



BERHAN Programme: How Sexual and Reproductive Health and Rights support can help girls stay in school

LEARNING BRIEF

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BACKGROUND

The BERHAN program, a 48-months initiative in Ethiopia's Amhara region, aimed at improving Sexual and Reproductive Health and Rights (SRHR) of 32,116 individuals in rural communities within Este and Fogera woredas. The program was implemented by CARE from March 2020 to February 2024 with financial support from the Austrian Development Agency (ADA), the operational unit of Austrian Development Cooperation (ADC). BERHAN sought to improve the SRHR of girls and women, and to address issues of Female Genital Cutting (FGC) and Early Marriage (EM) in particular, and adopted a comprehensive approach, using evidence-based, community-led interventions to empower girls and women and transform community dynamics and structures.

One focus area of the project was the attention given on girls to ensure that they continue to go and thrive at school. The aim was to address negative social norms that reduced the agency of girls, including the community's preference for sending boys to school, mobility restrictions for young girls traveling to school and early marriage. It also aimed to address problems around menstrual health management.

OBJECTIVE

The focus of this brief is to learn how SRH services empower schoolgirls and ensure their retention at school. It looks at different elements of the project including curriculum-based discussions on topics like Life Skills, Harmful Traditional Practices (HTP), Gender, and other Sexual and Reproductive Health (SRH) topics.

METHODOLOGY

Primary data for the brief was collected in selected Kebeles of Fogera and Estie woredas, through 4 key informant interviews (KII- including 2 women), 5 in-depth interviews (IDI- all with women), and 4 focus group discussions (FGD – 32 participants, including 21 women) and a testimony. A purposive sampling method was used to select participants based on their relevance to the study objectives. Additionally, secondary data was obtained from progress reports, joint monitoring visit reports, and school recordings. Participants included girls in the intervention area, parents, stakeholders, and school principals.

What was done?

Schools were utilized as a platform to disseminate knowledge on Sexual and Reproductive Health Rights (SRHR), gender equality, life skills, early marriage, and Menstrual Hygiene Management (MHM) through Girls' Groups (GG). Girls developed essential skills, such as; negotiation, confrontation, communication, fostering self-confidence and positive aspirations. All girls successfully completed discussion sessions, which contributed to a supportive learning environment. User-friendly Menstrual Hygiene Management (MHM) rooms were equipped in the girls' schools, and reusable pads provided. Discussions were also held on social norms with parents, including group discussions facilitated by Core Groups¹ and SAA² facilitators.

¹ Core groups bring together power holders from the community and Government authorities at kebele level.

² Social Analysis and Action (SAA) is a community-led social change process developed by CARE, where individuals and communities actively explore and challenge social norms, beliefs, and practices related to gender and sexuality. SAA facilitators support the SAA groups with their activities.

Evidence of impact on school attendance and attainment

A comparison of students who regularly attended and frequently used MHH services was undertaken. The plan had been to undertake this study in more schools, however the conflict situation at the time of data gathering meant that only two schools could be selected with a sample of 20 students randomly selected, 10 students in each school.



A BERHAN programme Girls' Group. Credit: CARE Ethiopia

Attendance: The rate of absenteeism of the 20 students was compared between the second semester of 2020 before the project interventions started and the second semester in 2022

after interventions had taken place. There was a decrease in absenteeism, of 10.73% in one of the schools (Workmeda) and of 7.32% in the other (Shina).

Attainment: A comparison of students who regularly attended and frequently used MHH service was undertaken looking at the data of the first semester in 2022 and the same semester in 2023. This revealed a notable improvement in grades, with average values increasing by 5.83% (Workmeda) in one school and by 3.25% in the other (Shina).

“I was initially not allowed to attend school due to early marriage concerns. Even my parents were hesitant, fearing gender-based violence (GBV) before my marriage. However, thanks to the project, I have now returned to school, where I can focus on my studies, leading to an improvement in my academic scores. In recent times, the prevention of early marriages, along with the development of enhanced life skills and aspirations, has resulted in the re-enrolment of many young girls in school. The positive impact of these changes resonates throughout our community, creating a renewed commitment to education among us.”

Haimanot Yalew, Grade 9 student and an active member of the girls' group in Dengolt Kebele, Estie Woreda

Of those interviewed, 90% had been absent or dropped out of school, which they put down to i) girls not being encouraged to go and stay at school, ii) social norms that focus on girls helping at home, iii) greater interest in boy's education, iv) social constraints around girls autonomy and mobility, v) lack of understanding of SRH and menstrual health, vi) cultural assumptions that prescribe that a child is ready for marriage once she gets her period, resulting in early marriage and vii) poor sanitation conditions in schools.

1. Impact of Girls Clubs

The clubs were a vital platform for creating awareness on SRHR, sharing life skills, and addressing negative social norms. Engagement in group discussions within these clubs proved transformative for them, challenging and changing community beliefs, particularly those endorsing early marriages. **These clubs helped students in dispelling myths around menstruation and early marriage.** Girls gained a deeper understanding of menstrual cycles and learned to manage them with dignity and without fear. Importantly, the clubs facilitated discussions on SRHR, contributing to the dismantling of existing negative social norms and fostering an environment that supported the current and future success of the girls. The outcomes included **increased regular attendance, positive life aspirations, and parental support for girls actively participating in discussions.** Notably, the clubs resulted in a forum through which they could share experiences, develop aspirations. Homework assignments stemming from these discussions further improved self-confidence, communication and negotiation skills.

2. Impact of Training Curriculum

The trainings - which encompassed topics such as life skills, gender, health, hygiene promotion and HTP - produced tangible effects on the girls' attitudes and decision-making capabilities. The training interventions also fostered improved communication skills, encouraging active participation in school clubs. **Girls exhibited greater confidence in advocating for their rights and were more proactive in reporting proposed early marriages to Kebele level committees.** Life skill training emerged as a key factor **empowering girls to seek clarification from teachers** and actively engage in school activities.

3. Impact of User-Friendly MHM Rooms:

The implementation of user-friendly MHM rooms had a substantial impact on the lives of the students. A significant number of students utilized the services, contributing to increased confidence and reduced stigma among girls in the school. **The school-led awareness sessions, coupled with adequate MHM facilities, played a crucial role in encouraging girls to stay and do well in school.** Training on the production of locally made sanitary pads not only improved hygiene management but also reduced the incidence of reproductive organ diseases, such as infections. Importantly, economically disadvantaged students freely accessed these services, addressing a critical aspect of inclusivity.

"I'm Masresha Bimirew, 16 years old, part of the Addisalem group in Tiwazakana Kebele, Fogera Woreda. Previously, I missed my class because of menstruation. Now, with the MHM room and free reusable sanitary pads, I can attend without worries. They're clean and of good standard! My school attendance has improved, I am ranked 11th out of 67 students, up from my previous rank of 37! I also make reusable pads for my mom and sister, ensuring they also benefit."

4. Linking parents with girls

Mothers and adult women in the family serve as the main source of information for rural adolescent girls regarding SRH. However, they often lack knowledge about these issues. Parents of the girls participating in the girls' groups were active participants of the project's SAA groups. Regular discussion sessions were conducted to discourage early marriages, further reinforcing the impact of the interventions. Linking SAA groups and the girls' group to discuss SRH issues together was important in effecting change. It also allowed for discussions on SRH issues to take place more easily at home and reduced the pressure for early marriages.

CONCLUSION AND RECOMMENDATIONS

The different components of the project undoubtedly made a difference on the girls' lives, boosting their voice and their self-confidence, and also improving school attendance and attainment. **The interconnected aspects of the project were critical.** These included the establishment and training of the girls' groups, the link to the parents' (SAA) groups, joint awareness raising on SRH, and the work on menstrual hygiene management. The activities led to a reduction in girls' absenteeism and an increased aspiration to stay in school. Girls were also encouraged to return to school, and early marriages were avoided. The interventions also resulted in an improved understanding of MHM and the availability of related services at school.

Going forward, the advancement and empowerment of girls at school demands active engagement of teachers, school leaders, and communities. It requires significant support from all stakeholders, and it takes time. One recommendation from the girls was that pursuing an income generating activity would increase their decision-making power. In addition, communication campaigns, and advocacy at broader societal levels are crucial for changing the social norms that hinder girls' school enrolment and contribute to early marriages. Changing social norms is a gradual process requiring significant work and different complimentary approaches. The hope is that this project can be replicated and expanded as the current conflict in the region led to school closures.

TESTIMONY

"I'm Mendere Worku Genene, 16, living in Tiwazakana Kebele, Fogera Woreda. When Girls Group discussions started in our Kebele, initially, I could not join because of my family. But eventually, my older brother allowed me to attend after numerous discussions. Through the project, I gained a fresh perspective on SRHR, gender equality, and life skills. I started to participate, engaged in critical reflections, and even led discussions in the group.

The trainings on life skills, harmful traditional practices, gender equality, and other SRHR-related sessions were excellent and encouraged me, as well as other group members, to actively participate. This significantly increased my self-confidence and assertiveness to continue my education.

During the project's start up period, many parents of Girls Group members were suspicious of the project. However, they came to discuss early marriage and sexual and reproductive concerns at the parents' session and the girls continued to talk to their parents who gradually accepted the importance of such positive changes at their kebele. I and other girls also gained the confidence and aspiration to stay in school rather than give up and accept to be married.

I utilized the services in the Menstrual Hygiene Management rooms. They provided a good environment for girls. The availability of these services in my school reduced my absenteeism and improved my school performance. Before I joined BERHAN, I was 21st in the class last year, this academic year, I ranked 9th out of 67! Like most girls in my village, I was to be married with a person 20 years older than me. I shared this issue with the group, leading to several discussions with my parents on the impact of early marriage on girls' lives. With the support of the entire group, I convinced my parents to stop the marriage from happening, which allowed me to continue my education."



Mendere Worku Genene. Credit: CARE Ethiopia

Cover image: Girls' Group members. Credit: CARE / Sarah Easter