary setting where youth and adolescents receive CSE. Teachers and school administrators are therefore the primary implementers and frontline messengers of CSE in practice. They are also the connection between learners and parents/communities exposing them to personal criticism if content or delivery becomes controversial.

Further, YPAR research conducted in Uganda, shows that teachers often struggle with "conflicting cultural schemas," balancing expectations of moral guardianship with the delivery of rights-based CSE content. Similarly, research highlighted how teachers' professional identities influence selective teaching practices, often prioritising abstinence over comprehensive topics like contraception and gender. This research suggests that while Uganda has made policy progress, practical challenges in classrooms persist, necessitating greater focus on teachers' training, community engagement, and accountability mechanisms.

Meanwhile, in Malawi, teachers reported relying on general teaching training and expressed uncertainty about how to handle sensitive SRHR topics. One teacher explained, *"… we rely on our general teaching training… [For] many of us, it's hard for us to be sure [that] we are doing the right thing without training…".* This lack of specialised training has led to sensitive topics such as contraception, consent, or gender power relations being avoided or delivered inconsistently.

Further YPAR findings include that while schools were the primary vehicles through which CSE is delivered, many youth participants described barriers to effective engagement on these topics due to a lack of privacy and a fear of judgment. Teachers play a pivotal role in ensuring that these barriers are not realised. These concerns have and will continue to limit open discussion of sexuality-related issues. Participants further reported that the absence of private counselling spaces and the public nature of some school-based sessions discouraged them from asking sensitive questions. Fear of ridicule from peers and concerns about confidentiality further reduced comfort, with some participants even expressing worry that teachers might disclose personal information to parents or other authority figures.

The below standalone resources have been adapted from existing faith-framed resources on CSE.

Inclusive delivery: ensuring that CSE reaches every learner

YPAR research found that although the positive outcomes of CSE are reflected across learner groups, including in-school and out-of-school youth, and for youth with disabilities, access to and effective delivery of CSE is still focused on urban areas within mainstream schooling. The effect of this is that youth with disabilities are too often left out of CSE delivery in practice.

In Ethiopia specifically, the research highlighted a critical need for CSE to reach rural youth and youth with disabilities, who are often marginalised from CSE information that reaches other young people. Young people with disabilities also face additional, specific barriers including stigma, exclusion from mainstream CSE delivery, and limited access to information in a format they can actually use.

To bridge these gaps in the classroom, this requires the following from teachers and educators:

- Do not **assume** a learner with a disability needs less of the curriculum, or a simplified version of it. This is reflected in the same positive outcomes emerging from youth with disabilities from standardised CSE content.
- Use **inclusive** teaching methods. This may include large-print, Braille, or audio versions of materials where a learner needs them and adapting how teachers check understanding for learners with different communication needs.
- Regularly check in with the school's leadership whether any Braille, audio, or other accessible versions of CSE materials are available, and if not, whether producing them is something the school or Ministry can prioritise or resource.

ADDITIONAL AND CREDITED RESOURCES

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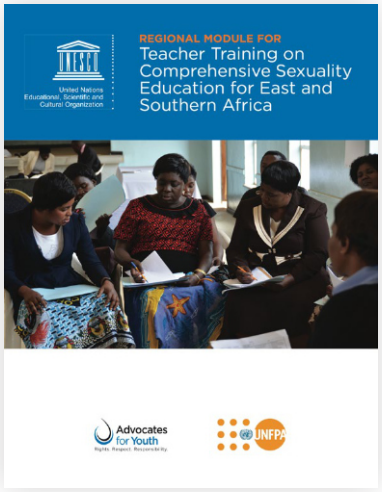


PROFESSIONAL GUIDANCE NOTES WITH CURRICULUM REQUIREMENTS AND LEGAL PROTECTIONS FOR TEACHERS FACING COMMUNITY PRESSURE

YPAR findings consistently show that schools are the primary setting where young people receive CSE. That makes teachers and school administrators, the primary implementer and frontline messengers of CSE in practice. These groups also act as the connection point between learners and parents or the wider community, which can expose them to personal criticism if content or delivery becomes contested. This guidance exists to make this role safer and more sustainable for teachers and school administrators.

As a starting point, it is useful to understand some of the challenges and barriers facing teachers in Uganda, Malawi and Ethiopia. These barriers were identified in the YPAR country specific reports.

Uganda

01

Research indicates that teacher capacity remains uneven. Most educators receive limited specialised CSE training with many reporting discomfort teaching sensitive topics.

02

Delivery quality varies significantly by teacher confidence and local support.

03

The research found that many lessons remain lecture-oriented, with limited opportunities for confidential discussions, practicing skills learned, or genuine learner engagement, limiting their effectiveness.

04

The findings reveal a critical gap between policy mandates for teacher training and actual capacity on the ground.

Ethiopia

01

Many educators reported limited training and insufficient teaching materials to deliver CSE effectively.

02

As a result, some teachers felt uncomfortable addressing sensitive topics or relied heavily on textbook-based instruction without interactive learning approaches.

03

Without adequate institutional support, teachers avoid controversial subjects or focus only on basic biological information.

Malawi

01

Challenges focus mainly on a lack of resources and training. Youth participants noted that teachers sometimes rushed through sexuality education topics due to limited time allocation within the school timetable.

02

Other participants reported that Life Skills lessons lacked practical teaching approaches and supporting materials.

03

Teachers reported relying mainly on general teaching training and expressed uncertainty about handling sensitive SRHR topics. Some educators felt confident delivering lessons but emphasised the need for caution when discussing sexuality with learners.

04

Studies across different contexts show that many teachers lack adequate understanding of both CSE content and appropriate teaching methods, which limit their confidence and effectiveness in delivering CSE.

STEP 01

Know your policy environment and what you are required to teach

As the above challenges clearly indicate, teachers in all three countries feel inadequately trained to deliver effective CSE in schools. While each country has its own varying degree of formal policy covering the delivery of CSE, a teacher's strongest protection will be to ensure that they are teaching exactly what is set out in the approved national curriculum or syllabus, at the approved grade level, using approved materials. Further support for this type of preparation includes YPAR findings in Ethiopia that teacher preparedness emerged as a critical determinant of CSE implementation quality.

In order to ensure that the correct content is being taught, locate the official syllabus and any Ministry circulars covering CSE-related content for your grade level, under whatever local name it is taught.

Malawi	"Life Skills Education" at primary level; "HIV Education" or "Sexual and Reproductive Health Education" at secondary level.
Uganda	"Sexuality Education" is taught as part of "Life Education".
Ethiopia	"Sexual education" "AIDS education" or "life-skills education".

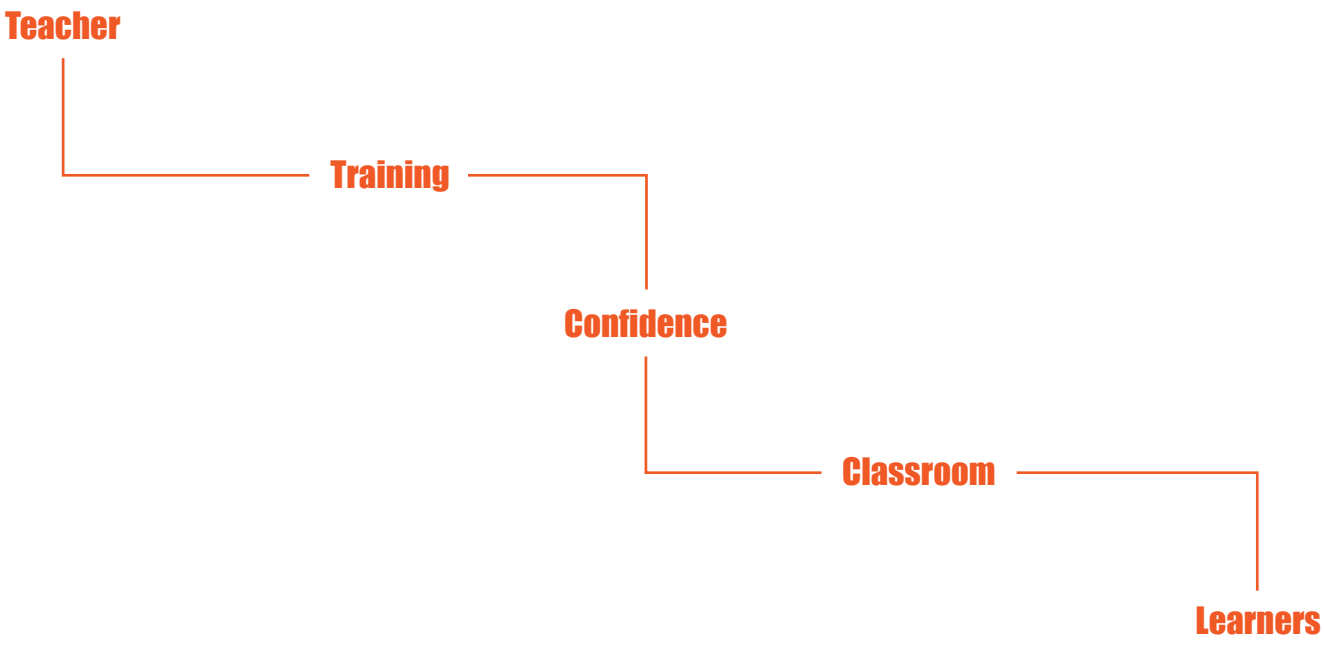
The policy environment in Uganda is more advanced than in Ethiopia or Malawi. For example, the National Sexuality Education Framework developed by the Ministry of Education and Sports clearly sets out the key themes, topics and developmental message areas for each schooling phase. This helps teachers understand whether the CSE curriculum that they have been asked to teach is nationally acceptable and correct. Knowing precisely what you are required to cover removes one of the most common reasons teachers fail to adequately deliver CSE content.

Ethiopia has the least formalised policy environment with no specific CSE policy, while Malawi currently delivers sex education primarily through the LSE curriculum rather than through a standalone, UNESCO-aligned CSE framework. Evidence from YPAR suggests that LSE delivery is inconsistent across schools and influenced by sociocultural and religious resistance.

A regional UNESCO/UNFPA teacher-training module developed for East and Southern Africa notes that teachers commonly avoid certain topics or questions because of personal discomfort, unclear agency policy, or uncertainty about what the curriculum actually requires, not because the topic is genuinely outside the syllabus. While leaving out approved content may feel safer, it can also weaken your position if a complaint arises, since your protection rests on delivering the approved curriculum as a whole. Raising this tension with your school leadership before it becomes a crisis is a more sustainable path than resolving it alone, lesson by lesson.

RESOURCE

UNESCO have developed a **Regional Module for Teacher Training on Comprehensive Sexuality Education** for East and Southern Africa complete which "provides a core set of lesson plans to equip teachers with the basic knowledge and skills necessary to deliver effective sexuality education in the classroom." While this does not absolve government training initiatives, it is a useful resource for teachers looking to upskill or train fellow colleagues in these topics.



STEP 02

Keep a record

First, confirm with your school leadership which materials are approved for classroom use, and keep a copy. Then also keep a simple record of what you taught, when, and using which approved materials. This is one of the most effective protections available to you if a complaint is raised later.

It may also be helpful to keep a record of any anti-CSE messaging that arises so that you can identify trends of organised opposition or backlash.

Legal protection available to teachers

The regional UNESCO/UNFPA teacher-training module recommends that every CSE-delivering teacher should be able to answer a specific set of questions about the law and policy in their own country, ideally through a briefing from a Ministry official, the school's legal or HR office, or your teachers' union, arranged before you need the answer under pressure.

Use the questions below, extracted from the regional training module, as a checklist to work through with your school leadership:

01. What do national, provincial and school-level laws or policies say about what can and cannot be taught in CSE?
02. Is there a mandatory national curriculum or standard you must follow, and do you know where to find the current version?
03. Are there laws or policies requiring parents to be notified about CSE content before it is taught?
04. What are the confidentiality rules between you and a student, and under what circumstances are you required to report something a student discloses to a supervisor or the authorities?
05. Can you refer a student directly to sexual health, HIV/STI, or mental health services, and under what conditions?
06. What are the relevant age-of-consent, sexual violence, and HIV-disclosure laws you may need to explain accurately if a student asks?

Where the answer to any of these is unclear or the law is silent, the same module recommends having an agreed, ethical decision-making process for that situation worked out in advance with your school leadership rather than deciding alone, in the moment, under pressure.

Alongside these country-specific answers, some general protective practices apply everywhere:

- ✓ Delivering the officially approved curriculum, as authorised by the Ministry of Education, is generally understood to fall within the scope of your professional duties provided you remain within the approved content and materials.
- ✓ Documentation is protective: a simple record of what was taught, when, and from which approved source materials strengthens your position if a parent or community member raises a complaint.
- ✓ Know your school's and Ministry's complaint-handling and escalation procedure before you need it, so you are not working it out for the first time under pressure.
- ✓ Threats, harassment or intimidation directed at you personally should be reported to your head teacher or school administration, and where necessary to local authorities. You should not be expected to manage serious threats to your safety alone.
- ✓ A teachers' union or professional association, where you are a member, may offer additional support and representation if a complaint escalates.

CLASSROOM OBJECTION-HANDLING GUIDE FOR TEACHERS

Responding to students who bring anti-CSE messaging from home

While school is the primary setting where children receive CSE in its various forms, parents and communities have taken an active role in sharing this type of information for centuries. Therefore, children walking into a classroom may have been exposed to varying levels of sexuality education with different world views informing how they receive or implement CSE in their lives.

It is important that teachers and school administrators realise that when a student brings a question or concern to you, they are most likely repeating something that they heard at home, from a pastor, or from a community elder. They are not usually looking to engage in an argument, but are instead often testing what is safe to say, in front of their classmates, about something their family believes. YPAR findings show that learners already fear judgement and ridicule from peers when sexuality-related topics come up and worry that teachers might disclose what they say to parents or other authority figures. That means your response as an educator should address the subject matter calmly while still protecting the student from being publicly put on the spot, or from feeling that they should choose between you and their family in front of the class.

RECOGNISING ANTI-CSE MESSAGING

Anti-CSE messaging in the classroom tends to have a few recognisable features:

- ✓ It's usually attributed to an outside source rather than the student's own experience or curiosity. For example: "my parents said", "I saw a video…", "someone gave out a pamphlet".
- ✓ It often uses absolute, alarming language such as "evil," or "illegal," rather than a specific worry such as "I'm worried about X".
- ✓ It tends to repeat phrasing you've heard before, sometimes almost word-for-word, rather than describing something specific to that student's own life or question.
- ✓ It's also frequently pitched to the room rather than asked as a private question. The student may seem to be testing the class's reaction, or repeating something to see if it lands, rather than genuinely seeking an answer.

None of this means the student is being dishonest or difficult; it usually just means they're carrying someone else's concern into the room, which is exactly why the response should be calm, brief, and non-confrontational rather than treated as a challenge to be won.

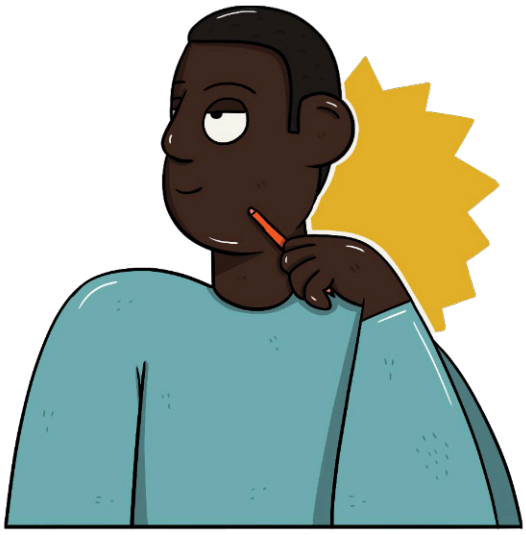
A suggested pattern to follow (**A**cknowledge **R**espond **I**nvite and **M**ove)

ACKNOWLEDGE the question or concern, briefly and without judgement. Do not dismiss it. For example, avoid phrases such as “that’s wrong” or “whoever told you that is wrong” even if the underlying claim is inaccurate.

RESPOND to the substance of the question or concern in one or two sentences, calmly and factually. It is useful to keep your answers short so that the moment doesn’t take over the lesson or turn it into a debate about the student’s personal family or faith.

INVITE Further conversation privately, rather than continuing the topic in front of the class.

MOVE the lesson on. Don’t let one exchange become the whole class’s focus, and don’t repeat or amplify the specific claim more than necessary to respond to it.



Scripts for common statements

Student:

My parents/pastor said this is against our culture and religion.

Teacher:

I hear that, and I know your family’s beliefs matter to you. What I can tell you is that this lesson is about keeping you safe and healthy, which most families and faiths care about too. Let’s talk more after class if you’d like. I’d rather answer that properly than rush it now.

Student:

My parents said talking about this will make us want to have sex.

Teacher:

That's a common worry, and it comes from wanting to protect you, which makes sense. What the evidence actually shows is the opposite, that knowing more tends to help young people make safer choices, not riskier ones. Let's come back to this if you have more questions.

Student:

This isn't what my church/mosque teaches.

Teacher:

That's alright. My job isn't to tell you what to believe, only to make sure you have accurate information to keep yourself safe. Those two things can sit alongside each other.

Student:

My parents said teachers shouldn't be talking about this, only they should.

Teacher:

Your parents are right that they play the biggest role in this. What we cover in class is meant to support what you learn at home, not replace it. If your parents want to know exactly what's taught, they're welcome to ask the school for the syllabus.

Student:

Someone shared a video/pamphlet saying this teaches bad things.

Teacher:

Thank you for telling me. I'd like to see exactly what that says, so I can respond properly rather than guess. Can you bring it to me, or tell me where it came from, after class?

What not to do

- ✕ Do not mock, dismiss, or criticise the parent, pastor, or community member the student is quoting, even indirectly.
- ✕ Do not turn it into a class-wide debate on the anti-CSE material itself as this risks amplifying a claim that most of the class hadn't otherwise heard.
- ✕ Do not force the student to defend or explain their family's views in front of peers.

Following up privately

A brief, low-key check-in after class such as "I wanted to make sure you're okay after our conversation earlier". This type of response does more to protect a student's willingness to engage than any amount of correction in front of the class. Keep these check-ins short, informal, and away from other students where possible, consistent with YPAR findings on the importance of private space for sensitive conversations.

Connection comes before correction, and trust creates space for learning.

PARENT MEETING PREPARATION GUIDE

Scripts for PTA meetings where anti-CSE materials have already circulated

When to use this guide: after a pamphlet, video, or social media post opposing CSE has already reached parents, and a meeting is needed to respond directly to the anti-CSE messaging. If you are rather looking to have a routine conversation about CSE with parents and the PTA then you should make use of the PTA Meeting Facilitation Toolkit found in the PTA stakeholder guide.

Before the meeting

If accessible, get a copy of the actual material that was circulated so that you can respond as accurately and directly as possible. This will also allow you to identify the specific claims, and match them against the claims response matrix contained in module 3 of the Stakeholder Engagement Toolkit. Additional resources that may be useful include the Parent FAQ and Myth-Busting Poster already produced for this Toolkit under the PTA stakeholder guide.

You may also consider informing your school leadership before the meeting in order to agree on who would be best suited to facilitate the meeting. If a teacher was personally named in the material, it may be better to choose someone else in order to keep the room more focused and to ensure that no one is personally targeted.

Opening script

Use this to name what has happened calmly, without amplifying alarm, and to reset the room to a shared set of ground rules before addressing specific content.

> *Thank you all for coming. I know that some material has been circulating recently about the CSE content taught at this school, and I know it has raised real questions and concerns for a number of you. That's exactly why we're here today, not to tell anyone they're wrong to be concerned, but to look at this together, openly, and answer the specific questions it has raised.*
>
> *Before we start, let's agree on how we'll talk with and to each other tonight. For example, only one person speaks at a time, disagreement is welcome but personal attacks are not, and if the conversation gets heated, anyone can ask for a short pause.*

Addressing the specific material

Name what is circulating directly, rather than letting it stay vague. This reduces its power and shows you are taking it seriously rather than avoiding it. It is not necessary to show or print out the materials but it is important to address the claims specifically.

> *I want to talk directly about the [pamphlet / video / message] that's been circulating. It raises x number of main points, and I'd like to go through each one honestly. If I don't know the answer to something, I'll tell you that too, rather than guess.*
>
> *The first claim is [state the claim without reading it aloud or redistributing it]. Here's what we know...* [use the matching answer from the claims response matrix or the parent FAQ].
>
> *I'd also like to ask: does anyone know where this material came from? It's worth understanding who produced it and why, alongside looking at whether what it says is accurate.*

If tensions rise

A parent insists the circulated material is accurate, despite the response given:

> *I hear that you trust this source, and I'm not going to try to argue you out of that tonight. What I'd ask is that we look at the specific evidence together, and that we keep coming back to this as a conversation rather than a decision to be settled in one meeting.*

The room becomes heated or several people talk over each other

> *Let's pause for a moment. I can see this matters a great deal to people here. Let's take a short break, and when we come back, let's return to the ground rules we agreed at the start.*

One parent repeats talking points and is not satisfied by any answer given

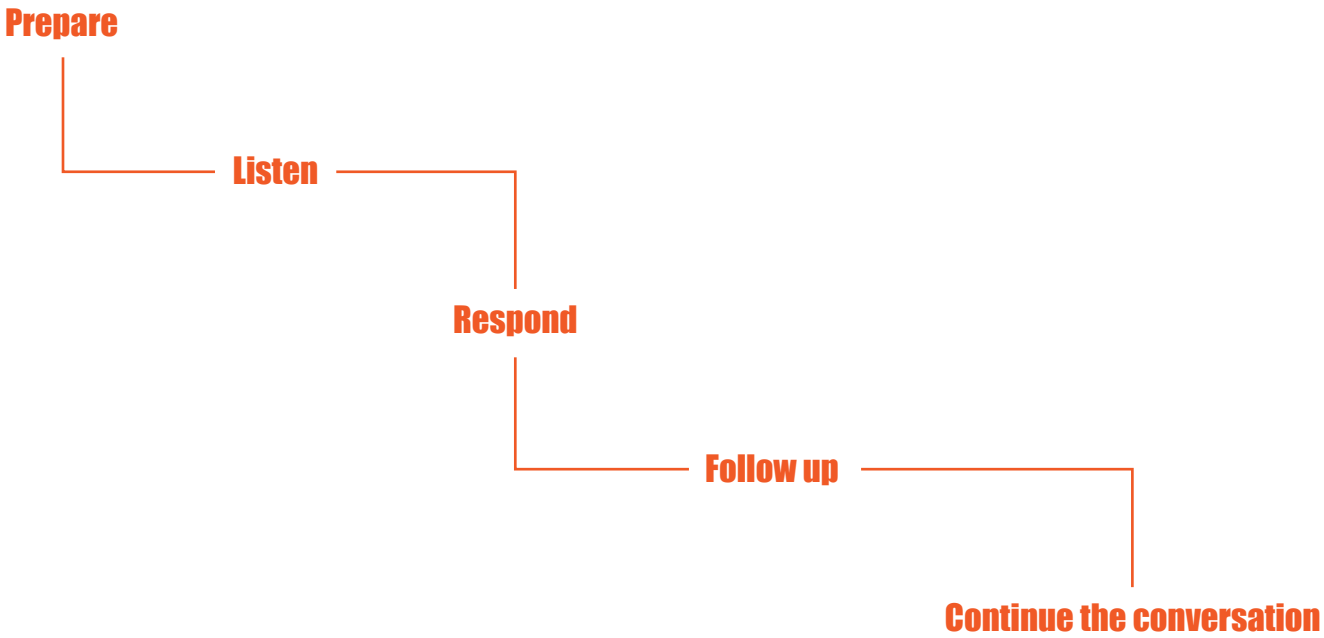
> *Thank you. I want to make sure everyone gets a fair turn to speak tonight, as we agreed. I'm going to note your point and come back to you directly after the meeting, so we don't use everyone's time on one topic. Let's hear from some other voices in the room now.*

Closing script

> *Thank you all for a difficult but honest conversation tonight. Here's what we've agreed, and here's what's still open...* [summarise agreement and open questions plainly]. *I will follow up in writing within* [time frame] *on anything we couldn't fully answer today, and on where this material came from if we're able to establish that. If anything else like this circulates before we meet again, please bring it directly to the school rather than relying on what's being shared. We would rather answer it directly than have it spread unanswered.*

After the meeting

Send the promised written follow-up within the timeframe you committed to. Remember that a missed follow-up undermines trust more than an imperfect answer given on the night. It may also be useful to start a shared document where teachers can keep a brief written record of when anti-CSE messaging is circulated, and any follow up steps taken. This is useful both for follow-up and to monitor trends and patterns over time.



Parent Teacher's Association

Research has shown that community and parental participation can positively contribute to the quality of primary education. These are more formal and organised institutional channels for parent voices, distinct from parents generally. PTAs may act as an entry point for trust building, or as a barrier if bypassed or mobilised by opposition.

PARENT FREQUENTLY ASKED QUESTIONS: COMPREHENSIVE SEXUALITY EDUCATION

Responding to students who bring anti-CSE messaging from home

This FAQ answers the questions and concerns parents raise most often about Comprehensive Sexuality Education. Each answer leads with the value behind the concern, offers evidence, and is honest about when it may be useful to engage with a specific health professional or other expert.

Question

Will talking to my child about this type of content encourage them to engage in earlier and more risky sexual behaviour?

Answer

> *This is one of the most common worries, and it comes from wanting to protect your child, which is exactly right. The evidence, particularly research from young persons themselves, points the other way: young people who receive honest, age-appropriate information tend to delay sexual activity and make informed safer choices, because they understand more about the risks and feel more confident saying no.*

Evidence

Overall YPAR findings showed that CSE generally wielded positive outcomes for young people. This included increased levels of confidence in the ability to say "no" to sex and sexual advances, to report cases of abuse, to buy and use condoms, to negotiate sexual activity.

In addition, CSE has been shown to increase informed decision making in sexual activity such as the choice to abstain from sex and avoid pregnancy, as one in-school youth noted in Uganda: *"I decided to abstain [from sex]. I am not ready to engage in those things".*

Question

Isn't this a foreign idea that doesn't reflect our culture and values?

Answer

> *That worry comes from wanting to protect what makes your family and community who you are, and that matters. But look at what CSE is actually trying to protect: children who understand their bodies, who can say no, who are not shamed into silence, and who know they can come to you if something is wrong. Those aren't foreign values, they are the same care and responsibility your own family and culture already ask of you as a parent. This is protection, not a threat.*

Evidence

YPAR research found that in each of the countries, the relevant policy frameworks that govern CSE recognise the important role of communities and multi-stakeholder engagement. This includes mothers' groups and parents in Malawi, youth and cultural clubs in Ethiopia, and local community leaders and families in Uganda. Therefore, CSE should still encourage and reflect those same values.

Question

Is there any real evidence that this approach actually works?

Answer

> *That's a fair challenge, and you deserve a proper answer rather than a quick one. Can I guide you through the website and full Stakeholder Engagement Toolkit for more accurate evidence that you can also go through on your own in your own time?*

Evidence

Ask if you can show them the evidence hub on the website as well as the claims response matrix so that they can go through the evidence for themselves.

Question

Doesn't this take away my role as a parent, or undermine our faith?

Answer

> *CSE isn't there to replace you as a parent, or to replace your faith community because it can't, and it isn't trying to. It's there for the moments you can't always be present for. Done well, it equips your child to come back to you and to their faith with their questions, not to move away from them.*

Evidence

In Malawi, YPAR findings showed that when youth were exposed to CSE, they were more likely to follow advice from teachers and parents, not take away from their authority.

Question

Is the content age-appropriate?

Answer

> *CSE should be taught in stages matched to a child's age and stage of development. This means that what a six-year-old learns (for example, naming body parts, understanding personal boundaries) looks nothing like what a sixteen-year-old learns. You have the right to ask your school exactly what is taught at your child's grade level, and to see the actual materials.*

Evidence

If you want more detail: ask your school directly for the grade-by-grade curriculum outline so you can see what is age-appropriate for your own child.

Question

Does this push beliefs about gender and relationships that go against our values?

Answer

> *CSE's core purpose is to help young people understand their bodies, build healthy, respectful relationships, and know how to stay safe. If you have concerns about a specific lesson or resource, the right response is to ask to see it directly rather than rely on what's been described secondhand, and to raise it with the school.*

Evidence

If you want more detail: ask to see the specific lesson or material in question so the conversation is about what is actually taught, not what's been said about it.

Question

My child already learns about this at home or at church so why repeat it at school?

Answer

> *That's valuable, and school-based CSE is meant to reinforce it, not replace it. Not every child has the same access to that guidance at home, and consistent, accurate information in more than one setting helps close that gap rather than duplicate it unnecessarily.*

Evidence

YPAR findings show that school is the primary setting where children are exposed to CSE with the second most common exposure setting being within the community. This may indicate that children are not as exposed to these teachings outside of the school community as one may think.

Question

What if I don’t want my child to take part?

Answer

This depends on your country’s and your school’s specific policy, and you have the right to ask about it directly. Speak to your school leadership or the PTA committee about the options available to you before deciding.

PARENT TEACHER ASSOCIATION (PTA) MEETING FACILITATION TOOLKIT

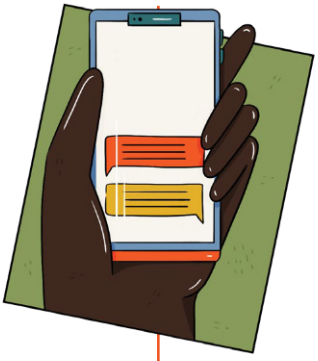
Agenda, talking points and activities for structured parent conversations on CSE

Your role as facilitator

Whether you are the PTA chairperson, a teacher, or another trusted parent, your role in this meeting is not to defend CSE or "win" parents over. It is to act as a convenor and to create a space where parents can raise their concerns, be heard, and work through the issues together. Parents are far more likely to accept something they have helped think through rather than something they have simply been told.

As with all other resources throughout this Toolkit, lead with the values parents already hold:

- **Protecting** their children,
- Raising them with **dignity**, and
- Preparing them to make informed and **responsible** choices.



Ensure to co-create rules with the room for what process will be followed should the discussion heat up or members are unable to agree so that this isn't a problem during the meeting.

What to bring

- Copies of the Parent FAQ (one per parent or per small group).
- CSE explainer cards for Activity 2 (printed from the FAQ questions).
- The myth-busting poster, to display in the room and leave on the notice board afterwards.
- Flip chart or board, marker pens, index cards.

Sample agenda for a 60-minute meeting

Time	Item	Purpose
0–5 min	Welcome and purpose	The facilitator should set a calm and respectful tone for the room. Then explain why the meeting is happening.
5–15 min	Ground rules and shared values	Co-create rules with the room for how difficult conversations will be handled or disagreements. The facilitator may then explain the shared values approach and explain this broadly as “how do we help our children grow up safe, healthy and well-prepared?”
15–35 min	Activity 1: Values circle, then open floor	Surface parents’ own hopes and concerns before presenting any information.
35–45 min	Activity 2: CSE explained	Work through understanding CSE together and the common claims made for or against it, using the Parent FAQ as the evidence base.
45–55 min	Activity 3: One takeaway, one question	Close the loop on unresolved questions and identify what to follow up on.
55-60 min	Agree next steps and close	Summarise agreement, identify parent champions and encourage ongoing learning.

Talking points for the facilitator

While explaining the shared values, make sure to explain that everyone in the room wants the same thing: children who grow up safe, healthy, and ready to make responsible choices. CSE is about protection, it is not a threat to culture or family values. CSE supports the role of parents and faith leaders, it does not replace it.

Silence, not information, is what leaves children exposed and unable to protect themselves or ask for help. You don’t need to have every answer during the meeting. “Let’s find out together and follow up” is always a fair response. However, every parent’s concern deserves to be heard, whether or not it is resolved in this meeting.

Structured activities

Activity 1: Values circle

Time: 10–15 minutes

Materials: An object to pass around the circle while talking such as a small ball.

01. Ask each parent or participant, in turn, to complete one sentence: *"One thing I hope for my child/learner's future is…"*
02. Note the recurring values on a flip chart as they come up (safety, health, respect, responsibility, faith).
03. Reflect them back to the room: *"This is exactly what tonight's conversation is about, how we get our children to that future, together."*

Activity 2: CSE explained

Time: 10 minutes

Materials: FAQ print outs

01. Split parents into small groups of 4–6.
02. Give each group the FAQ print out to discuss together.
03. Bring the room back together and go through each question, using the Parent FAQ answers to guide the discussion. It is important that the facilitator acknowledge the value behind each concern before responding.

Activity 3: One takeaway, one question

Time: 10 minutes

Materials: Index cards or paper slips

01. Ask each parent to write down one thing they are taking away from tonight's conversation, and one question they still have.
02. Collect the cards. Read out two or three takeaways to close on a positive note.
03. Commit publicly to following up on the unanswered questions and say how and when you will do so.

Facilitator tips: How to recognise the following:

Honest concern: is specific, about the parent's own child, and the parent can say what would reassure them.

Organised opposition: sounds like repeated talking points aimed at the room, not at you, and is rarely satisfied by an answer. If this happens, thank the parent, note the point, and offer to follow up one-to-one rather than letting it dominate the room.

Safeguarding: If a safeguarding disclosure arises such as abuse, child marriage and or violence, stop treating it as a discussion topic immediately and follow your school's child protection procedure if there is one or report to the national authorities such as the police.

The aim is not to win the discussion, but to strengthen trust and create space for continued dialogue.

MYTH-BUSTING: THE TRUTH ABOUT COMPREHENSIVE SEXUALITY EDUCATION IN SCHOOLS

MYTH	FACT
CSE is a foreign idea that threatens our culture.	CSE protects what our own culture already values, children who are safe, respected, and prepared.
Talking about this makes children have sex earlier.	It doesn't. CSE is linked to safer choices, not earlier sex. Silence, not information, is what leaves children exposed.
It increases the risk of pregnancy and HIV.	The evidence points the other way: without accurate information, young people are less able to protect themselves.
It undermines the role of parents and faith.	CSE supports parents and faith leaders, it works alongside you, not instead of you.
My child already learns this at home, so school doesn't need to.	Not every child has the same access at home, school-based learning closes that gap in ways that don't duplicate it.

SCAN THE QR CODES FOR RESOURCES FOR THE ABOVE

Faith to Action Network Religious Values Beliefs Teachings and CSE

UNESCO Technical Guidance on Sexuality Education

SIDA CSE

Ministry of Education and Health

STAKEHOLDER ENGAGEMENT GUIDE FOR OFFICIALS IN THE MINISTRY OF EDUCATION AND HEALTH

Working with religious and traditional leaders as partners

This guide is for Ministry of Education and Health officials responsible for the legal and policy legitimacy of the CSE curriculum. It aims to ensure that Ministry engagement with religious and cultural leaders leaves these stakeholder groups feeling as if they have a voice within policy formulation surrounding CSE implementation.

Religious and cultural leaders play a vital role in Ugandan, Malawian and Ethiopian societies. Their influence and impact is directly relevant to how CSE is perceived, received and implemented. For example, Uganda's National Sexuality Education Framework states that Faith Based Organisation's have founded 40% of pre-primary, 75% of primary and 56% of secondary schools while in Malawi, religious leaders remain the "face" of the opposition with large credibility. Therefore, establishing partnerships with these groups is a necessary step in working towards the effective uptake and implementation of CSE in schools and at home.

Partnership in this sense, is not:

- × A box-ticking consultation held after the policy is already final; or a
- × Unilateral imposition dressed up as "community engagement".

Both of these approaches are easily recognisable by leaders and communities and may feed narratives that CSE fails to reflect national considerations and priorities. In addition, YPAR findings confirm that a lack of meaningful consultation with cultural and religious leaders can increase the chances of misunderstandings and resistance at a community level. Instead, this guide is built on the premise that:

> Leaders who are engaged as partners from the outset become one of the strongest available forces for CSE support and legitimacy.

SIX Principles for partnership

ONE: Consult before you draft.

Extensive and meaningful consultation has the ability to lead to a feeling of ownership over final policy documents by consulted groups. This will increase buy in and support for CSE implementation.

TWO: Build partnerships with religious and cultural groups that will continue to inform CSE adoption.

This signals a commitment to working together rather than continuing to engage only when back lash or concerns arise.

THREE: Build on existing networks rather than duplicating them.

Regional faith-framed and traditional-leader engagement work already exists. For example, through the Faith2Action Network and SRHR Africa Trust. Partnering with these networks, and crediting their work, is faster and more credible than running a parallel process.

FOUR: Speak the same language using easily identifiable terminology.

Use the terms leaders and communities already use. The technical name “CSE” is rarely the term in local use. Therefore, make use of the following terms. For example, Malawi’s curriculum is generally known as “Life Skills Education” at primary level; Uganda teaches “Sexuality Education” as part of “Life Education”; Ethiopia refers to “sexual education”, “AIDS education”, or “life-skills education”. Framing policy conversations in these terms builds trust faster than the technical or international name.

FIVE: Give religious and traditional leaders a genuine and visible role to play in policy discussions.

This may include yearly ongoing engagements on CSE implementation or ensuring that partnership initiatives are visible to the public.

SIX: Build in a standing feedback channel.

Ensure that you are accessible to traditional and religious leaders so that concerns can be raised before they evolve into more sophisticated organised CSE campaigns.

Building partnerships requires **TRUST, TIME and COMMITMENT**. It may not happen over night and the above principles will need to be consistently applied over time. The table below suggests a staged approach to stakeholder engagement to allow for effective and meaningful partnerships to form over time.

Phase 01

Map and listen

What it involves

Identify the religious and traditional leaders and networks with real influence over CSE acceptance locally, including existing regional networks.

Hold meaningful engagements with these groups with the purpose of purely listening to their concerns and views before any formal policy reviews or drafting begins.

Why it matters

This type of approach treats religious and cultural leaders as partners in policy formulation rather than a passive participant after policy has been finalised.

Phase 02

Establish a standing partnership body

What it involves

Set up a joint advisory council or working group with clear terms of reference and a regular meeting schedule.

Why it matters

Converts a one-off consultation into an ongoing relationship that can absorb future disagreement without collapsing.

Phase 03

Co-review content

What it involves

Invite the established partnership body in phase 2 above to review draft curriculum materials for cultural and religious sensitivity before public rollout.

Why it matters

Pre-empts objections by addressing them before materials are public, rather than responding to them afterwards.

Phase 04

Joint public communications

What it involves

Co-brand launches; support leaders to explain the policy publicly in their own words and terms.

Why it matters

This frames government policy as a joint initiative that reflects national interests.

Phase 05

Ongoing feedback and rapid response

What it involves

Maintain open channels for leaders to flag emerging concerns or specific circulating claims.

Why it matters

Allows the Ministry to respond to a concern before it becomes a more organised or public backlash.

Risks to manage

Genuine partnership carries a real risk that engagement between Government and religious and cultural groups results in content being watered down below the international technical standards agreed upon by government. The way to manage this is not to avoid partnership, but to be explicit about it from the start. This may involve clearly setting out which elements are open for discussion on language, sequencing, and local framing, and which core contents are non-negotiable grounded in the government's own technical and rights commitments. For example, protection from abuse, consent, and accurate health information are vital aspects of CSE that should not be open for removal from the CSE curriculum.

Relevant international

Partnership conversations land more credibly when they are anchored in commitments the government itself already holds, rather than presented as an externally imposed standard.

These commitments include:

- The **International Technical Guidance on Sexuality Education**, published by UNESCO, UNAIDS, UNICEF, UNFPA and WHO which sets the global technical standard for what good CSE contains and why.
- The **WHO-led Global Accelerated Action for the Health of Adolescents (AA-HA!) framework** situates CSE within the government's broader adolescent health and well-being commitments, giving the Ministry of Health a clear institutional stake alongside the Ministry of Education.
- The **Ministerial Commitment on Comprehensive Sexuality Education and Sexual and Reproductive Health Services for Adolescents and Young People in Eastern and Southern Africa** (the "ESA Commitment"), sets shared regional targets on curriculum, teacher training, and youth-friendly services.
- **The UN Convention on the Rights of the Child** (CRC) and the **Convention on the Elimination of All Forms of Discrimination against Women** (CEDAW) are near-universally ratified and create general state obligations relevant to child wellbeing and aspects relating to CSE, subject to each country's specific reservations.

FAQ: RESPONDING TO GOVERNMENT ARGUMENTS AGAINST CSE

For Ministry of Education and Health officials enabling CSE policy legitimacy

This FAQ responds to the arguments most often raised inside government against CSE. This opposition could arise from other ministries or parliamentary committees. Each answer is written for an **internal** government audience and points to the framework or process that supports it. Each answer should be supplemented by each national ministry with specific legislation or policy as this FAQ does not seek to set out the policy landscape for Malawi, Uganda and Ethiopia comprehensively but rather give a general guide on the most difficult questions facing government officials regarding CSE.

01

> This is a foreign, Western agenda being imposed on our sovereign policy space.

This type of question may appear in different forms but will most likely centre around "sovereignty" concerns with the contention that CSE is not a locally produced concept.

Start by explaining that while CSE might seem like a foreign concept. These topics have been taught by parents and communities for decades. Uganda's own National Sexuality Education Framework acknowledges the role played by parents and relatives in the past while also stating that "there is a need to equip young people with appropriate knowledge, attitudes, values and skills to help safeguard their lives".

It may also be useful to substitute the term "CSE" with any of the below local adaptations:

Malawi	"Life Skills Education" at primary level; "HIV Education" or "Sexual and Reproductive Health Education" at secondary level.
Uganda	"Sexuality Education" is taught as part of "Life Education".
Ethiopia	"Sexual education" "AIDS education" or "life-skills education".

Evidence base

Much of the technical content contained within CSE is set out in **UNESCO's International Technical Guidance on Sexuality Education**, a standard shaped through extensive engagement with other UN bodies including UNAIDS, UNICEF, UNFPA and WHO. Applying an internationally accepted standard is an exercise of sovereignty, that aligns with international commitments made by Uganda, Malawi and Ethiopia. The national implementation of a CSE curriculum, while it should meet the technical guidance provided, is still a decision to be taken by national ministries and local authorities, bearing in mind cultural and religious traditions.

What this requires from government

A clear public position that the adoption and adaptation of CSE is a national policy choice grounded in evidence gathered locally, not an externally dictated mandate which has already existed for decades in various forms.

02

> The Ministry of Education and the Ministry of Health and or other ministries do not agree on how to approach this.

This question might point to capacity constraints or an underlying political struggle. At its root, is a genuine and common coordination gap. International instruments such as the World Health Organisation's **Global Accelerated Action for the Health of Adolescents (AA-HA!) guidance** as well as the **ESA Commitment** envisage collaboration between different ministries, particularly that of health and education. The AA-HA! states that co-ordination across government ministries is a vital part of improving adolescent health and wellbeing priorities while the ESA brings together both education and health sectors to collaborate and strengthen sexual and reproductive health and rights.

Both Ministries of health and education have a vital role to play in ensuring that accurate and age appropriate CSE is taught in schools. A **Whole School Approach Guide** makes a related, practical point that the Ministry of Education is entitled to a full understanding of CSE lesson content so that it can raise concerns constructively, and involve government staff directly in teacher training which would assist with building their awareness and support before a disagreement becomes public.

While it may be difficult to reach consensus on how to approach CSE implementation, a safer starting point may be to agree on why there is a need for such a programme.

For example, according to the Whole School Approach Guide mentioned above, one senior officer in the district of Education in Uganda stated:

> *Yes, we are grateful for the programme, as there are so many disadvantages in this district like early pregnancies, early marriages and domestic violence. We get back very, very nice reports from schools, about fewer pregnancies, and better attendance of girls, they have been empowered now, they are supported and make their reusable pads.*

Therefore, seek to find common ground on issues that may be less contentious in order to build trust and move forward from a place of mutual respect and towards a certain goal to eliminate these types of challenges facing the youth.

What this requires from government

A joint working arrangement which may include a memorandum of understanding or joint task team between the relevant ministries, with agreed, distinct roles, and direct Ministry involvement in teacher training rather than approval from a distance. The Ministry of Education should still lead the implementation of the CSE curriculum but the health Ministry should feel as if it has an active role to play in seeing it succeed.

03

> This will provoke religious and cultural backlash we cannot manage or afford politically.

The Stakeholder Engagement Toolkit is clear that religion and culture play a vital role in Ugandan, Malawian and Ethiopian society. In Ethiopia, religious leaders are seen as the "face" of the opposition and have large credibility since culture and religion intertwine in daily life while in Malawi, religious and traditional leaders play vital roles in establishing and maintaining norms and cultural values within their societies. These types of findings, supported by YPAR reports, indicate that it is imperative that religious and cultural leaders are included in consultations before policy is implemented, not afterwards. Backlash from these groups is often a symptom of leaders and communities feeling as if they were ignored during policy formulation more than disagreement with the content itself. YPAR findings indicate that "cultural and religious leaders reported limited engagement during CSE policy formulation and rollout, contributing to misunderstandings and resistance at community level." Therefore, policy drafters should always try to include community and cultural actors at early participatory stages of policy drafting on CSE.

What this requires from government

Early investment in developing partnerships between prominent cultural and religious groups before curriculum content is finalised or announced.

04

> Our existing curriculum already covers this adequately.

While YPAR research across Malawi, Uganda and Ethiopia show that there is a high level of exposure to CSE content for youth and adolescents, findings reveal important gaps in the content and depth of CSE delivered to young people. For example, participants in Ethiopia noted that sexuality-related content is mainly provided through Biology classes, where the emphasis is on scientific facts, such as physical and biological changes during puberty and not on other aspects of sexuality education, such as relationships and consent. This finding is mirrored in Uganda where youth reported not receiving coverage of skills based content including decision-making, negotiation and condom use.

In addition, location has been seen to affect how existing curricula is taught and to whom. YPAR finds show that in Malawi, exposure to CSE was not uniform as young people in rural areas reported fewer opportunities to access sexuality education due to limited outreach activities, shortages of trained teachers, and irregular engagement by health workers or development practitioners.

These gaps require urgent attention and indicate that existing Life Skills, HIV, or AIDS education curricula are insufficient to address the needs of youth and adolescents. A good starting point would be to conduct a thorough gap analysis against the UNESCO the International technical guidance on sexuality education.

What this requires from government

A structured curriculum review against the International technical guidance on sexuality education before deciding how to adapt existing curricula.

05

> This entangles us in international debates on gender and sexual diversity that are politically sensitive here.

At its core, CSE is about teaching youth about bodily autonomy, consent, protection from abuse, healthy relationships, and accurate health information for every child in the classroom. These issues are separate from, and do not require adopting, any particular international position on contested political debates. The International technical guidance on sexuality education is explicitly designed to be adapted to national and local context. Where a specific lesson or resource is contested, the practical response is to review that specific material against the technical standard, rather than treat the whole curriculum as inseparable from the debate.

What this requires from government

A clear internal position distinguishing the non-negotiable technical and or safety content from context-specific framing decisions that remain open to local adaptation.

Civil Society Organisations and Non-governmental Organisations

Civil society organisations (CSOs) and Non-governmental Organisations (NGOs) occupy a distinctive position in the CSE landscape. They are often the organisations that develop, fund, deliver, or advocate for CSE programming, and operate across many schools and communities at once.

Their value to this context is therefore twofold.

First, as amplifiers

Consistent, coordinated CSO messaging across multiple settings is exactly the kind of sustained repetition that shifts attitudes over time, and is the natural counterweight to an opposition that is itself organised and well-resourced.

Second, as responders

Because CSOs work across many sites, they are often the first to see a claim or a piece of anti-CSE material emerging in one place and spreading to others, and are well placed to coordinate a proportionate, consistent response before it becomes a wider campaign.

Click here to access the full Claims-Buster Database

RAPID RESPONSE GUIDE

For CSOs and NGOs: responding when anti-CSE materials appear in a school setting

This guide is for CSOs and NGOs that support CSE across schools and communities. Its purpose is to help you respond quickly and proportionately when anti-CSE material appears (a pamphlet at the school gate, a video, a social media post) without amplifying it or becoming the story yourselves.

It works alongside the **Claim-Buster Database** (which supplies the specific response to each claim) and the teacher and parent-meeting guides (which equip the school itself).

GUIDING PRINCIPLE

Match the response to the reach and the risk, not to how alarming the material feels.

- Most anti-CSE material reaches a smaller audience than it appears to, and a loud public reaction is often what carries it further than it would have travelled on its own
- The default is to contain locally and support the school to lead.
- But silence is not always the safer choice. Where material is spreading quickly, naming individuals, or already in the public domain, not responding can let a false claim harden into accepted fact. It is not about responding or staying quiet, it is about determining what is the most strategic and locally trusted response that meets the actual reach.

STEP ONE: ASSESS

Establish the facts before deciding on any response:

What is it, and where is it

- Is this one school, or coordinated across several? A single item is a local matter; a pattern across schools signals an organised campaign and a different response.

How is it spreading?

- Is it circulating offline (pamphlets, community meetings) or online (posts, video, messaging groups)? The channel determines the response.

Who is named?

- A teacher, the school, or your organisation? If a person is named, protecting them comes first.

How far has it actually travelled?

- Before responding, estimate how far the material has actually travelled. A pamphlet seen by thirty parents does not need a press release. Deal with it at the level it exists at. Over-responding hands the material an audience it never had.

Tip: Resist the reflex to issue an immediate public rebuttal. Reacting fast and loud is not always best and can turn a minor matter into a major one.

STEP TWO: AGREE ON A COORDINATION AND RESPONSE PLAN

Before anything goes out, have a discussion and a plan, especially where more than one organisation is involved.

Who leads

- Name a single response lead so the response is owned, not improvised by whoever saw the material first.
- The **most locally trusted voice available**, the school, the PTA, or a respected local leader, should carry it publicly wherever possible, with your organisation supporting rather than fronting. An external NGO leading the response is exactly what opposition messaging predicts, and it undercuts the message that CSE is nationally owned.
- Where the school genuinely cannot lead, for example where a teacher is named, or the school itself is the target, the plan should route elsewhere, but the aim remains to keep a **local, trusted voice at the front**.

What is said

- Agree **one response** and **use it everywhere**.
- A single, consistent reply across every school, partner, and channel is one of the most important things you can achieve.
- Fragmented or contradictory replies, by contrast, make CSE look uncertain and hand the opposition an opening.
- **Lead with the shared value** behind the concern before any facts. Where you need the wording for a specific claim, refer to the Claims-Buster Database rather than drafting fresh.

How it goes out, and who is informed

- Decide the **messenger and channel**, and where practical **inform partners** before a response goes out, not after, so no one is caught unaware or contradicts it.

When to escalate

Not everything can or should be handled locally. It is helpful to think through before things escalate. It can be helpful to consider escalating (and having an escalation plan) when:

- **Anyone is threatened or intimidated:** Safety comes first. Support the affected person to report it to school leadership and, where necessary, local authorities. No one should face a threat to their safety alone.
- **It stops being a single incident:** If the same material is appearing across several schools, treat it as an organised pattern rather than isolated events, and coordinate a consistent response with your partners and allies.
- **It moves beyond your reach:** If there is significant media attention, or political involvement, don't respond ad hoc. Briefly pause and take it to senior leadership and trusted partners to decide the approach, rather than reacting alone.

Tip: Prepare before you need to. Knowing your partners, your lead, and where the resources are, ahead of time, is what makes a calm, proportionate response possible when something actually appears.

STEP THREE: NAVIGATING THE ONLINE WORLDS

Think before you share

- Ask what you are actually trying to achieve, and who has already seen it.
- Sharing, quoting, or reposting the material to debunk it almost always reaches more people than the original did, including many who would never have seen it otherwise.
- Engagement of any kind (even critical replies, screenshots reposted, "can you believe this") tells the platform the content is interesting and pushes it to more feeds.

Judge by reach, not by how you feel

- A post with a handful of views usually fades faster if left alone than if you draw a crowd to it. The louder the reaction, the longer it lives.

Respond around it, not to it

- Where a response is needed, put accurate, positive information out through your own and the school's channels rather than replying to or quoting the original post. Answer the underlying worry parents have, without repeating the claim or linking to it. This reaches the same audience without feeding the original.

Screenshot and log, don't reshare

- Capture the material for your record (Step Four) rather than resharing it, so there is a trail without adding to its spread. Note where it appeared and roughly how far it had travelled.

STEP FOUR: LOG EVERY INCIDENT.

- Keep a shared record of what circulated, where, when, through which channel, and how it was handled. This does three things: supports follow-up, lets you tell isolated items apart from an organised pattern over time, and feeds new claims and framings back into the Claim-Buster Database so the whole network stays current.

Example of incident log template:

What was circulated	When was it shared	Where was it shared (if offline)	Through which online channels (if online)	Action taken/how it was handled.

A note on safeguarding

If any material, conversation, or response surfaces a child-protection concern (abuse, coercion, or violence) it stops being a communications matter. It must go through the school's child-protection procedure or the relevant national authorities.

ADDITIONAL RESOURCES

(click on the image to access)

KEY RESOURCES USED AND REFERRED TO:

Faith to Action Network “Religious Values, Beliefs and Teachings in Age-Appropriate Sexuality Education Briefing Paper for Faith Communities”

Accessible here

Faith to Action Network Interfaith Dialogue Guide on Adolescence Sexual and Reproductive Health and Rights (ASRHR)

Available here

Frontline AIDS “Championing Sexuality Education within a changing Landscape: A messaging framework for advocates”

Available here

Rutgers “We all benefit: An introduction to the whole school approach for sexuality education” (2016)

Available here

Sida “Comprehensive Sexuality Education” (2025)

Available here

UNESCO “International technical guidance on sexuality education: An evidence-informed approach” (2018)

Available here

UNESCO “Situational analysis of comprehensive sexuality education in primary schools and teacher training colleges in Malawi” (2019)

Available here

The UNESCO Regional Office for Southern Africa and INERELA Religious Leaders' Toolkit on Sexual and Reproductive Health and Rights (2021)

Available here

World Health Organisation's Global Accelerated Action for the Health of Adolescents (AA-HA!) guidance

Available here

SONKE GENDER JUSTICE

HIV/AIDS • GENDER EQUALITY • HUMAN RIGHTS

This resource has been developed as part of Sonke Gender Justices' SRHR4All Programme: Toolkit and Digital Platform for Strengthening Accurate, Supportive Information on Age-Appropriate Comprehensive Sexuality Education and Learner Wellbeing.

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