12 years of quality education: How investing in sexual and reproductive health and rights helps keep girls in school

Report based on evidence given to the UK APPG on Population, Development and Reproductive Health

EXECUTIVE SUMMARY
June 2021
Acknowledgements

The UK All-Party Parliamentary Group on Population, Development and Reproductive Health would like to thank all those who submitted written evidence to the parliamentary hearings (see Appendix 1 for a list of written submissions). The group is especially grateful to the expert witnesses who gave oral evidence at the parliamentary hearings (see Appendix 2 for a list of expert witnesses).

The group thanks the Chairs of the steering committee, Baroness Sugg and Baroness Hussein-Ece, and other steering committee members: Harriett Baldwin MP, Viscount Craigavon, Baroness Jenkin of Kennington, Pauline Latham MP, Yasmin Qureshi MP, Virendra Sharma MP and Tommy Sheppard MP. The group would also like to thank its Parliamentary and Policy Advisor, Ann Mette Kjaerby, and the group’s Researcher, Myfanwy Probyn, for their assistance in organising the parliamentary hearings and overseeing the report; Carol Bradford for drafting this report; and Lauren McEvatt for her editing and proofreading. Many thanks go to Auscript Limited for their help with transcription, Pip Burrows for the design and layout of the report, and Calderstone for printing services.

The UK All-Party Parliamentary Group on Population, Development and Reproductive Health

The UK All-Party Parliamentary Group (APPG) on Population, Development and Reproductive Health is a cross-party platform for Peers and MPs. Its purpose is to raise awareness on key development and rights issues, with a specific focus on population and sexual and reproductive health and rights (SRHR). The group was established in 1979 and is one of the oldest APPGs in Westminster. It has more than 80 members with representation from all major political parties, and from both Houses in the UK Parliament.
EXECUTIVE SUMMARY

“Adolescent pregnancy, early marriage and girls’ education are intrinsically linked.”

If every girl in the world received 12 years of quality education, the world would be immeasurably changed for the better.

- One additional school year can increase a woman’s earnings by 10% to 20%;
- Each extra year of a mother’s schooling reduces the probability of infant mortality by 5% to 10%;
- A child whose mother can read is 50% more likely to be immunized, and twice as likely to attend school; and
- Women with post-primary education are five times more likely to be educated on the topic of HIV and AIDS.

The UK Government is committed to this aim, with the 2019 Conservative Party manifesto committing to “stand up for the right of every girl in the world to have 12 years of quality education.”

In order to achieve this ambitious goal, it is clear that the sexual and reproductive health and rights (SRHR) of girls and young women are critically important. Girls with both education and access to rights-based family planning are more able to choose marriage timing and choice, to plan their families or whether to have children, and to decide to take on productive livelihoods.

This will take cross-generational SRHR investment programmes where governments and partners commit to work together for the long term. As one generation of girls after another is educated, the conditions will improve for their children and society as a whole will progress. Programmes that stop and start are not going to be enough.
An adolescent pregnancy has harsh consequences for the girl experiencing it with major ramifications, most probably for the rest of her life. This might mean shame in the community, expulsion from school, increased risk of violence and vulnerability, and long-term economic hardship. Investing in the skills and capabilities of girls and young women will lead to a more productive generation; it is critical for sustainability to focus on helping people to become more productive and to invest in young people for the long term. This means that focusing on the right to dignity, health, education, and gender equality have to be more than just words and empty promises.

Unwanted pregnancy is one of the most serious disruptors of girls’ education⁷. Nearly one third of the girls who drop out of school do so because of pregnancy⁸. Unlike their male peers, girls pay most of the price of unprotected, forced, transactional or first sex. To achieve gender parity, it is essential to give girls equitable rights to education⁹ and this means addressing SRHR interventions at the same time. Child marriage also acts as a significant barrier to girls’ education and is a key cause of drop-out¹⁰. Having to drop out of school is a key driver for girls seeking an abortion¹¹.

National health and education ministries must ensure a joined-up response that includes not only serious efforts to keep girls in school but also Comprehensive Sexuality Education (CSE), with a rights-based focus, tackling menstrual poverty and hygiene in schools, as well as the provision of adolescent-friendly SRH clinics both in and out of school.
The UK has been, and aspires to remain, a world leader in improving the health, wellbeing and status of women and girls.

This report was written as details of the cuts to UK Aid were emerging, including concerning reports of significant reductions in funding to lifesaving SRH services. In order to achieve the ambition of 12 years of quality education for every girl in the world, the UK Government needs to fulfil its commitment to return to funding critical SRHR programmes such as United Nations Population Fund (UNFPA) Supplies Partnership and the Women’s Integrated Sexual Health (WISH) programme, and recommit to investing in SRHR.

Box 1
Global advantages of 12 years of girls’ education

- The lifetime earnings of girls dramatically increase
- National growth rates rise
- Child marriage rates decline
- Child mortality rates fall
- Child stunting drops

Key recommendations

The UK Government can:

- Fulfil its pledge to return to the manifesto and legal commitment of spending 0.7% of Gross National Income (GNI) on international development as soon as possible and set out a timeline to do so.
- Return to funding critical SRHR programmes such as UNFPA Supplies Partnership and the WISH programme, and re-commit to investing in SRHR.
- Include a clear strategy for long-term investment in SRHR, with a particular focus on adolescent girls, as part of the upcoming International Development Review.
- Continue the UK’s global leadership on SRHR and use its position in international fora to mobilise and maintain global political support for SRHR.
- Ensure that each Foreign, Commonwealth and Development Office (FCDO) country plan recognises the link between girls’ education and SRHR and includes a comprehensive plan to make progress.

The UK and other programme delivery partners can:

- Recognise the critical role of SRHR in achieving both the global ambitions to build back better from Covid-19 and to long-term economic growth by enabling women’s participation in the workforce.
- Commit to long-term predictable investment, taking a multi-pronged approach to reach girls both in school and out of school, that includes the provision of adolescent reproductive health services and CSE.
- Help to identify the poorest, most marginalised and excluded girls and boys and implement targeted measures to remove the barriers to their education to reduce inequalities.

Parliamentarians can:

Advocate for their governments to:

- Commit political and financial support to achieving universal access to comprehensive SRH services for women and girls, increasing spending towards 10% of Official Development Assistance (ODA) as per the International Parliamentarians’ Conference on the International Conference on Population and Development Programme of Action (ICPD PoA) Statement of Commitments.
- Support and invest in primary and secondary education for girls to promote gender equality and empower women.
- Expand access to family planning and SRH and abortion services, particularly for adolescents including broadening policies to permit primary care health workers to provide contraception and medical abortion.
- Remove barriers to girls who have been pregnant returning to school.

National governments can:

- Increase funding for family planning and the wider SRHR agenda.
- Increase awareness of, and understand the linkages between, girls’ education and SRHR.
- Maximise the impact of national programmes by coordinating approaches between relevant ministries.
- Develop an effective response to early and unintended pregnancy, recognising this will hamper educational equality until properly addressed.
- Invest in high-quality rights-based CSE that is gender-aware for children, and adolescents, both in and out of school.
- Eradicate policies and practices that result in the exclusion or expulsion of girls from school for reasons such as pregnancy, marital status, or sexual activity.
Endnotes

4 Ibid
6 FCDO submission (2021), Annex to letter from Rt Hon Wendy Morton MP to Baroness Sugg, dated 7 April 2021
7 Fetters, T, E Coast and J Strong (2020) “The Urgent Need for Improved Access to Contraception and Legal Abortion and Comprehensive Relationship and Sex Education for Adolescents in Sub-Saharan Africa: Research findings and recommendations from Ethiopia, Malawi, and Zambia.” Ipas/LSE submission
8 Girls’ Education Challenge (2018)
9 Ibid
10 Plan International UK submission (2020)
11 Fetters et al (2020)
References


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Fetters, T, E Coast and J Strong (2020) “The Urgent Need for Improved Access to Contraception and Legal Abortion and Comprehensive Relationship and Sex Education for Adolescents in Sub-Saharan Africa: Research findings and recommendations from Ethiopia, Malawi, and Zambia.” Ipas/LSE submission


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The Economist (2017) “Contraception does even more good in poor countries than thought.” 7 December 2017


*Written submissions to the APPG on PDRH parliamentary hearings are available on the group’s website: www.appg-pdrh.uk
Appendices

Appendix 1: List of written evidence submissions

- Alliance of Women Advocating for Change (AWAC) Uganda
- CARE International
- EngenderHealth
- Foreign, Commonwealth and Development Office (FCDO)
- Frontline AIDS and University of Witwatersrand
- Guttmacher Institute and African Population & Health Research Centre
- Impact Initiative
- Ipas
- International Planned Parenthood Federation (IPPF)
- London School of Hygiene and Tropical Medicine (LSHTM)
- MSI Reproductive Choices
- Plan International UK
- Population Matters
- Promoting Equality in African Schools (PEAS)
- Save the Children
- Tamara Fetters (Ipas), Professor Ernestina Coast (LSE) and Joe Strong (LSE)
- The School of Oriental and African Studies (SOAS)
- United Nations Population Fund (UNFPA)
- Voice4Girls and Newcastle University
- Voluntary Service Overseas (VSO)

Appendix 2: List of witnesses

- Esi Asare Prah, MSI Ghana
- Bekky Ashmore, Plan UK
- Ian Askew, WHO
- Laura Brown, PEAS
- Laura Denham, Malala Fund
- Cecilia Espinoza, Ipas
- Jennifer Gassner and Sarah Shaw, MSI Reproductive Choices
- Matt Jackson, UNFPA
- Sarah Keogh, Guttmacher Institute
- Susannah Mayhew, LSHTM
- Sagri Singh, UNICEF
- Seri Wendoh, IPPF
- Olabukunola Williams, EVA Nigeria and Malala Fund
<table>
<thead>
<tr>
<th>Acronyms</th>
<th>Description</th>
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<tr>
<td>APPG PDRH</td>
<td>All-Party Parliamentary Group on Population, Development and Reproductive Health</td>
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<tr>
<td>CEFM</td>
<td>child, early and forced marriage</td>
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<td>CSE</td>
<td>comprehensive sexuality education</td>
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<td>DFID</td>
<td>Department for International Development (UK)</td>
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<td>FCDO</td>
<td>Foreign, Commonwealth and Development Office</td>
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<td>FGM</td>
<td>female genital mutilation</td>
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<td>GBV</td>
<td>gender-based violence</td>
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<td>GEC</td>
<td>Girls' Education Challenge</td>
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<td>GNI</td>
<td>Gross National Income</td>
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<td>HIV</td>
<td>human immunodeficiency virus</td>
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<td>International Conference on Population and Development Programme of Action</td>
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<td>IPPF</td>
<td>International Planned Parenthood Federation</td>
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<td>sexually transmitted infections</td>
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<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
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<td>United Nations Children's Fund</td>
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<td>VSO</td>
<td>Voluntary Service Overseas</td>
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<td>WASH</td>
<td>water, sanitation and hygiene</td>
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<td>WISH</td>
<td>Women's Integrated Sexual Health Programme</td>
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Photo credits and captions

Front cover
Photo 1: Bill Tanaka/Plan International/Girls taking part in a health club at school in Uganda to learn more about menstruation, eliminate stigma and access affordable products

Executive summary
Photo 2: Tommy Trenchard/Panos Pictures
Photo 3: Peter Barker/Panos Pictures
Photo 4: Sarah Shaw/IPPF
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