

# MIND THE GAP 3:

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Equity and Inclusion in and through Girls' Education in Crisis



Inter-agency  
Network for Education  
in Emergencies

**The Inter-agency Network for Education in Emergencies (INEE)** is an open, global network of representatives from non-governmental organizations, UN agencies, donor agencies, governments, and academic institutions, working together to ensure the right to quality and safe education for all people affected by crisis. To learn more, please visit [www.inee.org](http://www.inee.org)

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# ACRONYMS

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<b>CSE</b>	Comprehensive sexuality education
<b>CSO</b>	Civil society organization
<b>DHS</b>	Demographic and Health Surveys
<b>DPRK</b>	Democratic People's Republic of Korea
<b>DRC</b>	Democratic Republic of the Congo
<b>ECW</b>	Education Cannot Wait
<b>EMIS</b>	Education Management Information System
<b>EQIE</b>	Enhancing Quality and Inclusive Education
<b>G7</b>	Group of 7
<b>GBV</b>	Gender-based violence
<b>GDP</b>	Gross domestic product
<b>GEMR</b>	Global Education Monitoring Report
<b>ICPD</b>	International Conference on Population and Development
<b>IDP</b>	Internally displaced person
<b>IPPF</b>	International Planned Parenthood Federation
<b>ITGSE</b>	International Technical Guidance on Sexuality Education
<b>LGBTQIA+</b>	Lesbian, gay, bisexual, transgender, queer, questioning, intersex, and asexual +
<b>LMICs</b>	Low- and middle-income countries
<b>MICS</b>	Multiple Indicator Cluster Surveys
<b>NGO</b>	Non-governmental organization
<b>ODA</b>	Official development assistance
<b>OECD</b>	Organisation for Economic Co-operation and Development
<b>OPDs</b>	Organizations of persons with disabilities
<b>oPt</b>	Occupied Palestinian territory
<b>PASEC</b>	Programme d'analyse des systèmes éducatifs de la CONFEMEN (Program for the Analysis of Educational Systems of CONFEMEN)
<b>PCBS</b>	Palestinian Central Bureau of Statistics
<b>SDG</b>	Sustainable Development Goal

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<b>SEA-PLM</b>	—————	Southeast Asia Primary Learning Metrics
<b>SGBV</b>	—————	Sexual and gender-based violence
<b>SRH/SRHR</b>	—————	Sexual and reproductive health/sexual and reproductive health and rights
<b>STEM</b>	—————	Science, technology, engineering, and mathematics
<b>STI</b>	—————	Sexuality transmitted infection
<b>Teacher Task Force</b>	—	International Task Force on Teachers for Education 2030
<b>UIS</b>	—————	United National Educational, Scientific, and Cultural Organization (UNESCO) Institute for Statistics
<b>UN</b>	—————	United Nations
<b>UN CRPD</b>	—————	United Nations Conventions on the Rights of Persons with Disabilities
<b>UNESCO</b>	—————	The United National Educational, Scientific, and Cultural Organization
<b>UNFPA</b>	—————	United Nations Population Fund
<b>UNHCR</b>	—————	United Nations High Commissioner for Refugees
<b>UNICEF</b>	—————	United Nations Children’s Fund
<b>UN OCHA</b>	—————	United Nations Office for the Coordination of Humanitarian Affairs
<b>UNRWA</b>	—————	United Nations Relief and Works Agency for Palestine Refugees in the Near East
<b>USAID</b>	—————	United States Agency for International Development
<b>VIEW</b>	—————	Visualizing Indicators of Education for the World
<b>WASH</b>	—————	Water, sanitation, and hygiene
<b>WHO</b>	—————	World Health Organization



# EXECUTIVE SUMMARY

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The fundamental human right to education continues to be violated globally. This is especially true for girls in crisis, who are nearly 2.5 times as likely to be out of school as girls living in countries not in crisis. Girls in emergency contexts are significantly more likely than boys to be excluded from schools, with household data showing that nearly 20% of girls in emergency contexts don't attend primary school compared to 13% of their male peers (United Nations Children's Fund [UNICEF], 2021a). Furthermore, adolescent girls in crisis situations are more vulnerable to violence, exploitation, early pregnancy, harmful practices, and poor sexual and reproductive health (SRH) outcomes. These issues are significant and insufficiently addressed, with education responses in emergencies and protracted crises being severely underfunded. This underfunding and violation of the right to education continue to disproportionately impact the most marginalized groups, deepening inequalities and leaving these groups behind. One of these educationally marginalized groups is girls with disabilities, with the intersection of gender and disability leaving these girls more likely to have their rights to education and freedom from violence violated.

Girls' voices are often silenced during emergencies, leaving their stories invisible. Their lived experiences must be better understood to advocate for the right funding and support to address this global need. This report highlights the ongoing, increasing need for investment in gender equality in and through education for those in crisis. It builds on two previous *Mind the Gap* reports to highlight the multiple, intersecting barriers that girls face in crisis settings. This report highlights the needs and gaps for those with disabilities in crisis, teachers and their well-being, and the delivery of sexuality education to address poor SRH outcomes for girls, which become worse in situations of displacement and crisis. While this is a monitoring report and looks at the current status and progress (or lack thereof), it also works to bring forward promising practices at the country level, where changes are being seen to improve learning outcomes, safety, and life opportunities.

The report focuses on three themes:

- **Recruiting and retaining female teachers:** Barriers and enablers in place for female teachers to enter, remain, and progress through the teaching profession in crisis, hardship areas, and conflict-affected contexts. This includes looking at refugee teachers, as well as those in internally displaced person (IDP) settings, protracted crises, and hardship areas.
- **Girls with disabilities and gender-responsive inclusive education:** Understanding the gaps in data and evidence to inform support for girls with disabilities, as well as looking at access to, and completion of, basic education in comparison to their peers without disabilities. It also includes looking at the provision of inclusive education infrastructure as well as efforts being made to integrate gender-responsive inclusive education.
- **Sexual and reproductive health and rights (SRHR) education in emergencies:** Reviewing access to SRHR information and education in emergencies, with a focus on the development and delivery of comprehensive and inclusive sexuality education in crisis settings for both in-school and out-of-school children.

This report provides updated data on the state of women and girls' education and training in the same 44 crisis-affected countries identified in the first two reports and reviews the rate and direction of change based on the data available.

# KEY FINDINGS

## POLICY DEVELOPMENTS

- The Global Disability Summit in 2022 highlighted the focus on, and commitment to, ensuring inclusive education in situations of crisis, emergency, and conflict. The summit also saw an increasing focus on addressing the intersecting barriers faced by women and girls with disabilities.
- There was collective agreement at the 2022 Group of Seven (G7) foreign ministers meeting to increase the share of bilateral official development assistance (ODA) on advancing gender equality, with communiqué commitments to contribute to a more resilient, inclusive, and gender-transformative education system.
- Out of the seven new global commitments launched at the Transforming Education Summit, one specifically focuses on advancing gender equality and women and girls' empowerment; another focuses on transforming education systems to enable all crisis-affected children to continue their education in an inclusive and safe environment.
- The Transforming Education Summit initiative on advancing gender equality is a Transforming Education flagship and will be promoted, championed, and monitored as such. One of the six "calls to action" coming out of the summit requests that governments put gender equality at the heart of education sector plans, budgets, and policies.
- Steps have been made to provide legal protection for women and girls in crisis settings, including Mozambique endorsing the Safe to Learn initiative and re-entry guidelines for girls during pregnancy and after giving birth and Cameroon enacting legal frameworks to protect pregnant girls' right to education. However, these steps forward do not mitigate setbacks to previous progress, as seen in Afghanistan since the Taliban's return to power.

## TEACHERS

- There is a vast global shortage of qualified teachers – and, particularly, female teachers – in crisis-affected countries; this shortage is particularly prevalent in areas defined as hardship or harsh environment postings.
- The proportion of female teachers in the workforce is complex and contextual. In crisis-affected contexts, the teaching workforce has proportionally more women than men at the pre-primary and primary levels, but female teachers only make up 38% of the teacher workforce at the secondary level on average.
- To better recruit and retain female teachers, education sectors need to prioritize improving working conditions and delivering high-quality professional development that supports teachers in developing their competencies and enabling them to progress.
- In many crisis-affected countries, women are less likely than men to meet the qualifications for entering national teacher training institutions. In response, alternative routes into teaching have been explored, with promising results in terms of increasing both the number of women in the workforce and the number of girls completing secondary school – and, thus, having the potential to enter traditional teacher training.
- Emerging evidence indicates that having women in school leadership is associated with better outcomes for learners and safer schools for girls. Women need support to reach school leadership positions, and more work is needed to develop effective programs and policies to support getting women into leadership.
- Teachers' well-being must be prioritized. More research is needed to better understand the experience of female teachers in crisis-affected contexts and the impact of teacher well-being programs.

## DISABILITY

- Girls with disabilities face multiple, intersecting barriers in access to both school and learning. As many as 33 million children with disabilities in low- and middle-income countries (LMICs) are not in school, and children with disabilities are uniquely vulnerable to being denied an education when their support systems are affected by crisis or conflict.
- There has been significant progress in the availability of data about children with disabilities and their experience of education, due largely to the large-scale adoption and adaptation of the Washington Group Questions. However, there is still a long way to go to achieve high-quality, systematic international data. Girls with disabilities can be invisible in and excluded from data collection – making the need to further improve and extend data and research all the more urgent.
- There has been progress in the number of schools with some accessibility adaptations, but more is needed to ensure adaptations meet the needs of girls within their communities.
- Policy on and commitments to inclusive education must be supported with high-quality teacher training and continuous professional development related to inclusivity, as well as the development of holistic systems that facilitate disability inclusion.
- More research is needed to understand what inclusive and gender-sensitive education provision is most effective to improve the experiences – and ultimately, learning – for girls with disabilities.

## SRHR

- In 2018, 32 million of the 134 million people in need of humanitarian assistance were women and girls of reproductive age, all in need of SRHR information and services. SRHR education is key to preventing unintended pregnancies, which lead to school drop-out or exclusion for up to 4 million teenage girls annually in sub-Saharan Africa alone.
- Low levels of comprehensive knowledge on HIV/AIDS can be observed in crisis-affected countries, leading to higher rates of infections for adolescent girls and their children. However, evidence shows that adolescent girls who receive a school-based sex education intervention have greater HIV knowledge, self-efficacy related to condom use, and confidence to refuse sex, reducing rates of infection. Researchers have also observed that comprehensive sexuality education (CSE) programs that address gender and power have a much higher association with lower rates of sexually transmitted infections (STIs) and unintended pregnancies compared to programs solely focusing on the biological aspects of reproduction and not addressing gender inequalities and power dynamics.
- Very few crisis-affected countries have a CSE curriculum for out-of-school children. Yet where a curriculum has been developed to specifically target out-of-school groups, the training content appears to be far more comprehensive and cover a wider range of topics than in-school curricula, creating a greater scope to address sensitive and challenging topics.
- There is greater resistance to delivering CSE in primary schools compared to higher grades. This resistance comes mainly from the community and faith-based organizations, creating negative attitudes toward CSE at this age. However, with high numbers of over-age girls in primary schools in crisis settings and 90% of girls more likely to be out of school at the secondary level than in non-crisis settings, the need to deliver CSE at the primary level is clear.
- The effectiveness of CSE delivered in schools relies heavily on the teachers' training, knowledge, and any inherent attitudes and gender biases. Without training and support, teachers focus only on less contentious topics and can reinforce harmful gender norms.
- Youth must be core to the development of SRHR curricula – with curricula designed by them and for them – and successful outreach approaches have had youth at their core as peer educators. These successful approaches have included the successful delivery of SRHR education through web-based platforms.

- Men often dominate SRHR decision-making, limiting wives' and daughters' ability to access contraceptives and increasing the unmet need seen among adolescents. Engaging men and boys in SRHR education is critical to start addressing inequitable power dynamics, harmful gender norms, and toxic masculinities that can shape men and boys' behavior in a way that undermines women and girls' access and choices related to SRH.

## **CLOSING THE GAP: ARE WE MAKING PROGRESS?**

- Obtaining accurate and reliable disaggregated data remains challenging, with many education management information systems (EMISes) not having been updated or released since *Mind the Gap 2* was released in spring 2022.
- Girls in crisis-affected countries are more than twice as likely to be out of school as girls elsewhere (for the primary and lower secondary levels only).
- In crisis countries, 68% of girls at the primary level, 49% at the lower secondary level, and 30% at the upper secondary level complete that level of schooling.
- For girls in conflict-affected countries, completion growth rates are slow at the primary and lower secondary levels (averaging 1% per year) and even slower at the upper secondary level (averaging 0.5% per year). At their current growth rates, it will be another 139 years before 100% of girls complete upper secondary education.
- By Education Cannot Wait (ECW) estimations, 91% of children attending school in countries covered by interagency plans/appeals are not learning. Children and adolescents are predicted to be faring worse in mathematics compared to reading, though the picture is stark for both subjects; 91% are estimated to be in school and not learning in mathematics compared to 85% in reading at the primary and lower secondary levels. It is impossible to sex-disaggregate these estimates due to a lack of primary data on learning outcomes.

## **FUNDING FOR WOMEN AND GIRLS' EDUCATION IN CRISIS-AFFECTED COUNTRIES**

- The availability of education finance data has improved. There is now data on national education spending available for 33 crisis-affected countries.
- From 2016 to 2020, we see a slight fall in the percentage of government expenditure going to education: 13.5% to 12.9%. The percentage of gross domestic product (GDP) going to education has remained constant, at 3.4%.
- Humanitarian appeal funding requested by education has increased, from US\$876 million in 2018 to US\$2.954 billion in 2022, in part due to the Ukraine crisis. The proportion of education appeals funded was 48.2% in 2018, 39.8% in 2020, and 26.4% in 2022 due to the increased demand, though funding levels remained stable.
- The proportion of ODA education funding targeting gender equality and women's empowerment has increased sector-wide, with a particular increase in targeted funding at the postsecondary level.
- Aid support to education is under threat as the number of emerging and protracted crises around the world continues to increase, including the ongoing conflict in Ukraine and aftermath of COVID-19. This continues to create competing funding priorities, resulting in donors shifting allocations.

## SUMMARY OF PROGRESS AND GAPS

Since writing the second *Mind the Gap* report in early 2022, some changes have occurred to the international data on access to education, training, and learning for girls and women affected by crisis and conflict. Progress has been made toward the goals set out in the *Charlevoix Declaration on Quality Education*. For out-of-school girls in crisis contexts, the gender gap at the secondary level is closing, and we are seeing slow but steady improvements in the primary and lower secondary completion rates. Despite this progress, it will still take until 2090 for all out-of-school girls in crisis to access school without greater investment, and the completion rates for girls draw on data that, for many countries, does not yet take COVID-19's impact into account. Some studies, and data, have already emerged showing how COVID has impacted gender inequalities in education, including for refugee populations. Furthermore, slow rates of increase mask the even slower rates for those with intersecting vulnerabilities, including disabilities.

Progress continues to be seen in the global and donor communities' focus and commitment related to gender equality in and through education and to the importance of all girls in crisis being able to complete 12 years of safe, quality education. These commitments are being demonstrated by major donors championing gender equality within their policies and programs: for example, the Global Partnership for Education hardwiring gender into all programs, ECW committing to target gender equality in all new investments (as outlined in the new *2023–2026 Strategic Plan*), and ECW including a minimum resource allocation for gender-targeted interventions and increasing its own gender capacity and partnerships with local women's organizations.

However, significant gaps remain in data, service provision, and investment. The number of funding appeals in humanitarian contexts that are being funded is continuing to decline, with more developed countries now spending larger proportions of their ODA budgets within their own borders.

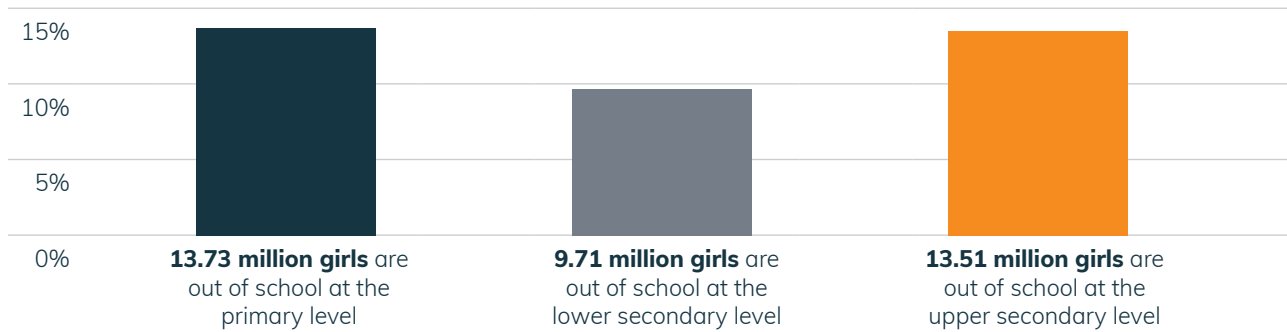
Additionally, there continues to be a lack of nationally collected and owned data around children with disabilities, limiting our understanding of their lived experiences, including the incidence of violence they face. National-level inclusive education policies with clear implementation plans are not always in place or financed, and children with disabilities continue to be out of school in crisis settings. Where these children have been able to access schools, the environments are not fully inclusive, hindering their learning.

We also continue to see a teacher shortage in crisis settings, especially in areas of displacement, and very few plans and policies are in place to support getting women into leadership positions, which brings about better learner attendance and well-being. Furthermore, the safety of female teachers in conflict settings continues to be jeopardized, with limited policies and strategies in place to protect them from abuse. A lack of peer support networks also contributes to low retention rates among female teachers in displaced settings.

Finally, we see huge gaps in the delivery of SRHR and CSE for in-school and out-of-school populations. Community resistance to the concept, a lack of a suitable curriculum, teachers not being equipped with adequate knowledge to deliver rights-based content that addresses gender inequalities, and reluctance to deliver CSE to younger learners all contribute to poor SRH outcomes – a situation made worse by the conditions faced in crisis settings.

# GRAPHIC SUMMARY

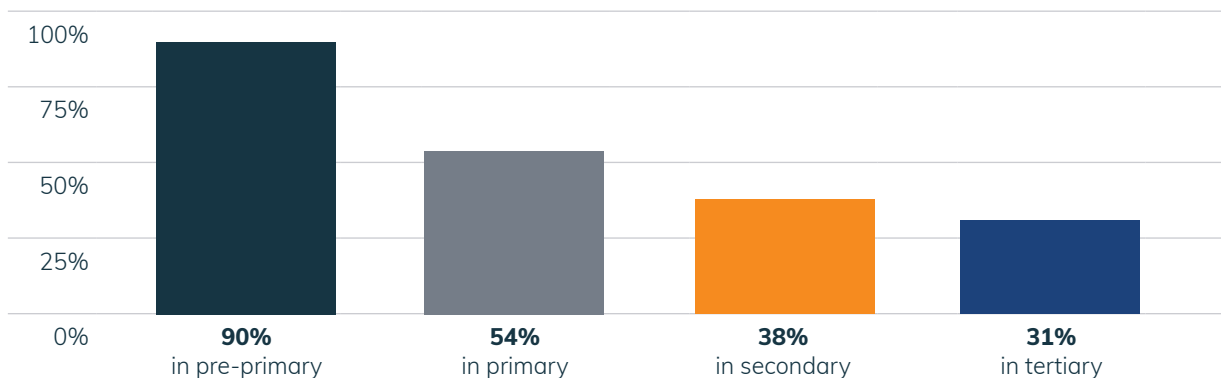
## In crisis-affected countries:



Without higher levels of investment and support, it will take until **2090** for all girls crisis settings to access school:

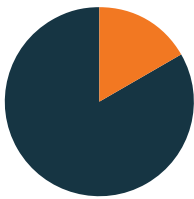


## The female proportion of the teacher workforce in crisis-affected contexts is:

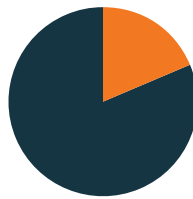




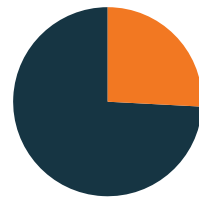
Children with disabilities are uniquely vulnerable to being denied an education when their support systems are affected by crisis or conflict. As many as **33 million** children with disabilities in LMICs are not in school.



**20%** of girls with disabilities are not attending school at the primary level.



**23%** at the lower secondary level



**35%** at the upper secondary level.



**32 million of the 134 million** people in need of humanitarian assistance in 2018 were women and girls of reproductive age, all in need of SRHR information and services.



Ethiopia, 2021 © Martha Tadesse, IRC

# CHAPTER 1. INTRODUCTION

## 1.1 PURPOSE AND SCOPE OF THE REPORT

Emergencies, protracted crises, forced displacement, and migration present unique and complex challenges to education, particularly for girls and their female educators. To deliver on our collective commitment to leave no one behind, we must prioritize those in crisis. In crisis situations, gender can determine whether a child goes to school, stays in school, and has opportunities for transition. This means we must be able to recognize the unique and intersecting barriers that girls, children with disabilities, and other marginalized children and youth face in crisis-affected contexts in order to design and deliver interventions that overcome these barriers. This requires continued accountability and research around education in crisis settings through a gender and intersectional lens, a goal to which this report seeks to contribute.

This report builds on the findings of INEE's previous *Mind the Gap* reports: 2021's *Mind the Gap: The State of Girls' Education in Crisis and Conflict* and 2022's *Mind the Gap 2: Seeking Safe and Sustainable Solutions for Girls' Education in Crises*. In *Mind the Gap 3*, we build on these reports by looking at progress against current commitments to girls' education in crisis as well as looking at new commitments made since the previous reports' publication. This report looks at the state of education and training for girls and women affected by conflict and crisis, including refugees and IDPs. All three *Mind the Gap* reports have been commissioned by INEE, under the auspices of the INEE Gender Working Group and INEE Reference Group on Girls' Education in Emergencies, in response to commitments made by world leaders of seven of the largest economies at the 44th G7 Summit, which was hosted by Canada in 2018.<sup>1</sup>

In late 2022, INEE and the report authors together determined the focus themes of *Mind the Gap 3*, which were selected to address evidence gaps highlighted in previous reports as well as provide timely information relevant to recent, current, and emerging crises, such as the recovery from COVID-19, the conflict in Ukraine, the impacts of disasters and food insecurity due to climate change, and new public health emergencies. The themes selected include:

- **Recruiting and retaining female teachers:** Enablers and barriers in place for female teachers to enter, remain, and progress through the teaching profession in crisis and conflict-affected contexts. This includes looking at refugee teachers, as well as those in IDP settings, protracted crises, and hardship areas.
- **Girls with disabilities and gender-responsive inclusive education:** Understanding the gaps in data and evidence to inform support for girls with disabilities, as well as looking at access to, and completion of, basic education in comparison to their peers without disabilities. It also includes looking at the provision of inclusive education infrastructure as well as efforts being made to integrate gender-responsive inclusive education.

<sup>1</sup> Canada, the European Union, France, Germany, Italy, Japan, and the United Kingdom adopted the Charlevoix Declaration on Quality Education for Girls, Adolescent Girls and Women in Developing Countries.

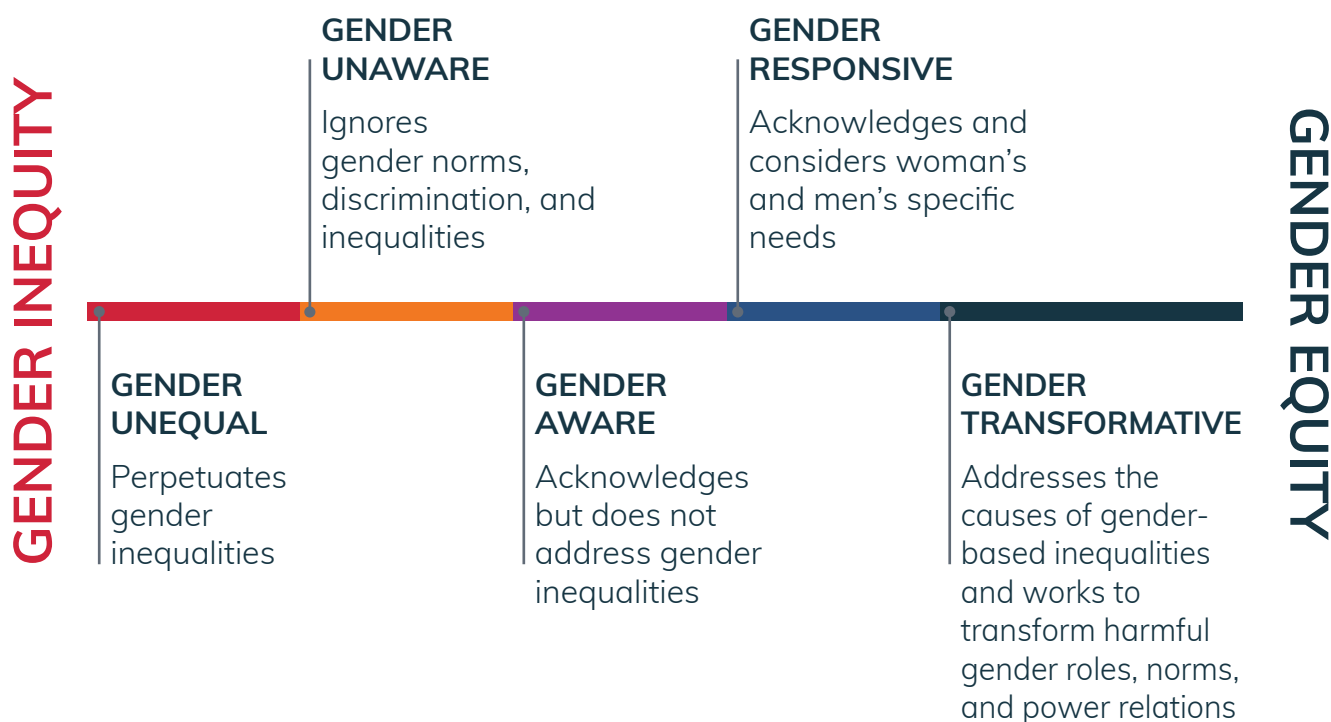


- **SRHR education in emergencies:** Reviewing access to SRHR information and education in emergencies, with a focus on the development and delivery of comprehensive and inclusive sexuality education in crisis settings for both in-school and out-of-school children.

Based on the data available, this report provides updated data on the state of women and girls' education and training in the same 44 crisis-affected countries identified in the first two reports and reviews the rate and direction of change. The analysis throughout the report looks at the accuracy and consistency of reporting systems to better understand whether these systems are collecting the right data to track progress on girls' education in crisis and, thus, see if countries are moving toward gender equality in and through education. The report does highlight the challenges girls continue to face in accessing quality education in crisis situations, but our focus on gender equality also includes attention to the challenges faced by boys and gender-diverse individuals in conflict settings. This highlights the need for all programs and funding to be gender-responsive, and where possible, gender-transformative, addressing the unique challenges and needs of all genders in these settings rather than focusing only on binary groups. However, the specific barriers that boys and nonbinary children face in relation to education in emergencies largely sit outside the scope of this report.

Throughout, this report uses the INEE gender continuum when talking about gender-unequal, gender-unaware, gender-aware, gender-responsive, and gender-transformative approaches (Figure 1). While education around the world should prepare learners to think outside of the binary "gender box," this report does use the term "women and girls" in a binary way to align with the data that has been collected by the United National Educational, Scientific, and Cultural Organization Institute for Statistics (UNESCO UIS) and others, which is still limited to binary definitions of male and female. Rigid gender binaries need to be dismantled, as we highlight in this report. However, to make comparisons to previous years' progress and effectively use and analyze the available global data, we have had to present the data in a gender-binary way looking at women and girls in a category alongside men and boys. A recent UIS report highlights that global data is still limited when it comes to gender and calls for work to be done to move away from binary data, but there is a long way to go (Sigdel, 2022).

**Figure 1. INEE gender continuum adapted from United Nations Population Fund (UNFPA), UNICEF, and UN Women (2020)**



## 1.2 METHODOLOGY, DATA AVAILABILITY, AND LIMITATIONS

This report uses a list of 44 crisis-affected countries (see Table 1) that is based on two main criteria:

- **The number of humanitarian appeals made in each country in recent years:** For this criterion, 38 countries had two or more humanitarian appeals from 2016 to 2019.
- **The proportion of each country's population that is forcibly displaced persons:** This criterion looks across all LMICs to see where more than 5% of the population has been displaced, including refugees, people in refugee-like situations, asylum seekers, stateless people, and people internally displaced by conflict or natural disaster. There are 18 countries in which more than 5% of the population is displaced.

Looking across these two criteria, 44 countries have been classified as crisis-affected, and the same 44 crisis-affected countries were used in the previous two *Mind the Gap* reports to enable comparison and analysis of trends in the data across these countries. A more detailed description of these criteria and the methods used to identify these 44 countries can be found in Annex 1 of [Mind the Gap 1](#).

**Table 1. List of 44 crisis-affected countries**

East Asia and the Pacific	Eastern and Southern Africa	Europe and Central Asia	Latin America and the Caribbean	Middle East and North Africa	Central and South Asia	West and Central Africa
Democratic People's Republic of Korea (DPRK)	Angola	Georgia	Colombia	Iraq	Afghanistan	Burkina Faso
Myanmar	Burundi	Türkiye	Haiti	Jordan*	Bangladesh	Cameroon
Philippines	Djibouti	Ukraine	Venezuela	Lebanon*	Pakistan	Central African Republic
	Eritrea			Libya		Chad
	Ethiopia			Occupied Palestinian territory (oPt)		Democratic Republic of the Congo (DRC)
	Kenya			Sudan		Mali
	Madagascar			Syria		Mauritania
	Malawi			Yemen		Niger
	Mozambique					Nigeria
	Somalia					Republic of the Congo
	South Sudan					Senegal
	Uganda					
	Zimbabwe					

\*Lebanon and Jordan are not included in the aggregate figures of crisis-affected indicators in this report; they are on this list due to the number of refugees they are hosting, which has little impact on girls' education in the national system.

Most education data for this report was drawn from UNESCO UIS and collated following a data update in September 2022. In 2021, UIS released new estimates for completion rates based on a statistical model to address issues around outdated data and inconsistencies in sampling. Following this, in 2022, the UNESCO Global Education Monitoring Report (GEMR) used these models to make time series of completion rates available for a wide range of countries. This report has been able to use the GEMR VIEW (Visualizing Indicators of Education for the World) database for up-to-date statistics on completion and out-of-school rates. Many more countries now have recent data available for use in this report compared to previous *Mind the Gap* reports, with comparable data for most years. Therefore, for the first time, *Mind the Gap 3* can track girls' completion and out-of-school rates in crisis-affected countries since the [Charlevoix Declaration on Quality Education](#).

ECW has also presented a new methodology and released estimates on the number of out-of-school children in need of support in crisis-affected countries. While this report has been able to draw on some of the estimates in the latest ECW report (which provides new options for determining learning loss), ECW's approach highlights the challenges of disaggregating learning data by sex due to the lack of primary data available for learning outcomes. The availability of education finance data has slightly improved since *Mind the Gap 2*. In this report, we are able to draw from data on national education spending across 33 of the 44 crisis-affected countries compared to 11 of the 44 countries that had 2020 data available in *Mind the Gap 2*. We provide an updated analysis of humanitarian and development aid disbursements to education for girls, drawing from the Organisation for Economic Co-operation and Development (OECD) Creditor Reporting System database and the United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA) Humanitarian Data Exchange.

### 1.3 COMPOUNDING CRISES: COVID, CLIMATE, AND CONFLICT

The beginning of 2022 marked the global peak of COVID-19 diagnoses, with over 15 million new cases being diagnosed weekly in late January (World Health Organization [WHO], 2022c). But vaccination programs and attenuation of the dominant virus strains meant that, in most countries, lockdowns and other restrictive health control measures lifted and, for many, life returned to a pre-pandemic "normal." But the wider impact of the lockdowns – to the economy, to education, and to other aspects of public health and well-being – is still being realized. The gendered nature of these effects has been widely noted, including increased gender inequality in the distribution of care work, increased rates of sexual and gender-based violence (SGBV), and reduced access to SRH services (G7 Development Ministers, 2022).

In the poorest countries, reduced access to sexual and reproductive health and rights (SRHR) led to an estimated 2.6 deaths among women and children for every COVID death (G7 Development Ministers, 2022), highlighting the imperative to ensure that emergency responses take gender into account. While Guinea and Sierra Leone are not included in our list of 44 crisis-affected countries due to no longer meeting the two criteria, research by ECW (2022c) found that girls in Guinea and Sierra Leone were 25% and 16% less likely, respectively, than boys to enroll in secondary school compared with pre-crisis levels.<sup>2</sup> Secondary-level enrollment was already higher for boys pre-COVID in both countries, demonstrating the widening gender gap in enrollment this crisis created.

While we can see widening gender gaps in emergency settings, these gaps continue to look at girls as a homogenous group and mask how other characteristics intersect with gender and make certain sub-groups of vulnerable girls more educationally marginalized. Girls are less likely to return to school after a crisis or pandemic, with high poverty levels and having a disability also greatly lowering the likelihood of returning. Without "girls" being broken down into sub-groups, these already high percentages are likely to hide even higher proportions among the most marginalized, including girls with disabilities who were not able to return to school in any capacity. In addition to the likelihood of school return after COVID-19, these intersecting barriers also hinder girls' ability to learn. A multi-country Save the Children study looking at COVID-19's hidden impact on children's education demonstrated that children with disabilities were less likely to have access to learning materials and received less parental support compared to children with no disabilities. Additionally, while 34% of parents reported feeling unable to support their sons with disabilities, 42% reported feeling this way about their daughters with disabilities (Gordon & Burgess, 2020).

While evidence remains scarce on how COVID-19 has affected education outcomes for refugee children, we know from previous pandemics that the consequences in terms of education outcomes and child protection status are disproportionately greater among the most vulnerable, especially adolescent girls. A recent 10-country<sup>3</sup> analysis with quality sex-disaggregated data for refugee learners found that half of all refugee girls will not return to school when classrooms reopen; in countries where refugee girls' gross secondary enrollment is less than 10%, all girls are at risk of dropping out for good (Nyamweya, 2020). Another study with Rohingya refugees and host com-

<sup>2</sup> ECW included Guinea and Sierra Leone as crisis-affected countries, as its methodology differs from that used by INEE.

<sup>3</sup> Cameroon, Chad, Ethiopia, Iraq, Kenya, Malaysia, Pakistan, Rwanda, Turkey, and Uganda

munities in Cox’s Bazar, Bangladesh, found that the pandemic increased the gender gap in education. Among refugee children, teenage girls’ attendance at informal non-governmental organization (NGO) learning centers dropped by 30% compared to before the pandemic and learning center closures (Haakon et al., 2022).

The COVID-19 pandemic disproportionately affected women and girls in fragile and conflict-affected states, but these women and girls also continue to be worst affected by the climate crisis. The surge in SGBV during COVID created what some have called the “shadow pandemic” (UN Women, n.d.), and similarly, academic studies have established a link between SGBV and the climate crisis (Kurtzer et al., 2022). Additionally, as extreme weather becomes more frequent and intense in countries already in crisis, girls are more likely to drop out of school and leave school after infrastructure is damaged to help recover agricultural losses; more women are being forced into the informal economy and pushed into extreme poverty (Kurtzer et al., 2022).

Extreme weather events linked to climate change affected much of the world throughout 2022, including flooding in Pakistan that displaced 7 million people, extreme drought in the Horn of Africa affecting 36 million people, and flooding in West Africa displacing 1.3 million people, as well as heatwaves and storms experienced in many regions (see Christian Aid, 2022, for a full summary). As discussed in the dedicated chapter in *Mind the Gap 2*, it is often girls and women who suffer the most during and after weather-related disasters.

The ongoing conflict stemming from Russia’s invasion of Ukraine in February 2022 has resulted in extensive death and destruction and forced millions to flee as other conflicts continue to grind on in DRC, Ethiopia, Mali, Syria, Yemen, and elsewhere. The war in Ukraine has compounded the effects of other crises, leading to global shortages of food, energy, and finance, with the most vulnerable – especially those in sub-Saharan Africa – likely to be hit the hardest (Burrier, 2022). The Russian invasion, together with crises in higher-income countries, is affecting the distribution of humanitarian aid amid some donors reducing their overall aid spending (Ritchie & Breed, 2022). Analysis indicates that ODA is being diverted away from the education sector, and away from low-income and lower-middle-income countries (Ahmad & Carey, 2022). Furthermore, ODA is increasingly being used to fund refugee hosting within G7 countries, which has led to overall decreases in the available funds for larger and more precarious refugee settings. Countries are technically allowed to count refugee hosting costs as ODA, and the UK spent a quarter of its annual aid budget hosting refugees, mainly from Ukraine, in 2022 (Hughes & Mitchell, 2022) – dramatically reducing the budget available to provide the support required for refugees in far more challenging settings.

These compounding crises have had, and will continue to have, multiple impacts on education and training. Even before COVID-19, the world was facing a learning crisis, with “nearly 6 out of every 10 ten year-olds in low- and middle-income countries suffering from learning poverty—meaning they were unable to read and understand a simple story” (World Bank, 2022, p. 7). As a result of the pandemic, estimates now put learning poverty at 70% globally, with increases of up to a third in LMICs since pre-crisis levels (World Bank, 2022, p. 7).

Crises have had immediate, direct effects (e.g., school closure, school destruction, and forced displacement), as well as longer-term effects (e.g., psychological and emotional distress due to learners’ exposure, which directly affects learning and development). Alongside the effects on learners themselves, crises can lead to reduced private and public investment in education, and malnutrition due to the ensuing food crisis can further limit learning. These effects impact learners of all genders, but as explored in *Mind the Gap 1*, the risks and implications for future well-being are often worse for girls as well as gender-diverse individuals and those with disabilities.

In extreme cases, the gendered impacts of disruption to education are obvious: for example, severe new restrictions to women and girls’ education and movement in Afghanistan following the Taliban’s 2022 return to power, with girls not allowed to return to secondary school and young women explicitly barred from university education from December<sup>4</sup> – walking back promises made by the Taliban to ensure the continuity of girls’ education. However, elsewhere the gendered impacts are harder to identify and can vary significantly. Evidence of the gendered impact of COVID-related school closures remained limited at the time of writing, but wider evidence on the impact of extend-

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<sup>4</sup> More information around the restrictions to women’s rights since the Taliban’s return to power can be found in Figure 2 (from Al Jazeera, 2022).

ed disruptions to education indicates that these tend to deepen any pre-existing intersecting and gendered inequalities in participation, attainment, and learning (UNESCO, 2022a).

Inequalities due to disabilities often intersect with gender and are further exacerbated by conflict and forced displacement, putting girls with disabilities affected by conflict at extreme risk (Rohwerder, 2017). In such contexts, girls with disabilities are more likely to be excluded from school, especially at the secondary level; have limited access to SRHR information and services; and be more vulnerable to sexual abuse.

Crises affect not only who gets access to education but also what gets taught. There is often high demand for CSE among adolescents affected by crises, but very limited capacity for education systems to deliver it (International Planned Parenthood Federation [IPPF], 2021). Yet it is during crises that these skills are most needed, with adolescent girls particularly exposed to a higher risk of not having their SRH needs met, and it is during crises that effective cross-sector collaboration is most needed (e.g., the education, protection, and health sectors all have a role to play in delivering SRHR information).

In contexts of protracted conflict or displacement, and in areas vulnerable to disasters, major disruptions to education have been part of a common experience for decades, often impacting multiple generations. Where girls and women have been historically excluded from education, there is a limited pool of educated young women from which to recruit female teachers. Gendered social norms restricting women's movement and career progression, together with the unequal burden of household and caring responsibilities, can further limit the number of female teachers and school leaders in crisis-affected areas. An extreme example is refugee settings in Ethiopia, where less than 10% of primary teachers are female (Bengtsson et al., 2020).



Lebanon. 2020 © Elias El Beam - IRC

## CHAPTER 2: OVERVIEW OF POLICY DEVELOPMENTS SINCE CHARLEVOIX

### Key findings

- The Global Disability Summit in 2022 highlighted the focus on, and commitment to, ensuring inclusive education in situations of crisis, emergency, and conflict. The summit also saw an increasing focus on addressing the intersecting barriers faced by women and girls with disabilities.
- There was collective agreement at the 2022 G7 foreign ministers meeting to increase the share of bilateral ODA on advancing gender equality, with communiqué commitments to contribute to a more resilient, inclusive, and gender-transformative education system.
- Out of the seven new global commitments launched at the Transforming Education Summit, one specifically focuses on advancing gender equality and women and girls' empowerment; another focuses on transforming education systems to enable all crisis-affected children to continue their education in an inclusive and safe environment.
- The Transforming Education Summit initiative on advancing gender equality is a Transforming Education flagship and will be promoted, championed, and monitored as such. One of the six "calls to action" coming out of the summit requests that governments put gender equality at the heart of education sector plans, budgets, and policies.
- Steps have been made to provide legal protection for women and girls in crisis settings, including Mozambique endorsing the Safe to Learn initiative and re-entry guidelines for girls during pregnancy and after giving birth and Cameroon enacting legal frameworks to protect pregnant girls' right to education. However, these steps forward do not mitigate setbacks to previous progress, as seen in Afghanistan since the Taliban's return to power.

This section provides an overview of policy change since the publication of *Mind the Gap 2* in 2022. For a more comprehensive overview of policies related to women and girls' education in contexts of crisis, see:

- *Mind the Gap 1*: Section 1.2 and Chapter 2, which look at policies both prior to and following the Charlevoix Declaration
- *Mind the Gap 2*: Chapter 2, which looks at the G7 Declaration on Girls' Education (developed during the G7 summit in June 2021) as well as the Global Partnership for Education's fourth replenishment (where 20 heads of state endorsed the Kenyatta Declaration in July 2021)

## 2.1 GLOBAL COMMITMENTS AND INITIATIVES

Key events since *Mind the Gap 2* at which new global commitments to girls' education were made include:

- The Global Disability Summit, February 2022
- G7 foreign ministers meeting in Germany, May 2022
- Freetown Manifesto, May 2022
- Transforming Education Summit, September 2022
- New commitments made under Generation Equality Forum (held in 2021)

The **Global Disability Summit** in February 2022 took place against the backdrop of the pandemic, which brought increased discrimination and abuse, especially against women and girls with disabilities. Even before the pandemic, people with disabilities experienced marginalization: with pre-pandemic data, UNICEF (2021b) estimated that almost 240 million children – one in every 10 – worldwide have disabilities, and as many as 33 million children with disabilities in LMICs are not in school (Education Commission, 2016). Women and girls with disabilities are particularly vulnerable to abuse, and women with disabilities are recognized to be multiply disadvantaged, experiencing exclusion on account of their gender and disability (Disabled World, 2022).

The Global Disability Summit galvanized more than 1,400 new commitments, with participating countries developing new policies in response. For example, Australia committed to its new policy considering intersectionality and exploring the challenges that arise from intersecting identities, including gender (Global Disability Summit, 2022), and Finland committed to championing disability-inclusive and gender-transformative policies in a move toward inclusive education systems. The United Kingdom Foreign, Commonwealth & Development Office committed to ensuring that women and girls with disabilities are meaningfully embedded across key priorities in its Women and Girls Strategy. Additionally, ECW committed to building national actors' capacity around data collection related to children with disabilities and linking this data with EMISes.

The summit made a particular commitment to ensure **inclusive education in situations of crisis, emergency, and conflict**. The previous summit, held in 2018, focused on “intersectionality and under-represented groups,” and 24% of their 2022 commitments fell into this category (up from just 2% in 2018). More specifically, many commitments mentioned women and girls with disabilities and/or addressed gender equality. For example:

- Sierra Leone, on providing technical and material support to women and youth with disabilities to enhance their participation in decision-making processes
- Denmark, on working to combat GBV, especially for girls with disabilities, in crisis as the global lead of the Call to Action on Protection From Gender-Based Violence in Emergencies 2021–22
- UN Women, on developing an action plan to mainstream disability inclusion through its work (Global Disability Summit, 2022)

The **G7 foreign ministers meeting**, held in Germany in May 2022, demonstrated an ongoing, strengthened commitment to girls' education, one that reinforced and built on the commitments made in previous years. A post-meeting G7 communiqué agreed to contribute to a more resilient, inclusive, gender-transformative education system by ending structural barriers and harmful gender norms, stereotypes, roles, and practices. It identified how this focus would help to reduce GBV; female genital mutilation; child, early, and forced marriage; and teenage pregnancy. This came with a plea that “now is the moment to join all forces to leverage resources for gender equality and women's empowerment” (G7 Germany, 2022). The ministers made a collective agreement to increase the share of bilateral ODA going toward advancing gender equality and women's empowerment and toward specific commitments made to advance this in and through education, with a specific focus on girls' education. The communiqué also highlighted commitments made to increase collective efforts to achieve comprehensive SRHR for all.

Also in May 2022, all 14 countries present developed and adopted the **Freetown Manifesto for Gender-Transformative Leadership in Education** during a workshop hosted by the Ministry of Basic and Senior Secondary Education in Sierra Leone and UNICEF Sierra Leone, alongside the Gender at the Centre Initiative.<sup>5</sup> This manifesto builds momentum for gender equality in and through education by committing to increasing budgets, strategies, and commitments to gender equality in education sector planning, ensuring citizen-inclusive data is collected, and focusing on the intersection of gender with disability, among other actions. The Transforming Education Summit and its associated gender equality call to action built on these commitments.

In September 2022, the Transforming Education Summit took place during the 77th session of the UN Assembly to mobilize political ambition, action, solidarity, and solutions with a view to transforming education between now and 2030. Seven new Global Initiative Calls to Action were launched at the summit, including one call to action specifically focusing on advancing gender equality and women and girls' empowerment and another focused on transforming education systems to enable all crisis-affected children and youth to access inclusive, quality, safe learning opportunities and the continuity of education. Additionally, civil society led the creation of a disability-inclusion education call to action, which was adopted at the Transforming Education Summit and has been endorsed by 200 stakeholders, including governments, multilateral organizations, and advocates from around the globe. This call to action recognizes the power of inclusive education in transforming education and commits to increasing budgets for disability-inclusive education and ensuring education programs and grants mainstream disability.

The gender equality call to action is a transforming education flagship that will be promoted, championed, and monitored under the SDG4-Education 2030 High-Level Steering Committee; by existing bodies on girls' education and gender equality in and through education; and via a new Global Platform for Gender Equality and Girls' and Women's Empowerment in and through Education (Transforming Education Summit, 2022). It urges governments to put gender equality at the heart of education sector plans, budgets, and policies, including identifying the support to be given to female teachers (e.g., fair and equal compensation, safe housing, and transportation) needed to work in remote areas (explored in more detail in Chapter 3). It also called for removing gender bias and stereotypes from curricula and learning materials while ensuring safe, gender-transformative, and inclusive learning spaces with mechanisms to prevent and respond to school-related GBV, as well as programs/mechanisms to provide CSE. The eight main asks of governments at the national and sub-national levels under this call to action (see Annex 2 for a list) will be monitored by a new global platform and will become the benchmark of actions to advance gender equality in and through education.

The call was made to governments, with a particular focus on addressing the immediate needs in the context of COVID-19 and in emergency and crisis contexts, where vulnerabilities are most pronounced (Transforming Education Summit, 2022). Language in this call to action demonstrates the movement from a focus on girls' education to that of gender equality in and through education. Additionally, the call to action specifically mentions engaging with men and boys in order to challenge gender inequalities, harmful norms, and stereotypes, as well as to address their disengagement from education. Other relevant key action points include calling on:

- Donors to finance programs directly reducing gender disparities in all levels of education while promoting women's leadership and challenging harmful gender norms
- United Nations agencies to ensure evidence-based monitoring with national ownership, as well as strengthen gender-transformative leadership and meaningfully engage gender experts and youth
- Civil society to build a knowledge base on core components of gender-transformative approaches and to prioritize localized agendas

Table 2 provides the key papers and commitments that the call to action draws on.

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<sup>5</sup> A G7-developed initiative launched in July 2019 and implemented by UNESCO's International Institute for Educational Planning and the United Nations Girls' Education Initiative



**Table 2. Key papers and commitments influencing the Transforming Education Summit Call to Action**

<b><u>Thematic Action Track 1 paper on inclusive, equitable, safe, and healthy schools</u></b>	A thematic paper on gender-transformative education developed through a multi-stakeholder process involving over 200 representatives; includes a focus on gender-transformative pedagogy and expanding gender-transformative education that empowers learners to examine, challenge, and change harmful gender norms and masculinities, GBV, and power imbalances
<b><u>The Freetown Manifesto for Gender-Transformative Leadership in Education</u></b>	Developed by 14 African ministries of education, with inputs from civil society and multilateral organizations (e.g., UN Girls' Education Initiative, UNICEF, UNESCO, ECW, and Global Partnership for Education)
<b><u>Related G7 and G20 declarations and communiqués</u></b>	The <u>G7's 2018 Charlevoix Declaration</u> , the <u>G7's 2019 Gender at the Centre Initiative</u> , the <u>G7's 2021 communiqué</u> (paragraphs 66–75), and the <u>G7's 2022 development ministers' communiqué</u> (paragraph 23)
<b><u>Global Acceleration Plan for Gender Equality</u></b>	<i>Generation Equality Forum's five year-plan, designed by six action coalitions, which launched in 2021; identifies the critical actions required to achieve gender equality in areas from GBV and technology to economic and climate justice</i>

The summit's call to action for those affected by crisis gave specific attention to improving the recruitment, retention, and continuous professional development of qualified female and male teachers and facilitators to ensure continuity of learning for crisis-affected children and youth in safe spaces (Transforming Education Summit, 2022). Additionally, gender equality continued to be pushed through the youth declaration, which demanded that:

- Decision-makers invest in gender-transformative education to create a present and future that is feminist, equitable, and free from harmful stereotypes
- Decision-makers ensure the provision of quality CSE for all learners in and beyond schools
- Investment be made in inclusive education that embraces diversity
- Safe learning environments be built that are devoid of all violence, including GBV
- Accountability frameworks exist for truly gender-transformative education

Turning to the **Generation Equality Forum**, more than 2,500 Action Coalition commitments and 1,000 commitments to the Compact on Women, Peace, and Security and Humanitarian Action had been made to accelerate the achievement of gender equality at the time of writing *Mind the Gap*. While UN Women hosted the forum with the governments of Mexico and France in June and July 2021, it was only with the 2022 publication of the first accountability report that we could see initial progress against these commitments. Early findings signal promise, with commitments being translated into action, new partnerships being forged, high financial commitments being made, and 80% of commitments covered in survey responses being implemented (UN Women, 2022b). These commitments add up to a dollar-equivalent investment in gender equality of at least \$24 billion, with 71% of this already having been confirmed. This amount is expected to rise, potentially above the \$40 billion reported in Paris (UN Women, 2022b).

The Generation Equality Forum principles of feminist leadership, transformational change, and intersectionality are clear in the Action Coalitions, and emerging learning shows the diverse ways that commitment-makers are turning these principles into action. Youth-led organizations are highly engaged, and across almost half of reported commitments, organizations say they will support or work directly with women's rights, feminist, and/or grassroots organizations.

Finally, we must note **COP27** and the growing global recognition of the relationship between climate change and education, with the United Nations Framework Convention on Climate Change asserting that parties to the convention must undertake educational and public awareness campaigns. Article 12 of the Paris Agreement also recognizes education's critical role in empowering society to engage in climate action, and it is a thematic priority of UNESCO's 2020 global framework on education for sustainable de-

velopment. However, there are still gaps, and education has remained mainly overlooked by the parties to the convention (Brookings, 2023). Against this backdrop, COP27 successfully called on parties to make gender equality, women's empowerment, and women's leadership central to climate action. The strong engagement of the UN Women executive director at COP27 enabled gender to be mainstreamed across climate action, with efforts to strengthen the Gender Action Plan and the launch of the African Women's Climate Adaptive Priorities initiative aiming to expand leadership opportunities for women in green sectors; increase their representation in science, technology, engineering, and mathematics (STEM); and leverage increased national investments for women-led green businesses (UN Women, 2022a).

## 2.2 TRACKING NATIONAL POLICIES AND LAWS

The new Global Platform for Gender Equality and Girls' and Women's Empowerment in and through Education, launched at Transforming Education Summit, will be used to convene governments, donors, partners, and civil society to monitor progress against the summit and other commitments; highlight gaps in progress at the country level; and encourage transformative action on girls' education and gender equality in and through education.

While this platform becomes established, this report has built on the baseline presented in *Mind the Gap 1* and *Mind the Gap 2*. Section 2 in *Mind the Gap 2* demonstrates how the 44 crisis-affected countries included within this report ranked in the Girls' Education Policy Index, which assesses policies on education financing, sexual health, safety, labor market opportunities, and role models (Crawford & Hares, 2020). This index launched in 2020 but has not since been updated, meaning the overall index rankings are currently unchanged (see Figure 1 in *Mind the Gap 2*), with 37 of the 44 crisis-affected countries ranked in the bottom 50% of the index, and five in the bottom 10%.<sup>6</sup>

*Mind the Gap 1* looked at the UNESCO mapping of national policies that support women and girls' right to education, as presented in *Her Atlas*. There have since been a few updates to the data, but these have led to only marginal changes in the proportion of crisis-affected countries that protect the right to education for girls and women. Updates to the *Her Atlas* data show that:

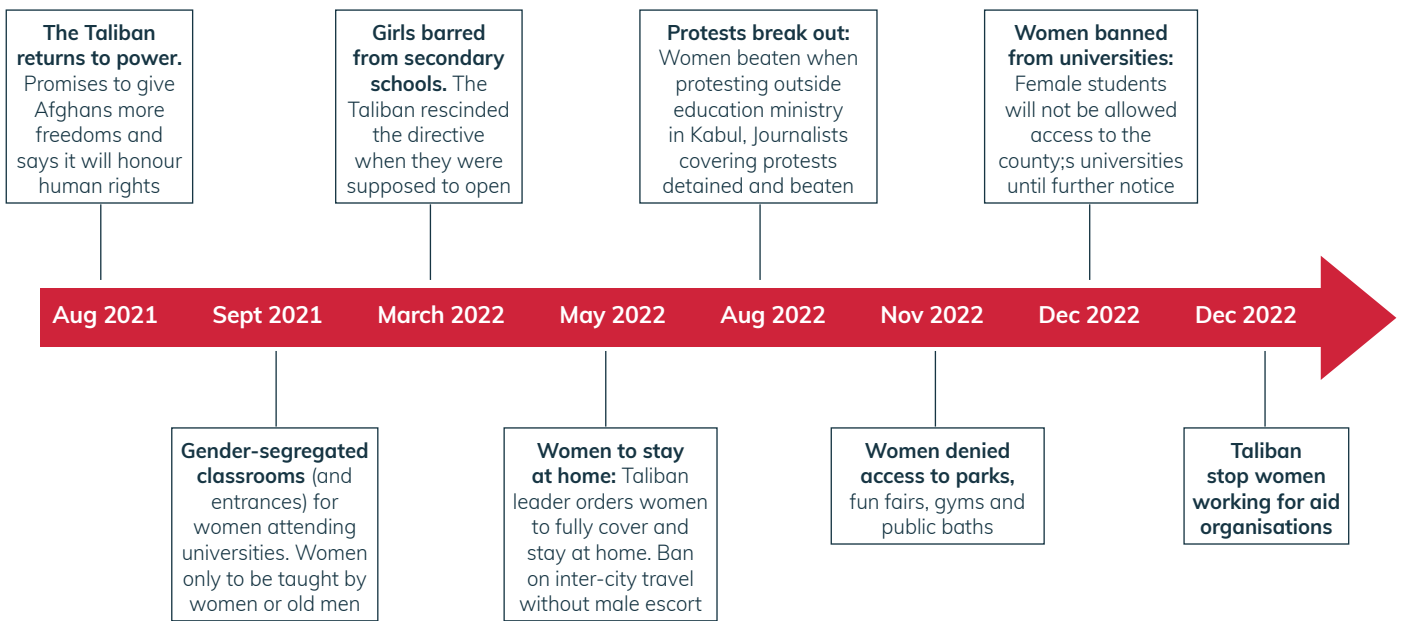
- The Central African Republic has enacted stronger provisions for girls' rights through the Child Protection Code of 2020, which does not allow the previous exceptions around the minimum age of marriage and brings in some form of protection from violence, where there was previously none. However, as with most of the 44 countries providing some legal protection from violence in schools, this still doesn't explicitly prohibit all forms of corporal punishment (UNESCO, n.d.).
- Cameroon has also put in place legal frameworks to protect the right to education of pregnant and parenting girls, where a previous ban was in place, but this still only increases the percentage of crisis-affected countries (with available data) to 7% protecting this right. Human Rights Watch (2021) identifies the types of measures still hindering the education of learners who are pregnant or adolescent mothers, including laws referring to pregnant girls but not positively protecting their access (e.g., in Chad); morality laws that hinder the education of learners who are pregnant or young mothers (e.g., in Sudan); and a lack of any policy (e.g., in Somalia and Angola).
- Mozambique has made small movements to better protect the safety of girls in schools by endorsing the Safe to Learn initiative (Global Partnership to End Violence Against Children, 2022); the Ministry of Education and Human Development has named violence in school as a matter of extreme concern and acted to prioritize the issue through its strategic education plan, which aims to provide a safe and nonviolent learning space. Of the 44 crisis-affected countries, Mozambique joins Georgia, Honduras, Jordan, Lebanon, South Sudan, and Uganda in their endorsement.

Amid these small improvements to legal protection for women and girls in crisis settings, the situation in Afghanistan demonstrates how sudden regime change can reverse the progress being made in women and girls' access to education (see Figure 2). After taking power in 2022, the Taliban backtracked on its promise to guarantee girls' right to be educated, alongside additional freedoms, and returned to the policies in place when the Taliban last held power in 2001.

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<sup>6</sup> Afghanistan, Central African Republic, Somalia, South Sudan, and Yemen

**Figure 2. Timeline of the Taliban’s crackdown on women’s education and rights  
(from Al Jazeera, 2022)**



In response to the Taliban’s crackdown on women’s education and rights and its failure to fulfill its promise of continued education for girls, there has been a call globally for world leaders to fill the wide gap in aid funding to Afghanistan so that women and children can receive protection and meet their essential needs. As of August 2021, the international humanitarian response plan was only 64% funded, with the shortfall meaning that 1.2 million children – especially girls – could lose specialized protection services, making them more vulnerable to violence, forced marriage, and sexual exploitation. Furthermore, 1.4 million women – many of them survivors of violence – will be left without safe places to receive comprehensive support (International Rescue Committee, 2021). Without women working in the humanitarian response, aid organizations are unable to create safe spaces where the needs of women and girls are met. Therefore, it is critical for the international community, including the US, UK, and European Community, to recognize this and push for humanitarian access. The international community agrees that this level of structural discrimination is deeply damaging to the country’s prospects of future recovery.



Pakistan, 2021 © Khumais Hashmi, IRC

## CHAPTER 3: RECRUITING AND RETAINING FEMALE TEACHERS

### Key findings

- There is a vast global shortage of qualified teachers – and, particularly, female teachers – in crisis-affected countries; this shortage is particularly prevalent in areas defined as hardship or harsh environment postings.
- The proportion of female teachers in the workforce is complex and contextual. In crisis-affected contexts, the teaching workforce has proportionally more women than men at the pre-primary and primary levels, but female teachers only make up 38% of the teacher workforce at the secondary level on average.
- To better recruit and retain female teachers, education sectors need to prioritize improving working conditions and delivering high-quality professional development that supports teachers in developing their competencies and enabling them to progress.
- In many crisis-affected countries, women are less likely than men to meet the qualifications for entering national teacher training institutions. In response, alternative routes into teaching have been explored, with promising results in terms of increasing both the number of women in the workforce and the number of girls completing secondary school – and, thus, having the potential to enter traditional teacher training.
- Emerging evidence indicates that having women in school leadership is associated with better outcomes for learners and safer schools for girls. Women need support to reach school leadership positions, and more work is needed to develop effective programs and policies to support getting women into leadership.
- Teachers' well-being must be prioritized. More research is needed to better understand the experience of female teachers in crisis-affected contexts and the impact of teacher well-being programs.

The world faces a global shortage of teachers in general and qualified teachers in particular. For example, countries in sub-Saharan Africa alone will need to recruit 15 million teachers to reach the Sustainable Development Goal (SDG) education objectives by 2030 (UNESCO UIS, 2016). This teacher shortage is particularly acute in crisis settings. Correspondingly, there is an acute shortage of female teachers at all levels in emergency and crisis contexts, which is important because female teachers' presence in education systems is generally associated with expanded educational opportunities and attainment for girls (International Task Force on Teachers for Education 2030 [Teacher Task Force], 2021b; Sperling et al., 2016; Psaki et al., 2022).

Teachers working in crisis-affected contexts face challenging working conditions, low pay, and low access to professional development, yet they remain passionately committed to providing quality education to some of the world's most vulnerable children. This chapter provides a detailed examination of the available UIS data on female teachers in crisis-affected contexts, with the caveat that averages for crisis-affected states conceal significant variation between and within countries in the recruitment, retention, and deployment of female teachers. Although the evidence base is limited, we draw on data and research around teachers of refugees and teachers in displacement contexts where possible. The chapter also explores strategies to increase the number and well-being of female educators through reforms in teacher management processes and policies, as well as looking at positions for female educators that provide a route into teaching for women and girls in communities, where access to education has been limited.

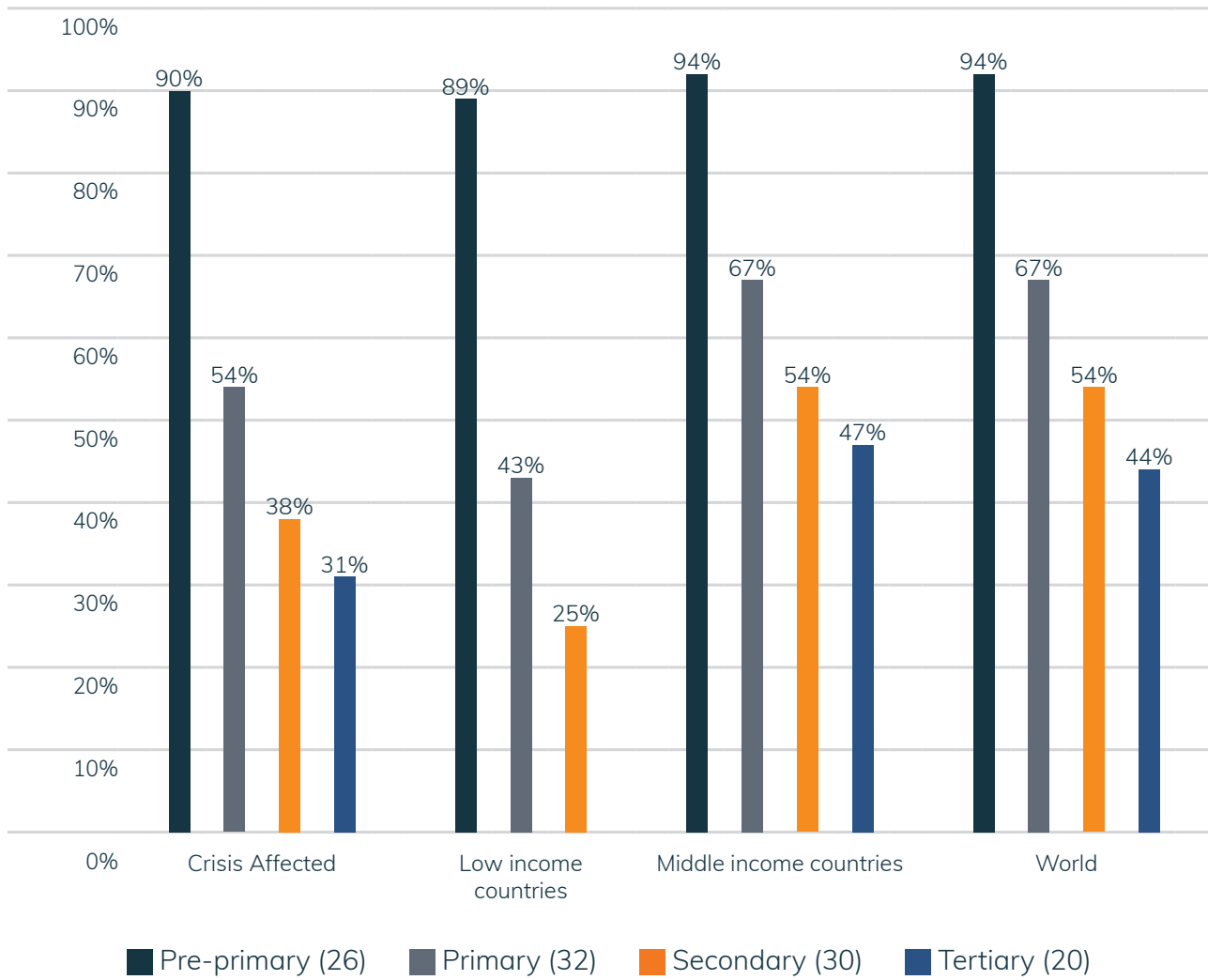
### 3.1. FEMALE REPRESENTATION IN THE TEACHER WORKFORCE

Female teachers' presence in education systems is generally associated with expanded educational opportunities and attainment for girls (Teacher Task Force, 2021a; Sperling et al., 2016; Psaki et al., 2022). Female teachers act as role models and an increased presence of female educators can support shifts in gender norms; these educators often play a key role in encouraging communities to send girls to school and reassuring communities that girls are safe in school (Sperling et al., 2016). There is also some evidence that female teachers are more likely to be supportive and respond to learners' emotional needs (Stromquist et al., 2017). Inclusion in education means developing a teacher workforce that mirrors the diversity of the classroom, with gender being a significant factor in creating inclusive classrooms (Teacher Task Force & GEMR, 2020).

UIS collects teacher data from UNESCO member states to monitor SDG target 4c: "by 2030, substantially increase the supply of qualified teachers, including through international cooperation for teacher training in developing countries, especially least developed countries and small island developing States." Seven indicators are used to measure progress on 4c, and previous Mind the Gap reports focused on the proportion of teachers in crisis-affected countries who are female. However, in this report, we explore the available data in greater detail to look at the gender dynamics of the teacher workforce in crisis-affected countries.

The latest UIS data on the proportion of teachers who are female shows little change from Mind the Gap 2 and demonstrates how the proportion of women in the education workforce falls as you move through the education system. In crisis-affected contexts, women make up 90% of the pre-primary teaching workforce (up from 88% in Mind the Gap 2), 54% of the primary workforce, and 38% of the secondary workforce (Figure 3). The proportion of women teaching in tertiary institutions continues to increase slowly, from 30% in Mind the Gap 2 to 31% now. However, it is important to note that these averages conceal substantial differences at the national and sub-national levels.

**Figure 3. Female proportion of the teaching workforce**

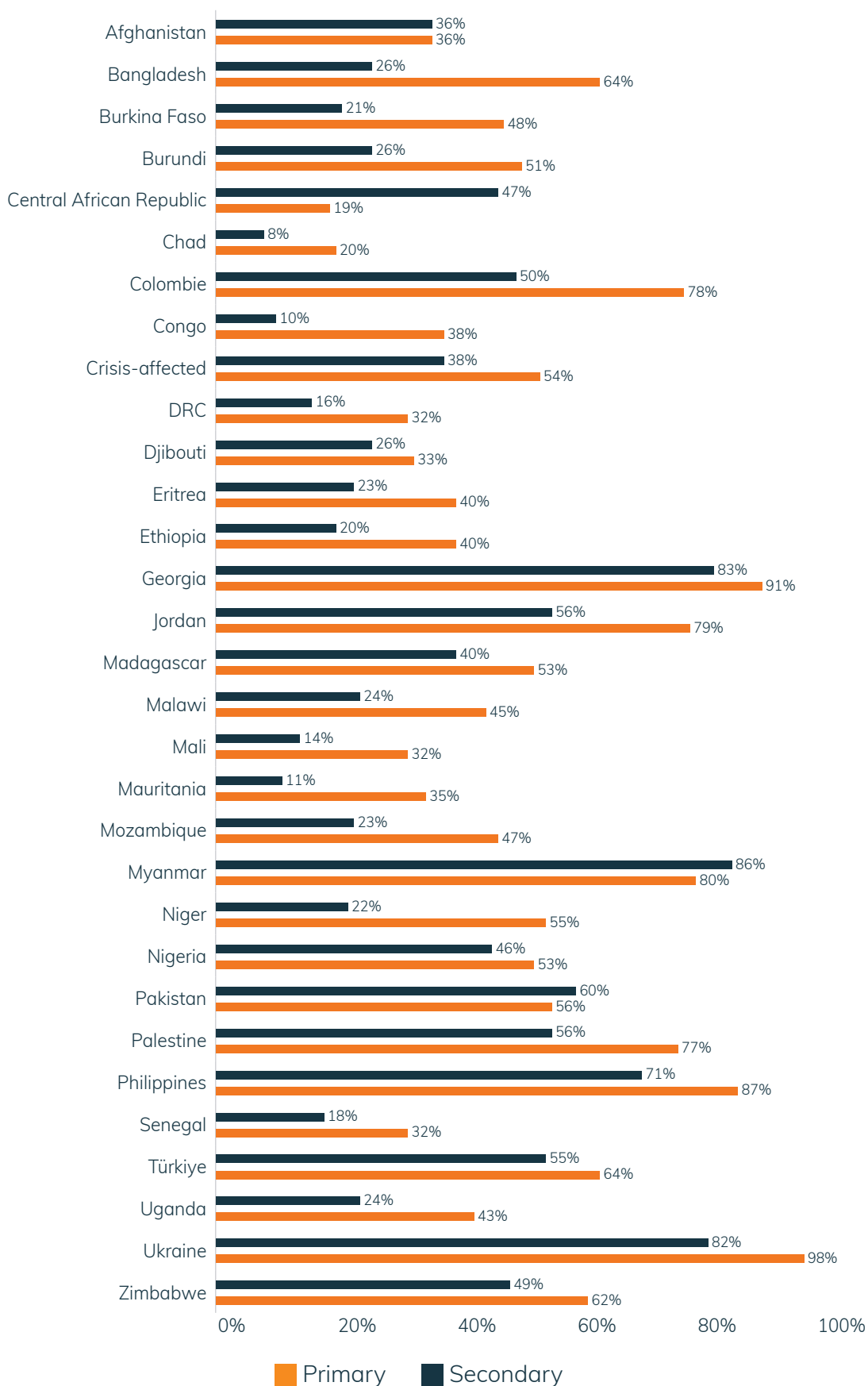


( ) Indicates the number of crisis-affected countries with data available

Source: Data retrieved February 2023 from [the UIS database](#). Averages based on the authors' calculations from the most recent data (2017–2021) for the 32 crisis-affected countries with data available; no UIS estimates are available for the percentage of female teachers at the tertiary level for low-income countries.

The most recent UIS data clearly indicates that in many crisis-affected countries, female teachers make up a much smaller proportion of the teacher workforce than male teachers at both the primary and secondary levels, and the make-up of the teacher workforce varies widely across crisis-affected countries (see Figure 4). At the primary level, female teachers make up just 20% of the primary workforce in Chad and 32% in Mali, DRC, and Senegal, compared to 87% in the Philippines, 91% in Georgia, and 98% in Ukraine. At the secondary level, women make up just 8% of the teacher workforce in Chad and 10% in Congo but reach 86% in Myanmar and 83% in Georgia. Central African Republic, Myanmar, and Pakistan are outliers among crisis-affected states, with a higher proportion of female teachers in secondary than primary education. In some countries – notably, Georgia, Myanmar, and Ukraine – female teachers make up over 80% of the teacher workforce at both the primary and secondary levels.

**Figure 4. Percentage of teachers in crisis-affected countries who are female at the primary and secondary levels, by country**



Source: Data retrieved February 2023 from the UIS database. Data represents the 30 crisis-affected countries with data available for 2017–2021 at both the primary and secondary levels.

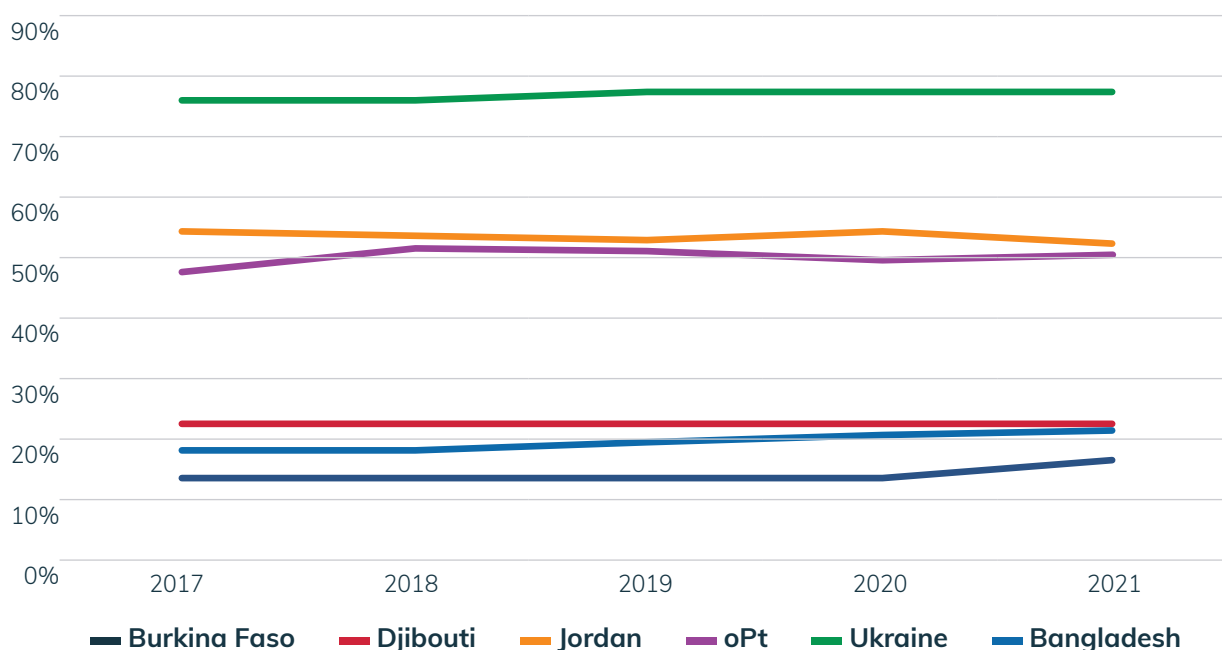
Looking at the regional level, the percentage of female teachers is higher in primary education than in secondary. The proportion of primary-level female teachers is lowest in LMICs and in sub-Saharan Africa in particular; sub-Saharan Africa has the lowest proportion of female teachers in the primary workforce, at 47% in 2020 compared to 87% for Central and Eastern Europe.<sup>7</sup> In secondary education, women make up just 32% of the teacher workforce in sub-Saharan Africa compared to 71% in Central and Eastern Europe. Within countries, shortages of female teachers are particularly acute in rural and remote areas (Naylor, 2019).

In Francophone Africa, the *Programme d'analyse des systèmes éducatifs de la CONFEMEN* (PASEC) collects information about teacher characteristics, training and professional development, teaching practices, and teaching goals (Teacher Task Force, 2021b). Data from the most recent round of the survey reinforces the lack of parity in the teaching profession in Francophone Africa, as demonstrated in the UIS data. In primary schools where teachers took part in PASEC, the highest percentage of women in the teaching workforce was 63% in Niger, yet women make up less than 50% in nine of the 14 countries<sup>8</sup> – reaching as low as 20% in Togo and 22% in Chad (PASEC, 2020).

The UIS data also shows that recent changes have been small in the proportion of women teachers, both for countries where women make up high proportions and low proportions of the overall teacher workforce. Overall averages across crisis-affected states show a small rise in the proportion of female teachers at the primary level, from 57% in 2017 to 58% in 2021<sup>9</sup>; the proportion fell from 42% in 2017 to 38% in 2021 at the secondary level.

Figure 5 illustrates how small these changes have been in countries with different overall gender makeups in their education workforce. Ukraine, for example, has reported the proportion of women in the education workforce growing by 1.7% at the primary level and 1.9% at the secondary level from 2017 to 2021. In Burkina Faso, a country with a low proportion of female teachers, there has been an increase of 1.4% at primary and 4% at secondary.

**Figure 5. Change in the percentage of women in the secondary education workforce in six crisis-affected countries**



Source: Data retrieved February 2023 from [the UIS database](#) (with data available for 2017–2021).

<sup>7</sup> Estimate based on UIS database data

<sup>8</sup> 14 countries that are members of CONFEMEN; Benin, Burkina Faso, Burundi, Cameroon, Congo, Côte d'Ivoire, Gabon, Guinea, Madagascar, Niger, DRC, Senegal, Chad, and Togo. Countries where the proportion of women is less than 50% are Benin, Burkina Faso, Cameroon, Côte d'Ivoire, Guinea, DRC, Senegal, Chad, and Togo.

<sup>9</sup> Averages are authors' own calculation and unweighted based on available data from 2017–2021 for 27 countries with data available.



There is limited international data for crisis-affected countries related to the sex of teachers of particular subjects. However, data from the Trends in International Mathematics and Science Study (TIMSS) suggests that few high- or middle-income countries have significant proportions of female teachers specializing in science or mathematics, although there are significant variations between countries (UNESCO, 2017).

Data on teachers in refugee settings is limited, patchy, and difficult to collect. Some data is available on student-teacher ratios from individual countries, but no systematic, sex-disaggregated data on teachers is available (United Nations High Commissioner for Refugees [UNHCR], 2022). As the 2022 UNHCR Education Report notes, one of the challenges in collecting the data is the variety of ways that refugees are incorporated into national education systems – camp schools, public schools, or a mix of the two – which makes it difficult to track how and where refugees are accessing education and who is teaching them (UNHCR, 2022). Additionally, the international data on the number of teachers in education systems with disabilities is very limited as well; some national EMISes include teacher profiles with information on teachers’ disabilities and training related to disability and inclusion, but this is not widespread.

There are complex reasons behind the highly variable proportion of women in the teacher workforce. In some contexts, teaching is one of the few highly skilled professions that are open to women (Le Nestour, 2020). However, in others, few women transition to secondary education and leave with the qualifications required to attend teacher training college, thus limiting the number of women in these colleges (Teacher Task Force, 2021a). Difficult working conditions – including high student-teacher ratios, policies that do not support families staying together, and safety concerns in settings that are remote or involve teaching refugees – are also a factor. Section 3.3 explores some of the experiences of women in the teacher workforce.

The UNESCO International Institute for Educational Planning’s [teacher toolkit](#) highlights the difficulties of attracting female teachers and ensuring their safety. To help make schools a safe space for teaching and learning, school policies should tackle GBV, promote a supportive peer network for teachers, and include mentorship programs.

*“When you teach in a school like this, there are lots of social issues and safety issues you face every day. In such an overcrowded and impoverished population, there’s a lot of violence in homes, and that comes into the classroom. I’ve had to help a number of my learners report sexual abuse and identify suitable support for them to deal with the trauma. And I have had to visit a girl’s parents to persuade them to allow her to continue her education instead of getting married. I have been at risk many times, inside and outside of school.”*

*—Interview with Adeola Adefemi a secondary school teacher in Lagos, Nigeria  
(Teacher Task Force, 2022)*

### **3.1.1. IMPORTANCE OF TEACHERS’ GENDER FOR SCHOOL ENROLLMENT, RETENTION, AND LEARNING**

It is widely acknowledged that female teachers have an overall positive impact on girls’ enrollment and learning, particularly in sub-Saharan Africa (Teacher Task Force, 2021a; Sperling et al., 2016). Yet the evidence remains limited on whether this is also true in high- and middle-income countries, as well as if it is widely true across crisis-affected contexts; these areas would benefit from more research. Generally, though, female teachers’ presence can be particularly important in more conservative communities, where social norms may limit girls’ mobility and interactions. In Afghanistan, for example, female teachers in community-based schools were often the sole figures responsible for educating girls in their communities who received recognition from community members (Kirk & Winthrop, 2008). As another example, Case Study 2 examines the Refugee Education Council’s work with the Ameen Foundation to educate refugees in Pakistan. All the teachers are women, and the organization has been able to earn the trust of the community (see Annex 1).

“I am proud to have witnessed the transformation of one of my students, who is the first in her family to pursue a bachelor’s degree. There are other students who have taken it upon themselves to teach their relatives at home, and some of my students have a coaching centers for married women back in Afghanistan. This cycle of empowerment through education is a remarkable testament to the resilience and determination of these girls, and I have great hopes that it will continue to thrive and make a lasting impact.”

—Khatira Amin, Refugee Education Council member  
(interview with Mind the Gap report team, 2023)

Female teachers act as role models and can play a central role in encouraging communities to send girls to school and in reassuring communities that girls are safe in school. For example, a mixed-methods study in northern Nigeria found that schools with at least one female teacher (in contexts where the majority of teachers are male) had higher rates of girls’ enrollment (Smiley et al., 2018). There is also some evidence that female teachers are more responsive to learners’ emotional needs (Stromquist et al., 2017), and they may heighten girls’ aspirations and lower their likelihood of being subjected to violence (Evans & Le Nestor, 2019). A Plan International project in Nigeria’s Borno and Yobe States worked with female teachers and education stakeholders to undertake community outreach campaigns and door-to-door operations, address social norms restricting girls’ enrollment in school, and provide training for female teachers. An evaluation of the project found an increase in schools’ gender responsiveness, an increase in female learners’ enrollment, and positive changes in community members’ knowledge, attitudes, and practices related to enrolling and supporting girls’ participation in education.<sup>10</sup>

Analysis of 2017 and 2019 data from the Trends in International Mathematics and Science Study (TIMSS) shows that both male and female learners taught math or science by female teachers were doing better than those taught by male teachers (Hastedt et al., 2021). Female teachers have been found to positively influence girls’ perceptions, interest, and confidence in STEM subjects, as well as their STEM career aspirations. Female teachers can positively influence girls’ education in STEM by dispelling myths about sex-based, innate abilities among boys and by acting as role models for girls (UNESCO, 2017). For example, one science teacher for refugee learners in Malaysia described on an INEE podcast how she created a safe and welcoming space for all her learners (including the only girl in her class) and played an active role in challenging gender stereotypes and dispelling myths about sex-based innate abilities in STEM.

“Sometimes, the girl was saying something or participating, and sometimes, the boys would laugh, and they might feel that whatever she is saying is a funny thing, so it’s important to say ‘no’ in this space; nobody is going to laugh at anybody because everyone makes mistakes – it’s creating an environment where boys learn that they have to respect girls.”

—Laura Barbosa, teacher of refugee learners in Malaysia (INEE, 2021b)  
The full interview is available in “Episode 6: Teachers – The Backbone of Education” of INEE’s podcast Educate Us! Women and Girls on Learning in Humanitarian Crises.

Additionally, in contexts where women are overrepresented in the teacher workforce, concerns have been raised about the potential negative effect of too few male teachers (UNESCO, 2022b). However, there is little robust evidence to show that teachers’ gender alone affects boys’ learning outcomes. One study in India, Malaysia, Nigeria, Pakistan, Seychelles, and Trinidad and Tobago found that teachers’ quality and competencies – rather than gender – are what matters most to meaningful engagement with both boys and girls (Jha & Page, 2009).

<sup>10</sup> Source: Unpublished monitoring data for the Plan International project “Educating Vulnerable and Hard to Reach Adolescent Girls in Northeast Nigeria”; data collected January–December 2022t; data collected January–December 2022 and analyzed by Gregory Okonofua and Sara McGinty, Plan International, 2023

Little research is available on how female teachers' presence affects boys' experience and outcomes in terms of enrollment, safety in school, and feeling supported in schools. In the Caribbean, where conceptualizations of masculinity affect boys' disengagement from education and academic expectation of boys are low, research has found that female teachers can have little authority over older boys in the classroom (UNESCO, 2022b). Additionally, research in Australia, Canada, and the UK has found that boys may be disruptive in a classroom as a way of resisting subjects viewed as "feminine" (UNESCO, 2022b). One analysis of Violence Against Children Surveys found that boys experience higher levels of physical violence from male teachers and male teachers are more likely to use violence (Together for Girls, 2021). However, a study in Delhi, India found that female teachers were more likely than male teachers to use corporal punishment against male learners as a way to reinforce their authority and ensure male learners show respect (Ginestra, 2020).

### 3.1.2. TEACHERS' VIEWS CAN REFLECT GENDER STEREOTYPES

In some contexts, harmful gender and cultural norms and stereotypes support the idea that teaching is a profession best suited to women, and requests for more female teachers are rooted in perceived gender roles within a school. For example, Jordan has very high levels of female teachers at all levels of the education system, and respondents to research on refugee teacher management said women's caring, maternal nature and the family-friendly nature of the job meant that women were "natural" teachers (Bengtsson et al., 2021).

*"It is a profession that many girls in the country would aspire to be. It is a professional that really supports family life because of the timing of the school day, the vacations, and so on. So, yes, you would find many female teachers attracted to the profession."*

*—Interview with central-level informant in Jordan*

*"Usually, males have more difficulties than us ... females are born to be mothers, so, teaching is not that difficult for us."*

*—Interview with teacher from a single-shift girls' school in Jordan  
(Bengtsson et al., 2021)*

Research into teacher deployment and teacher preferences in Sierra Leone showed that respondents in schools generally wanted to address gender imbalances in the workforce. However, the demand for a gender-balanced workforce stemmed in part from perceptions around gender roles in the schools, with school leaders commenting that women will clean the school and male teachers are more able to deal with learners who demonstrate challenging behaviors (McBurnie et al., 2022).

*"When you have a woman in a school[, t]he school will develop because here in the morning, I am the one who will sweep the classroom and clean them. But if there is a woman, all those work will be done by her."*

*—Male school leader in rural area of Kenema, Sierra Leone*

*"The male pupils are very difficult to control, so that's why I said I need male teachers so that they will help us."*

*—Female head teacher at urban school in Bombali, Sierra Leone  
(McBurnie et al., 2022)*

Gendered stereotyping around caring roles may also be responsible for the lack of men working in pre-primary education. UIS data shows that 94% of pre-primary teachers globally are female (see Figure 3). This uneven recruitment hinders the creation of a learning environment that can challenge traditional gender roles, and it can also perpetuate itself as a lack of male teacher role models preventing boys from entering the teaching profession (UNICEF Office of Research – Innocenti, 2022). Teachers in pre-primary education often receive low salaries, get less training and development, and enjoy less secure employment than teachers at other levels in the workforce. Improvements to employment conditions and professionalization with improved career paths and targeted campaigns to attract more men into these roles are needed. There are some examples of this from high-income contexts: for example, Sweden’s National Agency for Education launched a national campaign to encourage men to choose a career in early childhood education, and Belgium’s Flemish Community has previously made funding available to attract men and those from underrepresented groups into teaching (UNESCO, 2022b).

Policies to increase inclusiveness and diversity among teachers in order to build a more gender-balanced and diverse workforce are important to achieve wider justice and equality goals. In Jordan, where boys and girls attend separate schools, the Education Strategic Plan acknowledges that teachers had been of lower quality in boys-only public schools and proposed policy options to improve teacher selection and recruitment (UNESCO, 2022b). Ultimately, all teachers have a role to play in the creation of inclusive and gender-transformative learning environments that address all learners’ needs. Gender-responsive pedagogy is one tool that can be implemented at all levels of education systems. In South Africa, Vietnam, and Zambia the [Gender-Responsive Pedagogy for Early Childhood Education toolkit](#) provides pre-primary teachers and school leaders with tools to reflect on their own gender biases and beliefs when interacting with children (UNICEF Office of Research – Innocenti, 2022).

### 3.1.3. TEACHER SHORTAGES IN REFUGEE CAMP SETTINGS

While relevant data is scarce for displacement settings and refugee camps, we know that more teachers are urgently needed and these contexts have a severe shortage of female teachers (Mendenhall et al., 2018). If all refugees were enrolled in the national school system, Türkiye would need 80,000 more teachers, Germany would need 42,000 more teachers, and Uganda would need 7,000 more primary teachers (UNESCO, 2019). UNHCR data shows that in Kenya’s Dadaab refugee complex, 10% of national teachers and 18% of refugee teachers were female as of 2021 (West et al., 2022); 16% of national teachers were female in Ethiopia’s Dollo Ado refugee camp (UNESCO, 2019). In Ethiopia, an analysis of EMIS data showed that more than 90% of the teachers are male at all levels in the Benis-hangul-Gumuz, Gambella, and Tigray refugee camps (Bengtsson et al., 2020).

*“If you are single, you are given accommodation at the compound, so you stay in there with a room and a fan and some meals, but the moment you become pregnant, you step out and you have to fend for yourself. The ladies who have children need more support and it is difficult to find a home in the town....Mental health and psycho-social support is also key, because if you become a parent while teaching in the camps, which happened to me, it’s a bit tough. It is not easy to survive – security issues, fending for yourself. After my child I did it 10 months and I realized I could not make it. I had to quit and volunteer in a nearby NGO.”*

—Female research participant, *Teacher Management in Refugee Settings*. Kenya (West et al., 2022)

The shortage of female teachers is compounded by the shortage of qualified teachers among both refugee and host communities, which is most severe in contexts where girls’ educational opportunities are limited: for instance, in Pakistan, where there are shortages of qualified female teachers in the Pakistani host and Afghan refugee communities (Mendenhall et al., 2018). In many settings, safety concerns and cultural practices contribute to a particular shortage of female education staff. There is a very limited evidence base to draw on here, but the research available highlights the challenges national female teachers face around teacher management in camp schools in Kenya and Ethiopia. Stakeholders and teachers have noted the lack of benefits, safety concerns around the need to live in the camp, inadequate maternity leave and a lack of support for those with children, and a lack of role models in more senior roles to motivate women (West et al., 2022).

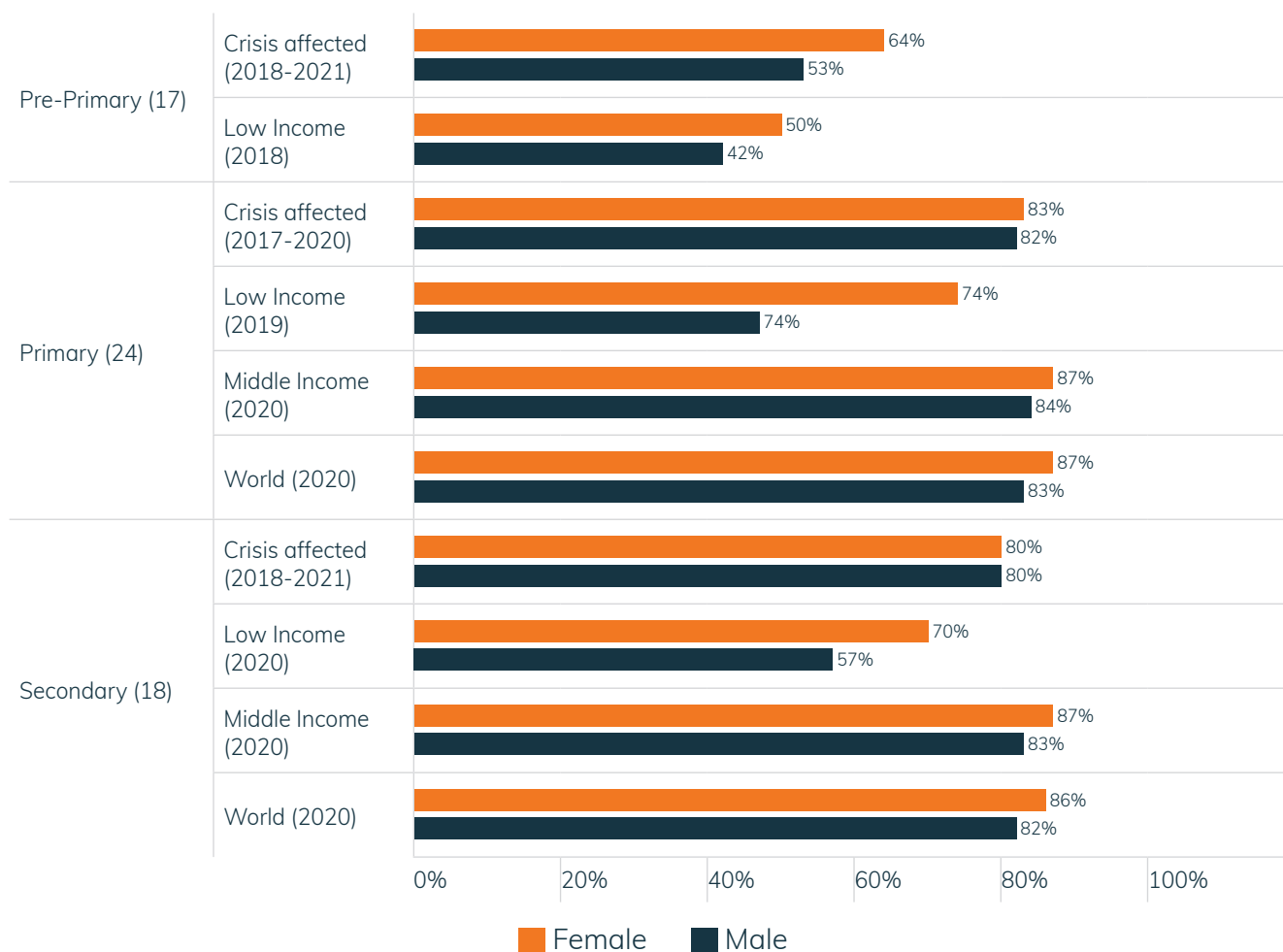
## 3.2. TEACHER QUALIFICATIONS IN CRISIS-AFFECTED COUNTRIES

It has long been recognized that teachers require adequate qualifications and training and ongoing support to develop new skills. UIS data shows that male and female teachers have similar qualifications and levels of teacher training, and generally, rates of teacher attrition are actually lower for women than men. In some crisis-affected contexts, women have less training than men but these are the exception, not the rule. There are gaps in what the available data can tell us about teachers' qualifications, as it is difficult to make direct comparisons: for instance, the curriculum and approach for initial teacher training varies widely across contexts.

### 3.2.1. TEACHERS WITH MINIMUM LEVELS OF TEACHER TRAINING

SDG indicator 4.c.1 measures the proportion of teachers who have received at least the minimum organized pedagogical teacher training, both pre-service and in-service, required for teaching in a particular country. According to UIS data, similar proportions of male and female teachers meet the minimum qualifications across income groups at the primary and secondary levels (Figure 6). In both crisis-affected and low-income countries, a higher proportion of women than men have the minimum required qualifications. At the primary level, a slightly higher proportion of women are qualified than men in crisis-affected countries, and at the secondary level, 80% of both men and women are trained on average.

**Figure 6. Proportion of teachers with the minimum required qualifications in crisis-affected countries who are female, compared to LMICs and globally.**



( ) Indicates the number of crisis-affected countries with data available

Source: Data retrieved February 2023 from the UIS database. Crisis-affected countries' averages calculated based on the authors' calculations from the most recent data (2017–2020) for the 24 countries based on the data available.

In crisis-affected countries, 42% of all teachers working in pre-primary settings are untrained, as are 18% of primary-level teachers and 20% of secondary-level teachers. Importantly, there are large differences among crisis-affected countries. While most crisis-affected countries have trained over 70% of teachers at the primary level, for example, just 22% of female and 26% of male teachers in Lebanon have the required minimum primary-level qualifications, according to the latest available data. In Madagascar, this figure is just 19% of female teachers and 11% of male teachers.

At the secondary level, although teachers make up a smaller proportion of the education workforce, they are generally more likely to be trained. Just three crisis-affected countries have a higher proportion of trained male teachers versus female teachers: In Mauritania, 95% of male teachers are trained compared to 75% of women; in Burkina Faso, 68% of men are trained compared to 66% of women; and in Ukraine, 99% of men are trained compared to 94% of women.

Research is scarce on the gendered dynamics of teacher qualifications and the gendered factors that influence this decision-making. The UIS data can only show us the picture for teachers who enter teacher training and are deployed by national education systems, not those working in non-formal education settings outside of national data collection exercises. An additional challenge in interpreting this data on teacher training is the lack of international comparability. The data used to monitor trained and qualified teachers is based on national standards, which vary from country to country and lack international comparability. To support improved monitoring of this indicator, UIS has developed the International Standard Classification of Teacher Training Programmes (ISCED-T). Adopted in 2021, this framework allows for analyzing cross-nationally comparable statistics on teacher training programs and related teacher qualifications. UIS has prepared an implementation plan for ISCED-T that includes a data collection strategy and manual, and data collection began in late 2022 (International Standard Classification of Teacher Training Programmes, n.d.).

### 3.2.2. TEACHER QUALIFICATIONS

A second measure of teacher qualifications in the UIS database provides information about the proportion of teachers within national education systems who have at least the minimum academic qualification required to teach their subject. As with the data for SDG 4.c.1, generally, similar proportions of male and female teachers have the required qualifications among crisis-affected countries.<sup>11</sup> At the secondary level, there is no difference between the proportion of men and women with qualifications in eight crisis-affected countries,<sup>12</sup> and the difference is under 1% in 18 crisis-affected countries<sup>13</sup> of the 27 with data available. This suggests that men and women entering national teacher training have similar qualifications, which may disadvantage women in contexts where female retention through school has been lower and fewer reach end-of-school exams.

The proportion of teachers who are qualified varies. In Colombia, Mozambique, and Myanmar, over 90% of male and female teachers have the required qualifications to teach their subject. In Pakistan, the proportion of qualified teachers in primary education is as low as 62% for both men and women; in Lebanon, just 78% of women and 74% of men are qualified to teach their subject. In refugee and displacement settings, the academic profile of refugee teachers depends on the education levels and standards in their home country. For example, Syrian refugee settings have high numbers of university graduates, while refugee teachers in sub-Saharan Africa are typically secondary-level graduates who had no previous formal training as teachers (Mendenhall et al., 2018).

A survey of teachers in Kenya's Dadaab and Kakuma camps found that while 96% of national teachers in camp schools held at least a primary teacher education certificate (the minimum requirement to be a qualified teacher), over half of refugee teachers held no teaching qualifications (West et al., 2022). Female teachers generally held lower qualifications than men; 99% of the refugee teachers surveyed had completed at least secondary-level education, but only 41% of female refugee teachers had completed any postsecondary education compared to 69% of male refugee teachers. The proportion of refugee teachers who were female also fell as grade level taught increased, from 52% at Class 1 to just 6% by Class 8.

11 24 countries have data available for this indicator since 2017: Afghanistan, Bangladesh, Burkina Faso, Burundi, Chad, Colombia, DPRK, DRC, Djibouti, Eritrea, Ethiopia, Jordan, Madagascar, Malawi, Myanmar, Niger, Nigeria, Pakistan, oPt, the Philippines, Senegal, Uganda, Ukraine, and Zimbabwe.

12 Bangladesh, DPRK, DRC, Djibouti, Jordan, Niger, the Philippines, and Senegal

13 Bangladesh, Colombia, DPRK, DRC, Djibouti, Ethiopia, Jordan, Malawi, Madagascar, Mozambique, Myanmar, Niger, Pakistan, the Philippines, Senegal, Uganda, Ukraine, and Zimbabwe

The impact of teacher qualifications and training and support varies across contexts, and scarce evidence exists on the relationship between teacher qualifications and attrition. In contexts where teachers have relatively high qualifications, they may be more likely to leave teaching for another profession (Teacher Task Force, 2021a). However, some evidence from Zimbabwe suggests that less qualified teachers are more likely to leave the profession, as they often receive only short-term contracts and have little support.

### 3.3. FEMALE TEACHERS' EXPERIENCES IN THE WORKFORCE

Two key elements affecting how teachers experience their workplace are access to professional development opportunities and well-being. Data from LMICs and crisis-affected countries around access to professional development for teachers and teaching practice is quite fragmented, and the available data gives little indication of the relevance or quality of training. Concern with teacher well-being has increased since COVID-19, but many gendered elements play into whether women are able to experience a safe and supportive workplace.

#### 3.3.1. ACCESS TO TRAINING AND PROFESSIONAL DEVELOPMENT

UIS captures sex-disaggregated data on the percentage of primary and lower secondary teachers who have received in-service training in the last 12 months. This data comes primarily from the OECD Teaching and Learning International Survey (TALIS), the Trends in International Mathematics and Science Study (TIMSS), and PASEC's large-scale national assessments focused on student learning. Much of this data is based on national estimates, with participant countries tending to be OECD members or middle-income countries.

Three crisis-affected countries have had data available for this indicator at the primary level since 2017, with 2019 data from [the UIS database](#) showing that:

- In Pakistan, 67% of female teachers and 55% of male teachers had received training.
- In the Philippines, 86% of female teachers and 81% of male teachers had received training.
- In Türkiye, 53% of female and male teachers had received training.

Five crisis-affected countries have had secondary-level data available since 2017. According to this data, men are more likely to have accessed training in Georgia (96% for men and 95% for women teachers) and Türkiye (67% for men and 56% for women), but less likely in Jordan (71% for men and 76% for women) and Lebanon (83% for men and 87% for women), according to [the UIS database](#). Women are likely to face additional barriers to accessing training opportunities that involve travel, take place beyond school hours, or involve concentrated blocks of time due to their roles and responsibilities outside of school, such as childcare.

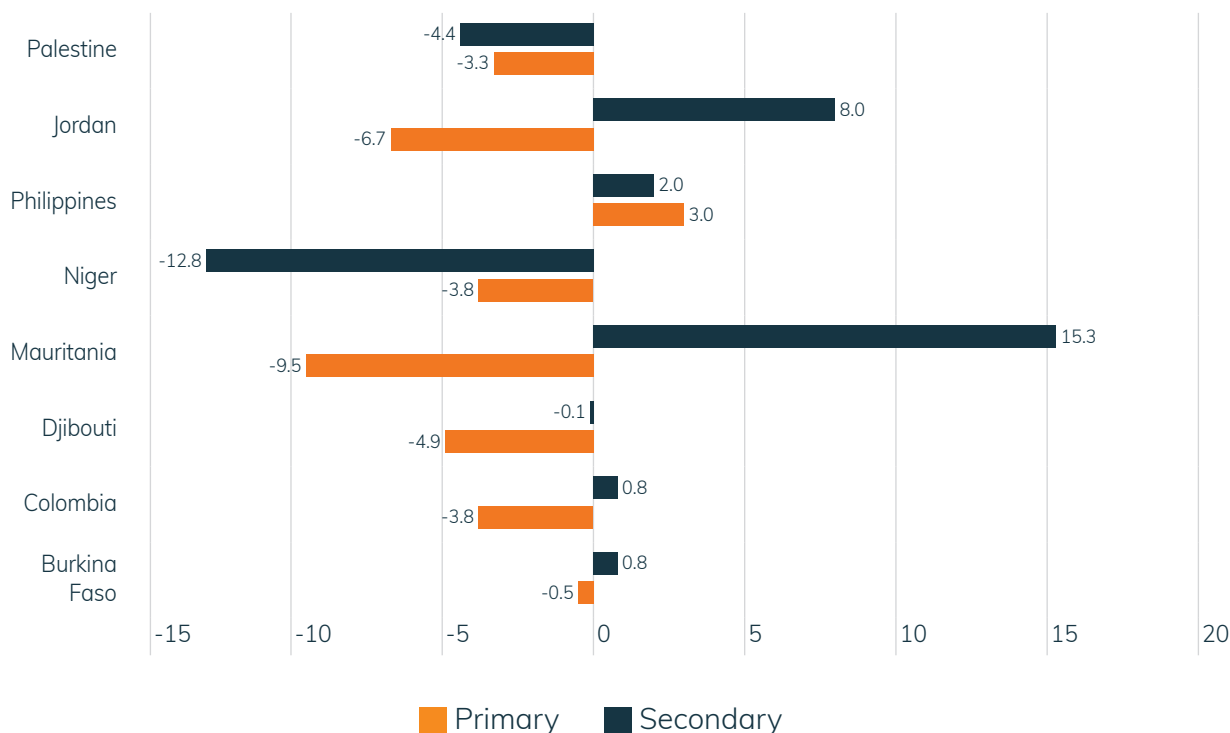
While access to teachers' professional development and training seems to be fairly equal for men and women within national education systems, this data does not cover teacher perceptions of the quality and relevance of training. PASEC (2020) data gives some insight into teachers' experiences in crisis-affected countries in Francophone Africa, with the analysis showing that teachers are mostly dissatisfied with the training and career advancement opportunities available to them (although this data is not sex-disaggregated).

There is little consistent, systematic data available on the training and professional development opportunities offered to refugee and internally displaced teachers. ECW (2022a) did report that it supported training for 38,869 teachers and administrators (47% female), and in 2021, the number of teachers trained on mental health and psychosocial support topics doubled, to around 54,000. ECW also notes an increase in projects measuring the impact of training in the classroom – almost 27,000 teachers (52% female) demonstrated an increase in knowledge, capacity, or performance in 2021 (ECW, 2022a). Notably, however, there are limited policies, opportunities, and pathways that enable refugee teachers to become nationally registered teachers, and their access to professional development is often limited to opportunities provided by NGOs (see Section 3.5.1).

### 3.3.2. TEACHER ATTRITION AND RECRUITMENT

Data on teacher attrition can also give us some insight into teachers' experience within schools and levels of satisfaction in the profession. UIS data shows wide variation among crisis-affected countries, although in most countries, the teacher attrition rate is higher among men at the primary level (shown as the negative values in Figure 7) and higher for women at the secondary level (shown as positive figures)., This is particularly true for Mauritania, where attrition at the secondary level is 15.3% higher for women.

**Figure 7. Percentage-point difference in teacher attrition in crisis-affected states (left=attrition higher for men; right=attrition higher for women)**



Source: Data retrieved February 2023 from [the UIS database](#); figures are based on the authors' own calculations from the most recent data (2017–2021) for eight crisis-affected countries with data available at the primary and secondary levels.

Research has highlighted factors within education systems that affect female teachers' working conditions and teacher retention, finding that teachers often leave the profession when conditions deteriorate. In crisis contexts, teachers' salary payments may be suspended, forcing them to find alternative sources of income; this may have a more severe impact on women. The UNESCO International Institute for Educational Planning [teacher toolkit](#) and the [Teacher Task Force](#) have put forward clear policy steps that countries can take to professionalize the teacher workforce and increase teacher recruitment and retention. These include increasing salaries; offering a package of benefits with housing, family benefits, and leave; and improving teacher deployment systems to ensure the equitable distribution of teachers according to school needs while also considering teachers' family responsibilities, disabilities, health needs, and ethnic minority status.

The complexities of national teacher recruitment processes can mean a pause in recruitment within national education systems or long waits between finishing initial teacher training and deployment. The Education Commission and EdTech Hub have drawn together the available research on teacher deployment and distribution to suggest promising approaches that policymakers could deploy to ensure teachers reach underserved areas; this includes the development of improved data systems, better modeling to optimize allocation and know where teachers are most needed, financial and non-financial incentives, and strong training partnerships (Education Commission, 2021). Turning to teachers recruited outside the national system (e.g., teachers recruited directly by schools into public or low-fee paying private and community schools), these educators may be working with less secure contracts, less pay, and less access to professional development, reducing the attractiveness of the profession and length of service.



Some international data is available around teachers' salary from UIS – which collates and presents data on average teacher salaries relative to other professions requiring a comparable level of qualification at the pre-primary, primary, lower secondary, and upper secondary education levels, although the data is not sex-disaggregated. For crisis- and conflict-affected countries considered in this report, this data is only available for Burkina Faso, Cameroon, Myanmar, oPt, and the Philippines, with the most recent data from 2020.<sup>14</sup> In these countries, teacher pay is higher than comparable professions at the primary level, and teachers are better paid at the secondary level; at the upper secondary level, teacher pay is 2.2 times that of equivalent professions in Burkina Faso and 1.6 times that of equivalent professions in oPt, according to the [UIS database](#).

The situation is more complex in many crisis-affected contexts. This is particularly true where suspended salary payments and schools coming under attack mean that teachers aren't receiving the wages needed to provide for their families. Being reliably paid a regular salary that reflects their efforts is vital to attracting and retaining teachers and is reflected in the [INEE Minimum Standards for Education in emergencies](#).<sup>15</sup> In humanitarian and camp contexts, refugee teachers are often paid a small "incentive" funded by UNHCR rather than a salary, which is much less than a national teacher working in the same context would receive. "Incentive" teachers often have little or no opportunity to progress or be paid more; research in Ethiopia showed that even refugee vice-directors of schools earn the same as other refugee teachers (Bengtsson & West, 2019). Reforms are underway in some contexts to pay a meaningful bonus to the teachers working in the most remote schools to incentivize them to stay or move into hardship schools. In Malawi, for example, reforms will mean a monthly allowance of US\$35 (equivalent to around a third of the average teacher salary) to teachers working in the most remote schools, which is expected to lower the pressure for teachers to avoid remote postings (Asim, 2019).

### 3.3.3. TEACHER WELL-BEING

Teachers working in crisis-affected contexts often experience the same disruptions, violence, and displacement their learners do, and while these teachers work hard to support their learners' psychosocial needs, they rarely receive adequate support themselves. Until recently, little attention was paid to the well-being of teachers in low-resource or crisis-affected contexts, who often take on multiple roles and non-traditional responsibilities to address learners' diverse and complex needs.

The COVID-19 pandemic brought many concerns about teacher well-being into focus, and many teacher surveys with elements on well-being were conducted during periods of school closures and reopenings. Recent international research has found that teachers felt overwhelmed by the pandemic and experienced increased workloads, changing job requirements, and demands to make up lost instructional time as schools reopened (UNESCO & International Association for the Evaluation of Educational Achievement, 2022; World Bank, 2021). Policy targets have been developed to train teachers in remote pedagogies and on including socio-emotional learning in their pedagogy. Still, little ongoing attention is being paid to the well-being and mental health needs of teachers themselves.

In areas experiencing violence, recruiting and retaining female teachers can be highly challenging even when qualified women are available within the population. Women are subject to greater harassment and exploitation during conflict and face gendered threats to their security in insecure areas (Mendenhall et al., 2018). Female teachers are more likely than male colleagues to be victims of discrimination and/or GBV in their work environments and may face violence on their journey to school (INEE, 2021c). Women also may not be posted to more remote locations due to insecurity and fears over safety, as one educational official in Kenya described: *"The furthest I can post a female teacher is Letea and Makutano area and along the road to Lokichogio where they can get a house. In Nanaom, we have houses but cannot take a female teacher due to insecurity"* (West et al., 2022).

Gender is also a significant factor for teacher well-being when we consider women's role as the primary caregiver, which remains the case within the patriarchal structures that still dominate crisis-affected countries. Women teachers need to balance caring for their families with their work as teachers. They may not have the time to prepare for lessons or be focused in class when they are worried about re-

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<sup>14</sup> The UIS method for calculating this data is based on the statutory salaries of teachers with 15 years of experience with typical qualifications. More details about the data and calculation method can be found at <https://uis.unesco.org/node/3297548>.

<sup>15</sup> The INEE Minimum Standards state that teachers and other education personnel should be adequately compensated and that this compensation should be provided on a regular basis and related to the level of professionalism and efficiency of work.

sponsibilities within the home (Kirk & Winthrop, 2013), and policies around maternity leave and child-care may also be inadequate (Falk et al., 2019). Research in Liberia, Tanzania, Togo, and Uganda found considerable barriers for women to enter and remain within teaching, including additional needs around safe housing and gendered roles and responsibilities related to care; women “face more intensely than men the harsh environments of rural areas characterized by restricted electricity and water, limited access to healthcare, sporadic access to markets and insufficient housing” (Stromquist et al., 2017).

The *INEE Guidance Note for Teacher Wellbeing* gives advice on how to support teacher well-being based on the five domains of the *INEE Minimum Standards*. The note grounds itself in three interrelated principles of teacher well-being – 1) promote teachers’ access to mental health and psychosocial support; 2) create enabling work environments for teachers; and 3) enhance teacher voice, agency, and leadership – and provides practical strategies that organizations can adopt to support teacher well-being across these domains (INEE, 2022a). The Refugee Education Council’s work also emphasizes the importance of well-being and access to appropriate services to create safe school environments. A central part of the council’s vision for quality lifelong education is equipping schools with trained counselors and ensuring all educators and staff receive training on how to identify trauma, respond to learners’ mental health needs, and address prejudices based on country of origin to create a safe learning space for all (see Case Study 2 in Annex 1).

“It makes me sad to know that many of my students don’t see school as a safe space where no one can harm them. I see how most will sit at the edge of their chairs and panic at the smallest mistake. When I asked why, they told me that it is because they are ready to run. It’s something they have done during most of their childhood and early teenage years....

“We need to provide more opportunities to grow and have professional development and support. I really crave for an opportunity where I can gain the skills to help the students, where I can develop professionally so that I can help students with psychosocial support and their trauma, where I know if I see a student behave in a particular way, then I am able to be alert, to know that this person will need help. I am working extra hours but I don’t feel valued because my extra needs are not being met.”

—Christine Mwongera, Refugee Council member and teacher in Kakuma Refugee Camp, Kenya  
(interview with Mind the Gap report team, 2023)

### 3.4. WOMEN IN SCHOOL LEADERSHIP

School leadership is an important influence on school climate and teacher well-being (Wolf et al., 2015) and has long been identified as a powerful lever to improve the quality of teaching and learning worldwide. School leader practices are also important for cultivating teacher identities and facilitating professional development in high-income contexts. Hattie (2015) and Robinson et al. (2009) point to the great impact of instructional leadership and the development of collective teacher efficacy on learning outcomes.

A recent research partnership by *UNICEF Office of Research – Innocenti*, *UNESCO International Institute for Educational Planning*, and the *Gender at the Centre Initiative* has drawn together much of the available research on the importance and impact of female school leaders (Bergmann et al., 2022). A study from Mozambique showed that female-led schools have lower drop-out rates than male-led schools, and research during COVID found that female school leaders reported being better able to support their school community’s well-being (Global School Leaders, 2021). UNICEF Office of Research – Innocenti’s Time to Teach research suggests that female school leaders are more likely than male school leaders to actively encourage school attendance and use sensitization strategies to make teachers aware of how their attendance influences student outcomes (Jativa et al., 2022). Additionally, the Education Equity Research Initiative teacher well-being landscape analysis demonstrates how even small gestures of recognition, like a soda, from school leadership can motivate teachers working in highly challenging circumstances (Falk et al., 2019).

“For instance...I woke up at 5 for the purpose of making these learners come to class. So if they [school leaders] come and say, take a soda, appreciate me, reinforce me by giving me something small. It makes me feel so good and therefore the following day, I’ll be motivated.”

— Ugandan refugee secondary school teacher working in Kakuma Refugee Camp, Kenya (USAID, 2019)

Despite women’s increasing representation in the teaching workforce over the last two decades, women generally remain underrepresented in school leadership, according to the available data from sources such as PASEC and Southeast Asia Primary Learning Metrics (SEA-PLM) (Bergmann et al., 2022).<sup>16</sup> SEA-PLM collects information about school principal characteristics for Southeast Asian countries, including gender, age, and highest qualification. The SEA-PLM average for the learners attending primary school with a female head is 44%, although the most recent report shows some exceptions; for example, 66% of Grade 5 learners in Myanmar attend a school with a female head (ACER, 2021).

PASEC is conducted in Francophone African countries, with 14 countries participating in the 2019 survey.<sup>17</sup> PASEC includes data on the characteristics of school principals, and the 2019 survey found that the vast majority of learners attend schools where the principal is a man: 88% of school leaders were men in Chad, 86% in Burkina Faso, and 89% in Senegal. Madagascar was the sole outlier, with 54% of school principals being female (PASEC, 2020). Data analysis in the PASEC report found that learners in a school with a female principal performed better in reading and mathematics, with eight countries having a significant difference in reading (Benin, Burkina Faso, Cameroon, Côte d’Ivoire, Madagascar, Niger, Senegal, and Chad) and six having a significant difference in mathematics (Benin, Burkina Faso, Cameroon, Côte d’Ivoire, Madagascar, and Senegal).

Research in Ethiopia found that women face a range of barriers to entering school leadership, including required training programs being held in the summer, making it hard for women who are primary carers in their families to attend; the use of non-merit-based criteria for selection and recruitment; and a lack of support from woreda,<sup>18</sup> zonal, and regional education officials (Biyabeye, 2016). Additionally, Wakshum’s (2014) research found barriers included gender stereotyping, with views that female leaders are not as good as men, as well as individual and family factors, such as fears about balancing work and family responsibilities and the absence of family support. Across many low-resource and crisis-affected contexts, national structures and policy have viewed school leadership as largely an administrative function – focused on resource management and attendance, for example – and additional support is required to develop the skills and mindset needed to fully support teachers’ well-being, their professional development, and by extension, children’s learning.

### 3.5. PROMISING PRACTICES TO SUPPORT FEMALE TEACHERS: RECRUIT, SUPPORT, PROMOTE

Worldwide, countries are grappling with the need to recognize and treat teachers as specialized professionals and to address the challenges of poor working conditions and low retention rates in order to address the teacher crisis (Hwa & Pritchett, 2021; Tournier et al., 2019). Removing barriers for female teachers to enter, remain, and progress through the teaching profession in crisis-affected contexts requires a detailed, contextual understanding of the factors at the individual and interpersonal, community, and policy levels that must be tackled. Underpinning the measures outlined in this section is the need to counter gender stereotypes and bias that concern childcare responsibilities and education – this includes targeted efforts to encourage more men to work in primary and pre-primary teaching (UNESCO & Teacher Task Force, 2020).

16 The Teaching and Learning International Survey (TALIS) also collects data on school leadership, but among the crisis-affected states considered in this report, only Georgia and Türkiye take part in TALIS.

17 Benin, Burkina Faso, Burundi, Cameroon, Côte d’Ivoire, Congo, DRC, Gabon, Guinea, Niger, Madagascar, DRC, Senegal, and Chad

18 Woredas are the third level of administrative structure in Ethiopia after zones and regional states.

### 3.5.1. GENDER-SENSITIVE RECRUITMENT AND IMPROVED WORKING CONDITIONS

Measures such as scholarships and stipends to support women entering and remaining in teacher training programs are important steps to increase the number of qualified female teachers. Incentives such as housing allowances and stipends, alongside policy changes to increase local recruitment, can increase the number of women willing to work in rural or remote areas. Additionally, access to professional development opportunities and support to build leadership skills and competencies may increase the attractiveness of the profession, reduce attrition, and increase the number of female teachers promoted into leadership positions.

In crisis-affected contexts, steps taken by a number of education systems to support national and refugee female teachers show promise in tackling barriers through improved working conditions. UNHCR's (2022) guidance on recruiting and managing refugee teachers in camp settings emphasizes the importance of investing in teachers as professionals who are developing skills and experience and ensuring transparency in recruitment policy and compensation. These actions are part of a wider call to bring refugee children, youth, and teachers into national education systems in order to ensure teacher quality, school infrastructure, financing, and access to education materials and resources are the same for everyone.

The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) Gender Equality Strategy introduced a series of “special measures about recruitment procedures that are being utilized to ensure that more female candidates are considered for and appointed to senior positions” (UNRWA, 2021) to help fill an identified gender gap in senior leadership. UNRWA set a target of 50% of senior staff positions being held by women, building on a baseline of 26% in 2018 (Bengtsson et al., 2021). Turning to Somalia, the Somalia Education for Capital Development Project (2021–2026) aims to recruit over 300 female teachers and prioritizes female teachers' access to professional development. Following analytical work to understand the constraints and barriers to women joining the teaching workforce, the project will make policy recommendations to address these constraints (World Bank, 2021). Experiences from Kenya and Uganda also demonstrate some measures that can be taken (see Box 1).

#### Box 1: Support for female refugee teachers in Kenya and Uganda

In Kenya, a range of actors have been working to support female refugees entering and remaining in the teaching profession. For example, the Dadaab Education Strategy 2016–2020 supported girls in the community to reach the qualifications needed to train as teachers. Additional tutoring was provided for girls in their final year of secondary school, alongside ensuring girls interested in teaching could access and maximize teacher training instruction. Additional incentives included providing childcare in schools and ensuring accessible career structures (West et al., 2022). Additionally, the Kenya Equity in Education Project (or KEEP, 2017–2023) worked in Dadaab and Kakuma refugee camps and with host communities. Supported by the Girls' Education Challenge and implemented by World University Service of Canada, KEEP set gender quotas and delivered training to teachers and local government officials responsible for teacher supervision and professional development (Rothman & Rious, 2022).

In Uganda, the EIE-GenKit pilot aimed to change social norms and values through increased gender parity in the community structures engaged with education, such as parent-teacher associations and school management committees. As norms changed, school improvement plans became more responsive, and actions were taken to improve conditions for female teachers, such as an increased number of teacher houses, safe transport options for female staff, and the deliberate relocation of pregnant and lactating mother to a nearby town to ease access to medical service (ECW, 2022c).

Incentives for female teachers working in remote areas are another way to support recruitment and retention. For example, in Yemen, women account for only 8% of teachers in rural areas compared to 46% in urban areas the lack of female professionals in many spheres, including education reduces Yemenis women's opportunities to learn and thrive (UNICEF Yemen, 2021). The [Restoring Education and Learning \(or REAL\) project](#), funded by the World Bank and Global Partnership for Education, in-

volves rehabilitating schools as well as providing financial incentives to female teachers working in very remote areas. In the 2021–22 school year, for example, the project provided a monthly US\$125 salary and training allowance to over 2,100 rural female teachers (UNICEF, n.d.).

Monitoring has shown that female teachers' presence significantly benefits girls' enrollment and attendance. ECW's current multi-year resilience program in South Sudan aims for the proportion of qualified female teachers to reach 94% in primary schools and 100% in secondary schools. To achieve this, program partners will conduct a recruitment campaign that targets women for volunteer roles, will consider financial and in-kind incentives, and will prioritize women for professional development opportunities, including visits to connect with role models and peers and also female teacher circles to provide a base of support and encouragement (ECW, 2023a).

### 3.5.2. ACCESS TO PROFESSIONAL DEVELOPMENT AND SUPPORT FOR WELL-BEING

Teachers who are refugees, and in refugee settings, themselves need access to ongoing professional development in order to become nationally recognized as qualified teachers. In Kenya, for example, a 2021 survey found that while 99% of refugee teachers surveyed had completed secondary education, less than 40% of teachers held a professional teaching certificate (West et al., 2022). UNHCR (2022) has recommended developing professional pathways for refugee teachers that are on par with those of national teachers. These pathways are not always in place, although some countries have made good progress. For instance, Chad includes refugee teachers in national teacher training and coaching initiatives, refugee teachers have access to national training centers, and newly arrived refugee teachers in camp schools are immediately trained to teach the Chadian curriculum to refugee children (UNHCR, 2022).

Access to ongoing, comprehensive professional development for all teachers is essential to building their motivation, confidence, and commitment to teaching through developing and expanding skills and knowledge in the classroom. This is particularly true for untrained refugee teachers. The development of materials, programming, and training to support teacher well-being and psychosocial health is growing within organizations working in crisis-affected countries. INEE's (2022c) [mapping of teacher well-being and gap analysis](#) collected existing resources, tools, policy, and advocacy addressing teacher well-being in emergency settings and mapped these across the socio-ecological model of teacher well-being described in Section 3.3. The mapping highlights the importance of developing tools and materials that respond to the needs of teachers themselves, recognize teachers' individual characteristics (such as gender, disability, and displacement or refugee status), and are contextualized to recognize how the nature of well-being is culturally determined – and that emergency settings require distinct approaches.

*“At the beginning it was very, very hard dealing with these kids, because there was a lot of violence we couldn't handle it and in our team none of us studied education or psychology, all of us were very new to this field ... I remember the first time when [the trainer] came she told us about the classroom rules and I worked very hard to make this a success in my class and I love it – it changed my life.”*

—Hiba, a Syrian refugee working as a teacher with refugee learners in Lebanon (INEE, 2021b)  
The full interview is available in “Episode 6: Teachers – The Backbone of Education” of INEE's podcast [Educate Us! Women and Girls on Learning in Humanitarian Crises](#).

A first step in creating effective and appropriate resources is asking teachers themselves what they need, and what their challenges and priorities are, to facilitate the development of high-quality materials and programs. Leveraging the support of school leaders, ongoing access to professional development, and a supportive policy environment are all important to sustain improvements in teacher well-being. [The Quality Holistic Learning Project](#) by Childhood Education International is one example of working with teachers and key education stakeholders to create targeted and highly relevant professional development materials for teachers. The pilot project worked with teachers from Kenya, Niger, Lebanon, and Chad to develop resources that helped educators feel prepared to work with refugee, displaced,

and vulnerable learners. It had a significant impact on changing instructional practices (McKnight et al., 2022). As another example, the [Refugee Education Council](#) brings together the voices of teachers and those who have experienced refugee education to drive and influence decision-making (see Box 2).

### **Box 2. Refugee Education Council: Voices for teacher support and well-being in crisis-affected contexts**

The Refugee Education Council, hosted by World Vision Canada, brings together young leaders from Latin America, sub-Saharan Africa, the Middle East, and Asia. The council's 15 members are youth advocates, community leaders, teachers, and parents with vast experience and knowledge related to global refugee education.

The council was created in 2021 in collaboration with the Canadian International Education Policy Working Group. In its first year, council members participated in a range of strategic dialogues, events, and trainings; engaged with high commissions; and held a virtual event for World Refugee Day 2021, where they called for including refugee and displaced learners across social identities and at all levels of decision-making processes.

The council has developed the [Together for Learning Youth Manifesto](#) and call for action, which is underpinned by five core themes: inclusion, mental health and psychosocial support, digital learning, gender equality, and accountability. Key recommendations include:

- Recognize teaching qualifications of refugee educators to enable them to teach learners in the host country.
- Improve the collection of data disaggregated by social identity factors (e.g. gender, sexual orientation, and ethnicity) on refugee and displaced youth experiences to better equip teachers, schools, civil society organizations (CSOs), and government partners in responsive, evidence-based decision-making.
- Equip schools with trained counselors and ensure all educators and staff receive training on how to identify trauma, respond to students' mental health needs, and address prejudices based on country of origin to create a safe learning space for all (Refugee Education Council, 2023).

Refugee Education Council member Christine Mwongera described the importance of access to professional development and support on well-being for teachers working in crisis-affected contexts:

*Teachers think, "I wish I had these skills." So, what I think is that we can provide opportunities where if a person is a teacher, let them feel that, "Not only am I going to share my skills and my knowledge learned at the end of the university, but at the end of the day, I am enjoying myself, able to provide...I am stable, and mentally, I feel that my well-being is cared for"*

*For full details, see Case Study 2 in Annex 1*

### **3.5.3. DEVELOPING ALTERNATIVE ROLES IN EDUCATION AND ROUTES INTO TEACHING**

In many settings, new and innovative education roles can be a way of increasing the number of female educators and offering a route into teaching for women who do not meet the qualifications to enter national teacher training colleges. Alternative pathways to education, such as community-based and home-based education, are means for many children with disabilities to access education. However, this kind of provision shifts the focus away from removing barriers to accessing mainstream education and improving education systems, and it is vital that systems are in place to ensure these systems' quality and equivalency. For instance, the Swedish Committee for Afghanistan provided inclusive education training to community-based educators in Afghanistan, and children who had mobility difficulties were enrolled in regular schools but received education and rehabilitation services at home (Grimes & dela Cruz, 2021).

Programs like these have the additional benefit of supporting girls' education, particularly in rural and remote areas, and increasing the number of girls who reach the end of secondary school – and the possibility of entering teacher training. This can include specialist roles for women teachers. Uganda's

Ministry of Education and Sports introduced the “senior woman teacher” role, with these educators receiving specialist training and ongoing support to enable them to play a central role in empowering female learners. The role includes acting as a child protection focal point, as well as providing pastoral support and coordinating activities like girls’ clubs. Evaluation of a pilot coordinated by Promoting Equality in African Schools found that engaging with senior women teachers increased a girl’s chance of developing reading and writing skills by 264%, and girls reported that senior women teachers helped them feel like school was a safer learning environment (Sikes et al., 2021).

Teaching teams are another way to help increase the number of educators when there is an undersupply of qualified teachers. For instance, when limited education opportunities meant few qualified teachers among the refugees in Cox’s Bazar, Bangladesh, UNHCR trained Rohingya refugees as teaching assistants so they could work in the classroom alongside Bangladeshi teachers (UNHCR, 2020).

*“When we see the gender parity index in the refugee camp, more than 95% of the incentive teachers are male. So, we try to have female assistants to promote gender equity and support girls in the classroom set-up. So, we decided to make assistant teachers only female to address to gender disparity among teachers, and also those gaps, with a different challenge faced by girls, who might be too shy to express their feelings, their experiences with their male teachers. So...the female assistant is also supporting the gender equity in the class, also the girls are considering them as a role model.”*

*—Plan International federal-level respondent describing teachers and teaching in the refugee camps in Ethiopia’s Gambella region (Bengtsson et al., 2020)*

Another program providing alternative routes to a professional teaching qualification is the Girls’ Access to Education program in Sierra Leone. Led by Plan International and funded by the Girls’ Education Challenge, the program works with local communities to recruit young women who have been unable to complete secondary school to become learning assistants. Learning assistants undertake a work placement with a local primary school and receive support through a distance learning program before applying to teacher training college. Research on the program’s impact found a transformative change for learning assistants (including better self-esteem and confidence) and for communities, which began viewing learning assistants as a highly regarded group of local women (Crisp et al., 2017). An important element of these programs is engaging with communities in teacher recruitment, ensuring that the community supports the teacher, and ensuring the teacher feels protected and valued by the community. Similarly, the Steps Towards Afghan Girls’ Education Success (STAGES) in Afghanistan established community-based education centers that trained women from the community to deliver education to girls. Some of the women trained by the program went on to qualify as teachers (Girls’ Education Challenge, 2019).

Both these programs removed any financial barriers to training, paying stipends during training and salaries once hired – which is key to ensuring community and household support for women working as teachers. One route to improving sustainability in these programs could be offering a recognized and transferable qualification. For instance, a CAMFED program in Ghana, Malawi, Tanzania, Zambia, and Zimbabwe trained “learner guides” to receive an internationally recognized Business and Technology Education Council (BTEC) qualification. Learner guides reported this helped improve their access to job opportunities, acquire additional skills, and access higher levels of education, including teacher training (Paul Musker and Associates & CAMFED International, 2022).

### **Box 3. Education in emergency and COVID-19 impact mitigation for Rohingya refugees and host communities**

The Education in Emergency and COVID-19 Impact Mitigation project is delivered by Plan International Bangladesh and funded by the Spanish Agency for International Development Cooperation (AECID). The project's second phase sought to strengthen access to learning opportunities for children and adolescents from crisis-affected refugee and host communities. It recruited and trained 26 female learning facilitators, who made a room available in their homes to establish learning spaces for boys and girls. The project worked very closely with community and religious leaders to help recruit in a society with strong social and cultural barriers to women's work.

The final external evaluation of the project showed it had made a direct difference in the lives of the most vulnerable children and their families in both the host community and the Rohingya community. The evaluation also found long-term impacts for the female facilitators themselves, who developed their skills/capacity and moved into positions with other organizations. Other Rohingya girls and adolescents saw the facilitators as role models who transgressed social norms, which may have encouraged them to attend and stay in school and to become teachers someday. The presence of female facilitators has also had a direct positive impact on improving girls' knowledge about menstrual health and SRH and menstrual management (Datascape, 2022).

For full details, see Case Study 1 in Annex 1.





## CHAPTER 4: GIRLS WITH DISABILITIES AND INCLUSIVE EDUCATION

### Key findings

- Girls with disabilities face multiple, intersecting barriers in both access to school and learning. As many as 33 million children with disabilities in LMICs are not in school, and children with disabilities are uniquely vulnerable to being denied an education when their support systems are affected by crisis or conflict.
- There has been significant progress in the availability of data about children with disabilities and their experience of education, due largely to the large-scale adoption and adaptation of the Washington Group Questions. However, there is still a long way to go to achieve high-quality, systematic international data. Girls with disabilities can be invisible in and excluded from data collection – making the need to further improve and extend data and research all the more urgent.
- There has been progress in the number of schools with some accessibility adaptations, but more is needed to ensure adaptations meet the needs of girls within their communities.
- Policy on and commitments to inclusive education must be supported with high-quality teacher training and continuous professional development related to inclusivity, as well as the development of holistic systems that facilitate disability inclusion.
- More research is needed to understand what inclusive and gender-sensitive education provision is most effective to improve the experiences – and ultimately, learning – for girls with disabilities.

Children, and especially girls, with disabilities are in danger of continuing to be left behind. International estimates suggest that 1.3 billion people (16%) are living with a disability globally (WHO, 2023). Nearly 240 million children – one in every 10 – worldwide have disabilities (UNICEF, 2021b), and as many as 33 million children with disabilities in LMICs are not in school (Education Commission, 2016).

Children with disabilities are uniquely vulnerable to being denied an education when their support systems are affected by conflicts and disasters. Conflicts and disasters may cause some children to acquire a disability due to physical injury, malnutrition, or preventable conditions, such as tuberculosis (Inclusive Development Partners, 2023). People with disabilities have often been excluded from humanitarian response efforts, and many humanitarian actors fail to consult with people with disabilities and organizations of persons with disabilities (OPDs) (UN OCHA, 2016).

These challenges are exacerbated for girls with disabilities, who often face multiple forms of discrimination. Girls with disabilities are a diverse group who experience a wide range of disabilities, and factors like age, sex, gender identity, sexual orientation, ethnicity, and economic situation all affect their experiences in life. This means they carry different levels of stigma and require different types of accommodations (WHO, 2023). Girls with disabilities may face cultural bias related to rigid gender roles, which act as barriers to education; this may include the assumption that girls with disabilities are not expected to work or marry, meaning they do not need education (Leonard Cheshire Disability, 2017). Girls with disabilities are more likely to be bullied and harassed, and they experience higher rates of GBV than their peers (UN OCHA, 2016), causing families to resist sending daughters with disabilities to school because of fears for their safety (Leonard Cheshire Disability, 2017).

When in school, girls with disabilities are less likely to learn. A UNESCO analysis of national census data found that the adult literacy rate for adults with disabilities is lower than for other adults in all countries studied. The gap ranged from 5% in Mali to 41% in Indonesia, where the vast majority of adults without disabilities (93%) have basic literacy skills compared to only half (52%) of adults with disabilities. In the majority of countries, men with disabilities have higher literacy rates than women with disabilities; the widest gap is in Mozambique, where 49% of men with disabilities can read and write compared to 17% of women with disabilities (Rousso, 2003).<sup>19</sup>

High-level policy commitments have increasingly recognized the barriers to education for girls with disabilities, with growing support and consideration of what is needed to remove these barriers. The UN Convention on the Rights of Persons with Disabilities (CRPD) states that inclusive education is a right, and many of the national commitments made during the 2022 Global Disability Summit concern tackling the intersecting forms of discrimination experienced by women and girls with disabilities, engaging women and girls as agents of change, and accelerating action toward inclusive education (The Disability Summit, 2022). Additionally, the 2022 Transforming Education Summit resulted in a [call to action](#) on inclusive and equitable quality education through increased budget allocations for disability-inclusive education, setting a target to reach all learners with disabilities, and ensuring that all education programs include disability-inclusion criteria and targets. The World Bank has begun to take the lead on some of these measures through commitments to ensuring all education projects and programs are disability-inclusive by 2025. This, along with the investments made by the [Disability-Inclusive Education in Africa Program](#) and [Inclusive Education Initiative](#), are important accelerators of disability-inclusive education programs.

In 2022, ECW launched its first-ever [policy and accountability framework on disability inclusion](#) to systemize ECW's work on disability inclusion and thus ensure the fund can reach 10% of children with disabilities across its portfolio (ECW, 2022b). The recent [gender implementation guide for ECW staff and partners](#) encourages grantees to take an intersectional approach to gender and disability inclusion by paying particular attention to identifying and addressing the specific needs of girls with disabilities. ECW has also initiated a new [partnership with the International Disability Alliance](#); the 36-month Acceleration Facility grant will fund the acceleration of equitable-inclusive education through partnerships with OPDs at the local and global levels.

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<sup>19</sup> This analysis draws on a range of population census data; the included data did not use the Washington Group Questions to identify persons with disabilities. This analysis used the most recent available data for each country.

## Box 4. Definitions and terminology<sup>20</sup>

**Disability:** CRPD describes **people with disabilities** as including those who have “long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others” (United Nations Office of the High Commissioner for Human Rights, 2006). A range of terminology is used in literature, data, and practice to provide a framework for explaining what disability is and how people with disabilities experience disability. Children with disabilities include those with physical, sensory, developmental, and cognitive conditions. People with disabilities are an extremely varied group, including people with different impairment types, ages, genders, ethnicities, living situations, and other factors that influence and impact the experience of disability.

**Disability-inclusive education:** Disability-inclusive education “means ensuring that informational, environmental, physical, attitudinal and financial barriers do not inhibit learners with disabilities from participating in education. Achieving quality disability-inclusive education in emergency and crisis-affected contexts depends on: requiring all schools and facilities to meet minimum standards of accessibility, including in emergency settings; investing in teacher training that will equip all teachers to respond to diversity in the classroom and disability inclusion in particular; ensuring that teaching and learning materials/resources are available in accessible formats and are easily adaptable for specific types of disabilities; investing in assistive technology and devices for children with disabilities; and insuring the involvement of OPDs in education planning and monitoring” (INEE, n.d.b).

**Disability-inclusive education systems:** According to CRPD General Comment No. 4, governments must establish system reforms for children with disabilities, which requires viewing education as a lifelong process and paying particular attention to early childhood development. This will involve a range of interventions at different levels with different stakeholders, including reviewing and updating education policies, teacher standards, and curriculum; developing the capacity of different stakeholders; addressing stigma and discrimination; and strengthening various services (United Nations Office of the High Commissioner for Human Rights, 2016). Functional difficulties are difficulties a person may have in undertaking basic functioning activities – widely considered to include vision, hearing, mobility, cognition, self-care, and communication (Washington Group on Disability Statistics, n.d.a).

This chapter first considers how the availability of data on educating children with disabilities – and particularly, girls with disabilities – has developed and what commitments are in place to improve data collection and analysis. It then explores the availability of data to capture the experience of, and barriers to, education that girls with disabilities face in crisis- and conflict-affected countries. The chapter then looks at the infrastructure available to support the education of girls with disabilities and the development of disability-inclusive education policy.

### 4.1. DEVELOPMENT AND AVAILABILITY OF DATA AROUND CHILDREN WITH FUNCTIONAL DISABILITIES

Many countries still do not collect, report, or use data on children with disabilities, let alone disability data that is sex-disaggregated. The lack of data around disability limits a country’s ability to plan and develop appropriate education policies or provide appropriate education. In emergency contexts, the lack of data contributes to exclusion. Data collection during an emergency is often impeded by limited humanitarian access and population movements, making detailed, up-to-date baseline data even more important (United Nations Economic and Social Commission for Western Asia, 2014). Measuring disability is complex, and no single definition can be applied across all cultural contexts (Cappa et al., 2015). Yet progress is being made, and in this section, we discuss some of the tools that have been developed to collect data disaggregated by disability and considerations for the data collection process.

<sup>20</sup> Throughout this chapter, we generally use the language of the source material, as concepts and language can be inconsistently applied.

Strides have been made in recent years toward a more consistent use of a social model that centers people with disabilities and defines disability as a failure of the policy, cultural, and physical environments to accommodate differences in function.<sup>21</sup> This has been accompanied by renewed efforts to use new tools and analysis to fill gaps in the availability and comparability of data on children with disabilities (UNICEF, 2021b).

Non-inclusive data collection techniques can lead to inaccurate, incomplete, or misleading evidence, including the underestimation and misidentification of children with disabilities. UNICEF guidance on inclusivity in data collection and the Inter-Agency Standing Committee guidelines stress that inclusion must be considered at all stages of a data generation project. This includes designing data collection instruments and protocols in a way that allows for disaggregating indicators by disability and ensures that people with disabilities, including children with disabilities, can participate. Producing inclusive data also demands that people with disabilities be involved in analyzing and disseminating the findings to ensure their experiences and needs are reflected. Inaccessibility in data collection could also be a barrier to participation in reading and numeracy assessment exercises: for instance, if a child requires accommodations or assistive technology to participate and these are not provided or available, the child would not be able to take part in the assessment (UNICEF, 2020a).

Available, accurate information on children with disabilities is essential for many reasons, as the [Washington Group on Disability Statistics](#) (n.d.b) describes: First, this information is vital to understand the prevalence, social circumstances, geographic location, and unmet needs of children with disabilities. Second, planning and developing inclusive education requires data on the barriers to education faced by children both physically and due to social attitudes and behaviors. Third, available, accurate data helps us understand the severity of disability and where children face multiple, intersecting disabilities. Fourth, this information is key to tailoring interventions to respond to the different needs of girls and boys with disabilities within the classroom. Overall, too, internationally comparable data is vital.

#### **4.1.1. DEVELOPMENT OF DATA COLLECTION TOOLS AND QUESTIONS TO IDENTIFY CHILDREN WITH DISABILITIES**

Great strides have been made in recent years to develop more reliable data and tools to collect internationally comparable data, which has resulted in a substantial increase in the available data on children with disabilities. The main objective of the Washington Group on Disability Statistics is to provide basic necessary information on disability that is internationally comparable. NGOs, OPDs, and international agencies widely use the Washington Group Questions (see Annex 3). The Washington Group recognizes that disability is a complex and dynamic process that presents considerable challenges for data collection, and it developed these questions to create disability measures and questions based on functioning areas that would be suitable for various national surveys.<sup>22</sup>

People with disabilities are able to respond to the questions themselves (i.e., self-identification),<sup>23</sup> and the questions can be used when parents and caregivers do not have information or knowledge about any medical diagnosis. Knowledge about diagnosis is often correlated with socioeconomic status, education, and access to health services, and so medical or diagnostic language is not used (UNICEF, 2021b). Additionally, the questions do not mention specific conditions because children with the same condition can have a wide range of functioning, and they avoid yes/no questions to help identify disabilities with reduced stigma.

The Washington Group has developed multiple, complementary versions of the tools and also [guidance](#) to help users match the tool they use with their intended use and collection methods for the data; the tools can also be combined with other data collection methods:

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21 The social model of disability can be defined as the identification of society as the force that disables people through designing services to meet the needs of the majority of people who do not have disabilities. "There is recognition within the social model that there is a great deal that society can do to reduce, and ultimately remove, disabling barriers. It is the responsibility of society to make adaptations to ensure access and participation for all citizens, rather than expecting persons with disabilities to adapt to a discriminating environment. Within this model, support for children with disabilities is directed toward identifying and removing barriers to access and participation" (Grimes & dela Cruz, 2021).

22 The Washington Group has also developed [translation guidelines](#) facilitating the use of the tool in different languages and contexts.

23 The Washington Group questions do not use the term "disability," as the meaning of this word can vary not only across cultures but also among people in the same culture; in some cultures, the terms are associated with shame or stigma. (See the [Washington Group's page](#) with more information about this decision and other frequently asked questions.)

- **Washington Group Short Set on Functioning:** The briefest tool, this set of six questions is designed for use in national censuses and surveys. Questions represent the basic actions that are most often found to limit an individual and result in participation restrictions, with one question per functional domain: difficulties seeing, hearing, walking or climbing stairs, remembering or concentrating, self-care, and communication (expressive and receptive). The response categories are structured as a scale: no difficulty, some difficulty, a lot of difficulty, and cannot do at all. The questions are designed for use with those ages 5 and older.
- **Washington Group Extended Set on Functioning:** This extended set of questions allows for the collection of additional data on domains of functioning not included in the short set, including affect (anxiety and depression), upper-body functioning, pain, and fatigue.
- **Washington Group Short Set on Functioning – Enhanced:** This short set is designed to capture additional domains of functioning not currently in the short set when the available space and/or resources prohibit the full use of the extended set of questions.
- **Washington Group/UNICEF Child Functioning Module:** In consultation with OPDs, the Washington Group and UNICEF developed this module for use in censuses and surveys. It has been integrated into the Multiple Indicator Cluster Surveys (MICS) and, in turn, Demographic and Health Surveys (DHS). Questions in the module were designed to identify difficulties in various domains of functioning among children according to a range of severity. Sets of questions have been developed for children aged 2–4 and for those aged 5–17 to reflect differences in individual development and the need for domains to be developmentally appropriate for small children (see Table 3). The module also includes questions on psychosocial functioning (e.g., to identify if children have difficulties expressing and managing emotions and controlling their behavior), addressing concerns with the Washington Group short set of questions. As with the other sets of questions, the degree of functional difficulty for each area is assessed according to a scale.

Notably, as the Child Functioning Module continues to roll out and be adopted by countries (including crisis-affected countries), the availability and quality of data around identifying girls with disabilities should increase. Integrating the module into EMISes would allow countries to collect regular data on functional difficulties that could be disaggregated and analyzed in a way that provides more information about the school experience for children with disabilities (UNESCO UIS, 2019a). Integrating the module into DHS in a more standardized way across countries would also improve the consistency of information available. However, many of these surveys don't include camp accommodation or displaced populations, meaning alternative data collection and research activities are needed to build a picture of girls living with disabilities in these circumstances.

**Table 3. UNICEF/Washington Group Child Functioning Module  
(adapted from UNICEF, 2021b)**

Data collected	Features
<p>Assess functional difficulties in children aged 2–4</p> <ul style="list-style-type: none"> <li>• <b>Seeing:</b> Difficulty seeing</li> <li>• <b>Hearing:</b> Difficulty hearing</li> <li>• <b>Mobility:</b> Difficulty walking</li> <li>• <b>Fine motor:</b> Difficulty picking up small objects</li> <li>• <b>Communication/comprehension:</b> Difficulty understanding or being understood</li> <li>• <b>Controlling behavior:</b> Kicking, biting, or hitting other children or adults</li> <li>• <b>Learning:</b> Difficulty learning things</li> <li>• <b>Playing:</b> Difficulty playing</li> </ul>	<ul style="list-style-type: none"> <li>• Two versions – one for children aged 2–4 and one for children aged 5–17</li> <li>• Designed for administration to mothers or primary caregivers</li> <li>• Intended for use in national household surveys</li> <li>• Incorporated into the latest round of MICS surveys</li> </ul>
<p>Assess functional difficulties in children aged 5–17</p> <ul style="list-style-type: none"> <li>• <b>Seeing:</b> Difficulty seeing</li> <li>• <b>Hearing:</b> Difficulty hearing sounds</li> <li>• <b>Mobility:</b> Difficulty walking</li> <li>• <b>Self-care:</b> Difficulty feeding or dressing themselves</li> <li>• <b>Communication/comprehension:</b> Difficulty being understood by people</li> <li>• <b>Learning:</b> Difficulty learning things</li> <li>• <b>Remembering:</b> Difficulty remembering things</li> <li>• <b>Attention and concentrating:</b> Difficulty concentrating on an activity they enjoy doing</li> <li>• <b>Relationships:</b> Difficulty making friends</li> <li>• <b>Coping with change:</b> Difficulty accepting change in their routine</li> <li>• <b>Controlling behavior:</b> Difficulty controlling their behavior</li> <li>• <b>Anxiety:</b> Seeming very anxious, nervous, or worried on a daily basis</li> <li>• <b>Depression:</b> Seeming very sad or depressed on a daily basis</li> </ul>	

In 2019, UNESCO UIS published a review of the use of UIS data in EMISes to monitor inclusive education. The report includes a review of 2015 EMIS census forms from 40 countries<sup>24</sup> and found that 19 had no data on learners with disabilities. Where data was included, it had often been collected using offensive terms, identifying only those with the most severe difficulties, using disability as a blanket term, or using medical diagnosis rather than a functional approach (UNESCO UIS, 2019c). UIS strongly recommends that countries move to the approach outlined by UNICEF in its [guide for including disability in EMISes](#), which includes guidance on using the short set of Washington Group Questions and emphasizes the need to collect data on physical and material barriers to learning. Monitoring SDG indicator 4a (“Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all”) requires measuring the number of schools with adapted infrastructure and materials for learners with disabilities, but this data is not widely available for crisis-affected countries (see Section 4.3.1).

In emergency, protracted conflict, and humanitarian situations, there are particularly large inconsistencies and gaps in the data available. Where data is available, it is unclear how it is being used by humanitarian actors (ECW, 2022b). Guidance on data collection, assessment, analysis, and planning is available for actors from a number of sources, including:

- [UNICEF has developed guidance](#) on strengthening disability inclusion in humanitarian response plans.
- The [INEE Minimum Standards for Education: Preparedness, Response, Recovery](#), developed in 2010, set out practical steps that can be taken toward the inclusion of people with disabilities.

<sup>24</sup> Bangladesh, Barbados, Belize, Bhutan, Burkina Faso, Cambodia, Cape Verde, Central African Republic, Chad, Côte D'Ivoire, DRC, Ethiopia, Gambia, Ghana, Grenada, Guinea, Guinea-Bissau, India, Jamaica, Lao People's Democratic Republic, Liberia, Malawi, Mali, Mauritania, Mozambique, Namibia, Nepal, Niger, Nigeria, Pakistan, Senegal, Sierra Leone, St. Christopher and Nevis, St. Lucia, St. Vincent and the Grenadines, Swaziland, Tanzania, Timor-Leste, Togo, and Uganda

- The *INEE Pocket Guide to Inclusive Education*, *INEE Pocket Guide to Supporting Learners with Disabilities*, and INEE's forthcoming *Disability-Inclusive Education in Emergencies Practitioners' Guide* and associated mapping provide quick reference guides to help practitioners make sure that education in emergencies is accessible and inclusive for everyone.
- *The Sphere Handbook* also makes a clear case for continuous data collection that includes sex, age, and disability disaggregation.
- The Inter-Agency Standing Committee's *Guideline on the Inclusion of Persons with Disabilities in Humanitarian Action* provide a number of "must-do" actions at all phases of humanitarian action when implementing inclusive education programming for people with disabilities. This includes actions to ensure participation, address barriers, and ensure empowerment and capacity development, as well as actions in data collection and monitoring.

#### 4.1.2. INCONSISTENT NATURE OF AVAILABLE DATA

While there has been progress in collecting data to identify disability and develop prevalence data, there is still a long way to go. Where countries have integrated the Child Functioning Module into national data collection exercises, publicly available reporting may still not be disaggregated by disability for education indicators. For example, Nigeria's most recent MICS report includes data on disability using the Child Functioning Module but does not disaggregate education indicators by disability (National Bureau of Statistics & UNICEF, 2022).

Different data collection tools must be used in addition to the Washington Group Questions to explore the "why" and "how," as well as more deeply explore the learning experiences of children with disabilities. The available data falls short of comprehensively capturing all the factors that impact a child's learning experience, and very little available data and research focuses on the educational experiences of girls with disabilities. The available data does not capture the barriers faced by girls, or members of other vulnerable groups, with disabilities or whether the support or adaptations made to school environments meet their actual needs. Thus, these forms of support or adaptation may not have been adequate or appropriate, and they may have had no bearing on their ability to access and benefit from education (UNICEF, 2021b).

In 2019, UIS published a database of the available data on the educational challenges faced by people with disabilities. The data shows that children with disabilities are less likely to go to school, more likely to be out of school, and more likely to have fewer years of education (UNESCO UIS, 2019b). The data also illustrates the marginalization experienced by women with disabilities, who are less likely than men with disabilities to have had a formal education. It also makes clear how limited the availability of data is and the challenges associated with it. For example, out-of-school rates for children of primary age are reported for only six countries worldwide – Cambodia, Colombia, Gambia, Maldives, Uganda, and Yemen – using their latest DHS surveys. Three of these surveys did not use any of the Washington Group sets of questions and might have used "disability" as a blanket term, included medical diagnosis, or added and removed categories (UNESCO UIS, 2019c). This use of different questions and categories is a serious challenge to meaningful comparisons of international data. An additional limitation of the international data is the inability to distinguish between children in mainstream schools and those in segregated or disability-specific schools and learning spaces.

## 4.2. ARE GIRLS WITH DISABILITIES ATTENDING SCHOOL AND LEARNING?

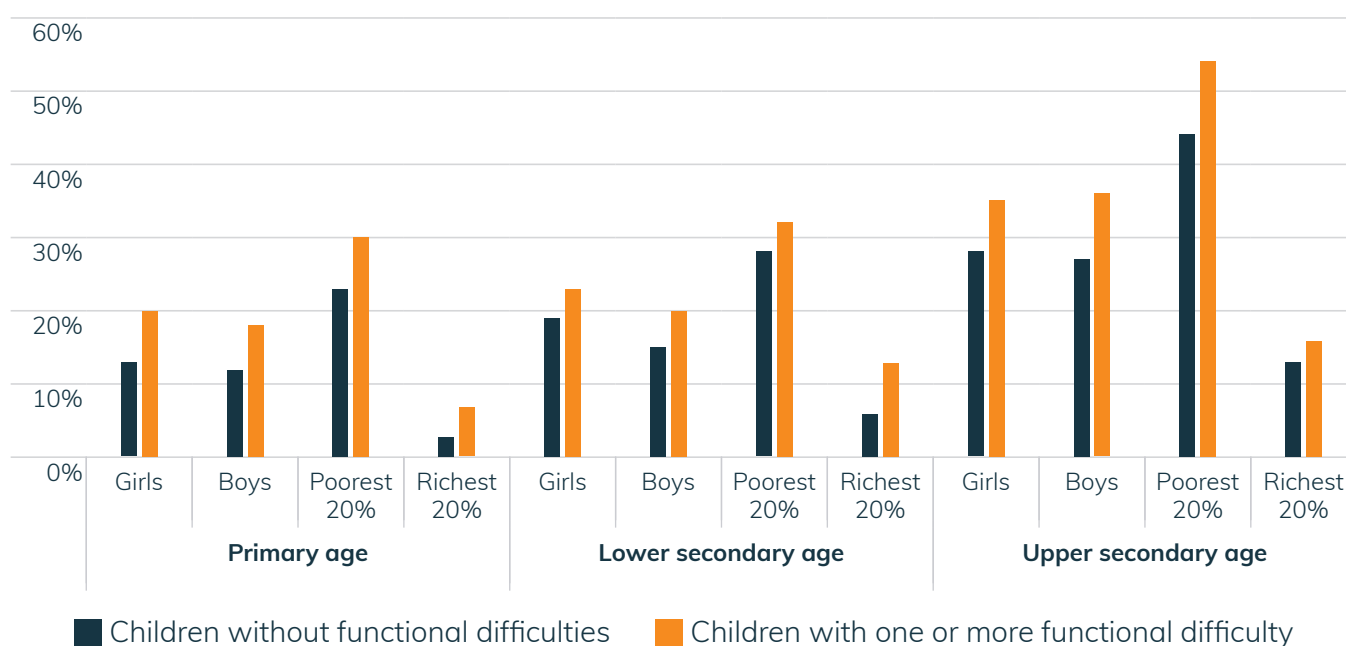
Little data from the major international data sets provides information showing the experiences of children with disabilities, let alone girls with disabilities. Similarly, little data is available on the number of refugees or IDPs with disabilities, and there is no systematic published data on access to education for refugee children with disabilities. Some humanitarian response plans include disability proportions in education targets, but these are not sex-disaggregated.

Data on learning collected in the UIS database is not disaggregated by disability. For instance, [monitoring for SDG target 4.1.1](#) gives information on the proportion of children and young people who are achieving at least a minimum proficiency in reading and mathematics, but while this information is available disaggregated by sex, it does not depict the situation for children with disabilities. In line with SDG indicators, UIS includes data for completion rates at the primary and lower secondary levels, as well as out-of-school rates, with disaggregation to show the experience of children with disabilities. However, globally, only Cambodia, Gambia, Mali, Rwanda, South Africa, and Tanzania are reporting this data at both the primary and lower secondary levels. Even less of this data is sex-disaggregated – for example, the completion rate of primary education for girls with disabilities is only available for Rwanda and Tanzania, with the latest data being from 2012. Importantly, too, the data does not provide information about the type or level of disability/disabilities.

UNICEF’s 2021 report [Seen, Counted, Included](#) analyzes a range of education indicators using the data on children with disabilities collected as part of MICS using the Child Functioning Module (see Section 4.1.1). This is the most detailed picture available of how disabilities impact children, with this analysis including the nature and severity of functional difficulties and how disabilities shape experiences (UNICEF, 2021b). It includes MICS data from 36 countries,<sup>25</sup> including 10 crisis- and conflict-affected states – Bangladesh, Central African Republic, Chad, DRC, Georgia, Iraq, Madagascar, Pakistan, oPt, and Zimbabwe – although the number of countries with data available fluctuates between indicators. The analysis gives an overall picture of the differences between boys and girls, albeit not for every country. We see that disparities between children with disabilities and their peers without disabilities increase and are further compounded by gender, rural/urban location, socioeconomic status, and type of disability. The report also shows that learners with compounding or multiple functional difficulties face even more marginalization in relation to education outcomes.

Figure 8 shows how these differences progress across school systems. Before even reaching school, children with disabilities have lower rates of primary school readiness than children without disabilities. This may be due to limited parental engagement and negative beliefs about the capabilities of children with disabilities; when families believe there is limited benefit in a child attending school, they may be less likely to enroll them in a pre-primary program or pay for them to attend (UNICEF, 2021b).

**Figure 8. Percentage of children with disabilities who are not attending school at different levels**



Source: MICS data (UNICEF, 2021b)

<sup>25</sup> Algeria, Bangladesh, Belarus, Central African Republic, Chad, Costa Rica, Cuba, DRC, Gambia, Georgia, Ghana, Guinea-Bissau, Guyana, Iraq, Kiribati, Kosovo, Kyrgyzstan, Lao People’s Democratic Republic (for children aged 2 to 4 only), Lesotho, Madagascar, Mexico, Mongolia, Montenegro, Nepal, North Macedonia, Pakistan, Sao Tome and Principe, Serbia, Sierra Leone, State of Palestine, Suriname, Togo, Tonga, Tunisia, Turkmenistan, and Zimbabwe. Data for Pakistan is pooled results from surveys conducted in the regions of Sindh and Punjab.



The disparities were greatest for children in the poorest household but similar for boys and girls: 62% of boys without functional difficulties attended an early childhood education program compared to 52% of those with one or more functional difficulties, while 61% of girls without functional difficulties attended compared to 49% with one or more. At the primary level, 20% of girls and 18% of boys with one or more functional difficulties were not attending school; this rose to 23% of girls and 20% of boys at lower secondary, and 35% of girls and 36% of boys at upper secondary.<sup>26</sup>

Overall, the UNICEF data shows that children with disabilities are more likely to be out of school than their peers without disabilities, and the differences become even greater when the level of functional difficulty is taken into account. For children with more than one severe functional difficulty but without signs of anxiety or depression, 36% are out of school at the primary level, 36% at lower secondary, and 59% at upper secondary. Additionally, 19% of children with a lot of difficulty seeing are not attending school compared to 70% of those who “cannot do at all,” while 22% of children with a lot of difficulty concentrating are not attending school compared to 80% who “cannot do at all”<sup>27</sup> (UNICEF, 2021b).

Data from *Seen, Counted, Included* also demonstrates disparities in foundational learning in a context of overall low learning outcomes. Overall, for the countries included in this analysis, just 13% of children aged 7 to 14 demonstrated foundational numeracy and reading skills, while only 7% of children with one or more functional difficulties demonstrated these skills, with no differences between boys and girls; living in rural areas or in the poorest areas was associated with the worst outcomes.<sup>28</sup>

The data from international surveys and administrative data do not give us a good view of the experience of children with disabilities, let alone girls with disabilities, in schools. This data does not show how girls with disabilities experience compounding factors, such as age, location, displacement, or refugee status, or how they face stigma and discrimination. In conflict, humanitarian, and displacement situations, women and girls with disabilities face multiple and intersecting sources of vulnerability, including the breakdown of family and community support networks and health and social care, as well as a lack or loss of assistive devices. Women and girls with disabilities may also experience stigmatization and discrimination, which make accessing services and shelter harder and increase vulnerability to violence and exploitation (Rohwerder, 2017; Walton et al., 2020).

Qualitative research from the Gender and Adolescence: Global Evidence (GAGE) consortium with vulnerable urban youth with disabilities in Ethiopia demonstrated how COVID-19 affected these young people’s access to SRH services, their vulnerability to violence, and the psychological and economic consequences they experienced. The young people found school and university closures particularly problematic, as these had been a safe space where they were able to socialize and where attendance was linked to regular meals and a stipend (Emirie et al., 2020). GAGE research in Jordan demonstrates how girls with disabilities can experience isolation in crisis-affected contexts. For example, one Syrian girl with mobility difficulties reported that she is not enrolled in school and rarely leaves her apartment: “My aspiration is to enroll in school....I can only look at the other children out of the window.” A Jordanian mother said girls with disabilities are far more likely to be isolated than their male counterparts: “A girl with a disability will be more difficult than a boy....We do not let her go out” (Presler-Marshall et al., 2023).

Evidence on the experiences of children with disabilities in education systems is available through other research and evaluations that take place as part of targeted programs, which have been better able to explore the barriers that girls with disabilities face beyond the classroom. For example, research in Burkina Faso, Mali, and Niger used qualitative and participatory approaches to explore the barriers and aggravating factors shaping the educational experiences of girls with disabilities. In all three countries, both girls and boys with disabilities experienced similar social isolation at school. However, girls with disabilities reported facing more stigma, fewer opportunities, and greater marginalization compared to boys with disabilities. In all the schools visited, the enrollment rate for girls with disabilities is lower than for boys, and girls with disabilities had higher repetition, academic failure, and dropout rates than boys (Tan, 2020).

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26 Averages calculated in UNICEF (2021b) using data from seven countries, including two crisis-affected countries (Georgia and Bangladesh)

27 The response categories for these questions are “1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all.” The questions are designed to obtain information on difficulties a person may have in undertaking basic functioning activities, including seeing, hearing, walking, remembering or concentrating, self-care, communication, upper-body activities, and affect (depression and anxiety).

28 Averages calculated in UNICEF (2021b) using data from 14 countries, including five crisis-affected countries (oPt, Bangladesh, Pakistan, Madagascar, and DRC)

Baseline findings from the START4Girls program in Buhera and Mutare, Zimbabwe, found that girls living with disabilities are at a higher risk of dropout than their peers without disabilities. Among girls in Form 1, 24% of girls with disabilities reported they had dropped out of school at some point compared to 14% of girls without disabilities. Girls without disabilities were also more likely to have their school fees paid by their families (63% versus 28% for girls with disabilities), showing that families are less likely to invest in girls with disabilities (according to INEE’s unpublished communication with the project team). It should be noted, however, that mobility challenges and fear of violence while traveling to school often severely disrupted access to education for girls with disabilities. As part of their baseline, Girls’ Education Challenge projects collected data on girls with disabilities and consulted with girls to ensure that their voices were heard. The Supporting Adolescent Girls’ Education (SAGE) project in Zimbabwe found that girls with disabilities face bullying and discrimination from their peers (Girls’ Education Challenge, 2022).

International evidence shows that girls with disabilities are more vulnerable to abuse, mistreatment, and sexual violence than girls without disabilities and boys with disabilities. This is even more prevalent among girls with intellectual disabilities, and the intersecting disadvantages that accompany disability and gender discrimination can mean that it is more difficult for women and girls to be believed when they report cases of GBV (UNFPA, 2018).

In crisis-affected states, and more widely in low- and middle-income contexts, there is a real lack of nationally representative data on the experiences of violence among children with disabilities. *Mind the Gap 2* explored tools designed to measure violence, including school-related GBV, such as Violence Against Children Surveys (or VACS) and the Global School-Based Student Health Survey; however, these do not include any measures of disability. While there are challenges to including children with disabilities in research – and particularly violence-related research – more effort is needed to overcome barriers and fulfill the rights of children with disabilities. For instance, sampling for Violence Against Children Surveys excludes children with intellectual impairments<sup>29</sup> (which are viewed as preventing them from understanding the questions) and children with physical impairments that prevent an interviewer from administering the survey (Kyegombe et al., 2019). MICS data does include data on children with disabilities, but it does not include measures of violence in the school environment (UNICEF, 2021b).

### 4.3. STEPS TOWARD INCLUSIVE EDUCATION

Disability-inclusive education is a fundamental right of all learners, described in the UN CRPD (Article 24 and General Comment 4) as:

*A process of systemic reform embodying changes and modifications in content, teaching methods, approaches, structures and strategies in education to overcome barriers with a vision serving to provide all students of the relevant age range with an equitable and participatory learning experience and environment that best corresponds to their requirements and preferences.*

This sits within a broader need for inclusive education that “ensures the presence, participation and achievement of all individuals together in learning opportunities” and ensures that “education policies, practice and facilities respond to the diversity of all individuals in the contexts” (INEE, n.d.b). Inclusive education means recognizing each learner’s unique characteristics, strengths, and needs (Jodl & Bian, 2023).

This section looks at actions being taken to develop enabling environments for disability- and gender-inclusive education and to tackle supply- and demand-side barriers to inclusive education. For girls with disabilities, this means addressing multiple, intersecting forms of discrimination and exclusion and the relationship between gender and disability in the design and delivery of education programming.

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<sup>29</sup> In this report, impairment is defined as “an absence of or significant difference in a person’s body structure or function or mental functioning”; examples include the loss of a limb, loss of vision, or memory loss (US Centers for Disease Control and Prevention, 2020).

Existing programming and policy have clear gaps. A recent International Disability Alliance (2021) report focused on education brought together evidence from OPDs on progress toward SDG4 and UN CRPD Article 24; it found gaps in policy and strategy for inclusion, gaps in the availability of trained teachers, a lack of accessibility standards, and widespread stigma against learners with disabilities. There is limited evidence on “what works” for disability-inclusive education, and much of the available learning from organizations running programming is related to children with physical disabilities. Fewer examples exist of good practice on reaching children with learning or psychological disabilities or those experiencing extreme stress as a result of violence, conflict, or displacement (Lee et al., 2019).

Additionally, a 2018 rapid evidence assessment found that very little evidence was available on effective programs and interventions to improve educational outcomes for children with disabilities in LMICs. It also found the quality of the evidence available is generally low, due in part to existing programs being difficult to evaluate because of the small sample sizes (Kuper et al., 2018). Likewise, a forthcoming INEE report mapping approaches related to disability-inclusive education found over 190 examples of projects or policies to support learners with disabilities, but very few of these examples included evidence of impact. The remaining sections of this chapter look at progress in providing inclusive infrastructure and adaptive devices and developing wider inclusive education policies.

As a personal example, Nujeen Mustafa spoke with INEE about her experience accessing education first as a girl with disabilities in Syria and then as a refugee in Germany. She described how she was unable to access formal education in Syria and, at the time of the interview, was attending school in Germany and able to advocate for others. She stressed the need for data that truly represents the intersectional barriers to education experienced by children with disabilities in humanitarian and crisis-affected contexts and how important inclusive education is for changing attitudes (INEE, 2021a).

*“[If] more people mingle[d] with persons with disabilities, they themselves would start viewing them as a person with a disability rather than a disabled person, and that’s why I believe there shouldn’t be separate education or school systems for non-disabled people and people with disabilities. I believe that special education should be integrated into general education so that children from the youngest age could know that these people are not so different; that would mean so much to them, build their confidence, and [say] that they are not something that is unaccepted or unwelcome.”*

—Nujeen Mustafa, a Syrian refugee living in Germany

The full interview is available in “Episode 3: I Have A Disability, I’m Not Disabled” of INEE’s podcast *Educate Us! Women and Girls on Learning in Humanitarian Crises* (INEE, 2021a).

#### 4.3.1. ACCESSIBILITY OF SCHOOL INFRASTRUCTURE AND CLASSROOM ENVIRONMENTS

SDG Target 4.a.1 calls for upgrading and renovating educational facilities to be child- and disability-sensitive and promote inclusive learning environments. Creating an accessible, disability-inclusive learning environment involves removing any barriers that impede participation, which could range from transportation to school, classroom furniture to flooring, signage to illumination and lighting. It also involves ensuring the accessibility of learning materials, information, and communication.<sup>30</sup> Providing “reasonable accommodations” is also a legal obligation of any country having signed and ratified the UN CRPD.<sup>31</sup>

<sup>30</sup> The INEE Education in Emergencies glossary defines accessibility as entailing “the removal or mitigation of barriers to people’s meaningful participation. These barriers and the measures needed will vary according to disability, age, illness, literacy level, status of language, legal and/or social status” (INEE, n.d.a). Further detail on the meaning of accessibility can be found in [CRPD Paragraph 21](#) and the [INEE Education in Emergencies Glossary](#).

<sup>31</sup> See [CRPD Article 24](#). Additionally, the INEE Education in Emergencies glossary’s definition of reasonable accommodation begins as follows: “Ensuring the right to reasonable accommodation entails a transformation in culture, policy and practice in all formal and informal educational environments to accommodate the differing requirements and identities of individual students, together with a commitment to removing the barriers that impede that possibility” (INEE, n.d.c).

One overall objective of the UN CRPD is that schools follow the principle of universal design – “accessed, understood and used to the greatest extent possible by all people, regardless of disability or any other characteristic.” However, the current indicators do not quite capture the scope of this commitment, as they do not measure whether adaptation and materials are adequate for either the learners currently attending the school or any potential learners who may want to attend. In 2019, UIS proposed an approach that collects information on whether adaptations to infrastructure and the environment are being made in each area of functional difficulty and that asks more specific questions about accessibility to give a more nuanced, useful description. Steps in this direction are being taken by some countries and through changes to OpenEMIS (UNESCO UIS, 2019c).<sup>32</sup>

Progress toward accessibility is monitored through data on a range of related measures – which countries collect during their school census and report to UIS – covering infrastructure and materials to monitor SDG 4.a.1 (see Table 4). All of the data collected refers to the school’s physical environment rather than any other aspects of education, such as curriculum, assessment, and teaching methods, where additional barriers to inclusive education exist. Additionally, girls with disabilities require accessible water, sanitation, and hygiene (WASH) infrastructure in schools and may need support for menstruation management (UNICEF, 2018a).

**Table 4. Questions on school accessibility and basic services for children with disabilities included in the UIS database**

Measures in UIS (Indicator 4.a.1. “Proportion of schools with..”)	Total number of countries with data available for primary schools	Number of 44 conflict and crisis-affected states with data available
Electricity	157	31
Access to computers for pedagogical purposes	136	22 <sup>33</sup>
Access to internet for pedagogical purposes	126	17 <sup>34</sup>
Access to basic drinking water	138	26
Basic handwashing facilities	128	21
Single-sex basic sanitation facilities	120	25
Access to adapted infrastructure and materials for students with disabilities	77	13 <sup>35</sup>

Source: Data retrieved February 2023 from [the UIS database](#)

As Table 4 shows, more countries have data available for every other accessibility area than for adapted infrastructure and materials for learners with disabilities, demonstrating this data’s low priority; almost twice as many countries report computer access as report adapted infrastructure and materials. The areas with the most data available from crisis- and conflict-affected countries are the proportion of schools with electricity, single-sex basic sanitation facilities, and access to basic drinking water. These measures give some indication of the accessibility of a school’s physical environment, although the toilets and running water within schools are often not accessible to children with disabilities. For instance, there may be no ramp to toilet cubicles, no separate cubicles for children (girls and boys) with disabilities, small cubicles, or no grab bars, or they may be generally hard to operate. There is also no data on the availability of WASH facilities that are accessible and appropriate specifically for girls with disabilities. The accessibility of WASH facilities is important for the dignity, independence, and social inclusion of children with disabilities and is particularly vital for girls’ ability to stay in school and learn (Agarwal, 2020).

32 OpenEMIS is an EMIS designed to manage education system data. It offers countries free open-source EMIS software, with a range of low- and high-tech solutions available.

33 Most recent data is nil for Burundi, DRC, and Chad.

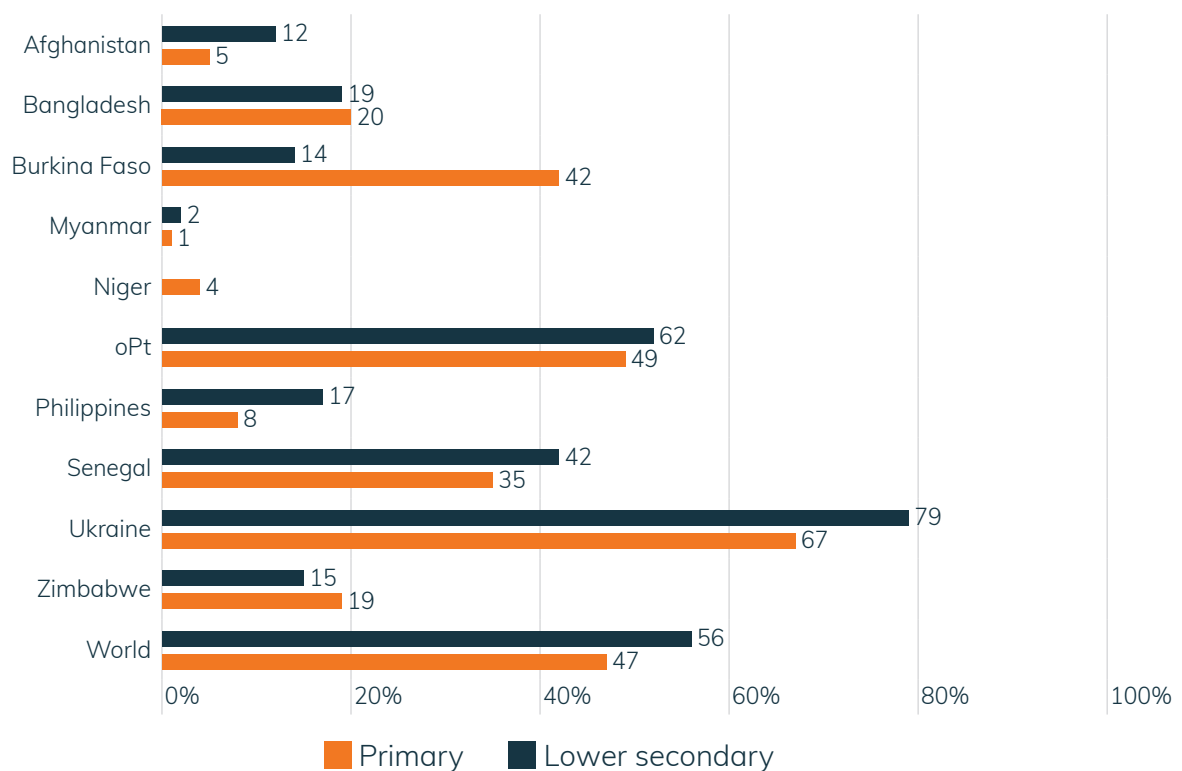
34 Most recent data is nil for Burundi, DRC, and Chad.

35 Most recent data is nil for Burundi, DRC, and Chad.

Previous *Mind the Gap* reports focused on the reporting for Indicator 4.a.1(d), “Proportion of schools with access to adapted infrastructure and materials for students with disabilities.” Overall, data for this indicator is not well reported, with the UIS database currently containing 77 countries that report on this indicator at the primary level, 74 at lower secondary, and 76 at upper secondary. Thirteen crisis- and conflict-affected countries report this data at the primary level, although the data from Burundi, Chad, and DRC is reported as nil – which demonstrates that the quantity measured was nil or negligible (UNESCO UIS, 2019a).

2021 data on access to adapted infrastructure and materials is available for four crisis-affected countries – Niger, oPt, Senegal, and Ukraine; data from Niger is newly available. As Figure 9 shows, countries continue to vary widely in terms of access. Slight improvements have been made at the primary level compared to the 2020 data: 66% to 67% in Ukraine and 33% to 35% in Senegal. The data also shows some decline in oPt’s proportion of primary schools with adapted infrastructure and materials for learners with disabilities, dropping from 54% in 2020 to 49% in 2021. Figure 9 also shows data for lower secondary school, with new data from 2021 available for Bangladesh, oPt, Senegal, and Ukraine. Overall, these 2021 figures show little change from the 2020 data: from 66% to 63% in oPt and 36% to 42% in Senegal. The world average uses the 2020 data and remains the same as *Mind the Gap 2*.

**Figure 9. Proportion of lower secondary and primary schools with access to adapted infrastructure and materials for learners with disabilities**



Source: Data retrieved February 2023 from [the UIS database](#); most recent data available (2019–2021) for 10 crisis-affected countries

For many children with disabilities, education is only available in a segregated setting that denies them the benefits of an inclusive education environment (UNICEF, 2021b). Where the provision of education for children with disabilities is concentrated in a small number of special or inclusive schools, access to education for girls with disabilities can be further limited if these girls are unable to travel to cities or urban centers to attend school, parents are unable to afford fees, or parents see a long walk to school in rural areas as particularly unsafe. Research in Mali, Nigeria, and Burkina Faso also found that few special or inclusive facilities have boarding facilities, and in Mali, the school for children with intellectual disabilities is open for boarding only to boys. Families were reported to be concerned about girls’ safety and security when attending school away from home and without adequate safe, high-quality supervision (Tan, 2020).

## Inclusive school environments

When looking for schools and educational opportunities for their children, parents find schools and classrooms that are not accessible, either physically or due to a lack of appropriate learning materials (UNICEF, 2021b). One important element of inclusive education and supporting children with disabilities is providing appropriate assistive devices and accessible teaching and learning materials,<sup>36</sup> an important step in granting equitable access to schools for children with disabilities. The available data does not provide details about whether adaptations are meeting the needs of learners with disabilities, particularly girls with disabilities.

A recent review by the EdTech Hub found some evidence that the provision of edtech through apps and video significantly helped learners with disabilities' access to and engagement with national curricula, with the highest number of studies covering interventions for deaf learners. For instance, a trial of a video game designed to help deaf children aged 8 to 12 with writing in Spanish showed an improvement of 22% in the average grade (Ramos-Ramirez & Mauricio, 2019, as cited in Lynch et al., 2020). In Malawi, a small-scale trial in two primary schools investigated an interactive app on touchscreen devices to teach basic mathematics skills to children with disabilities. The trial found that all the children using the app were able to pass at least one topic, although the rate of learning depended on the severity of difficulty experienced by the child (Pitchford et al., 2018, as cited in Lynch et al., 2020).

However, a significant evidence gap remains in terms of evaluations of education interventions using education technology, how assistive technology can best be used in mainstream schools, and the support teachers need to effectively use this technology (Lynch et al., 2020). Families of children with disabilities are more likely to belong to the poorest households and have less access to the electronic devices (e.g., radios and televisions) needed to participate in remote learning programs. Even when children with disabilities do have access to devices, they are less likely to use them, as remote learning programs rarely consider accessible features (Inclusive Education Initiative & World Bank, 2020).

In Somalia, the Global Partnership for Education has funded the production and distribution of 8,600 copies of Braille textbooks, which benefited more than 650 learners with visual impairment. In Zimbabwe, rehabilitation of classrooms damaged in Cyclone Idai in 2019 has included developing 80 classrooms with ramps and door handles that are accessible to children using wheelchairs and toilets that have wider doors and ramps to improve access for children with mobility issues (Global Partnership for Education, 2022). In Nigeria, the World Bank is working to develop a more inclusive education system, including providing Braille resources and developing physically accessible schools with ramps while also conducting awareness and sensitization activities with parents to remove stigma and allow children to attend school.

Infrastructure and devices are just one part of creating an inclusive environment in school. A study in Bangladesh found teachers' negative attitudes toward teaching children with disabilities who have high support needs (those who need Braille, sign language, or individualized education plans) were linked to a lack of knowledge and training on disability and inclusion (Ahsan & Sharma, 2018). A holistic approach to creating an inclusive school environment involves working with teachers, school management, communities, and vitally, children themselves. As discussed in Chapter 3, high-quality professional development for teachers is essential. Teachers must have continuous professional development opportunities on inclusive education that are guided by a teacher development framework integrating principles of inclusion to learn practical and relevant strategies for including children with disabilities in mainstream settings.

A UNICEF review of education sector plans in South Asia found that supporting the professional development of teachers in special and/or inclusive education is a key priority in education sector plans. Some ways to approach this could include compulsory modules in initial teacher training, trained itinerant special education teachers who can be a resource for classroom teachers, and communities of practice that can provide ongoing support (Grimes & dela Cruz, 2021). Teachers with specialist skills can

<sup>36</sup> Assistive devices are external products (devices, equipment, instruments, software), specially produced or generally available, that help to maintain or improve an individual's functioning and independence, participation, or overall well-being. They can also help prevent secondary impairments and health conditions. Examples of assistive devices and technologies include wheelchairs, prostheses, hearing aids, visual aids, and specialized computer software and hardware that improve mobility, hearing, vision, or the capacity to communicate..

also provide training and reduce the separation between special and mainstream education teachers. An outreach project of the School for the Deaf in Hossana, Ethiopia, provides mainstream and special education teachers with in-service training on teaching learners with hearing difficulties in order to improve the quality of mainstream classrooms (Teacher Task Force & UNESCO, 2020). Teachers who are supported through relevant and effective training and are made partners in providing inclusive education are empowered teachers who feel confident and capable of teaching diverse learners.

Inclusion training for teachers can not only improve immediate practice but also result in changes such as reductions in violence and the use of corporal punishment (Devries et al., 2015). Research in Mali found that inclusive classroom systems work well for children with hearing and visual impairments when high-quality teacher training is given at the start of each term in conjunction with close support from a traveling specialized teacher (Tan, 2020). Leonard Cheshire Disability's work on inclusive education in Kenya found that after training, teachers interacted more positively with girls with disabilities and no longer used corporal punishment (Sandall, 2022). Also in Kenya, the Kenya Equity in Education Project (KEEP) led by World University Service of Canada found that inclusive practice by teachers resulted in girls with disabilities feeling more supported by their teachers; 90% of girls with disabilities felt that their learning needs are supported by their teachers at endline compared to 86% at midline and 69% at baseline (C.A.C. International, 2022).

*"It has changed because we've learnt to understand these learners individually. We don't group them, we don't categorize them. You look at the character of the learner individually and then you find ways of correcting that learner."*

*—English and math teacher*

*"Initially embarrassment made [children with disabilities] feel bad, so it was difficult ...to learn. So, if you find that, at home you are being encouraged by the parent and at school you are also being encouraged by the teachers, you also feel encouraged to continue working hard."*

*—Young mother with a disability*

*—Endline evaluation participants, Kenya Equity in Education Project (KEEP)  
(C.A.C. International, 2022)*

Teaching assistants and specialized staff to support learners with disabilities can provide additional support to teachers. One Leonard Cheshire Disability project in Zimbabwe found that engaging parents of children with disabilities as classroom assistants and providing allowances ensured low teacher turnover (Deluca & Kett, 2018). Education leaders need to ensure teachers are supported and opportunities for ongoing, school-based professional development are made available (Grimes & dela Cruz, 2021).

## Box 5. Inclusive education for Palestinian children with disabilities

As part of the Humanitarian Response Plan, Global Affairs Canada developed the Inclusive Education for Palestinian Children with Disabilities program with partners Humanity & Inclusion and UNICEF to fill a gap in the education programming for children with disabilities.

The program worked with 19 education facilities (three primary special schools, three kindergartens, and 13 mainstream primary schools – nine Ministry of Education and four UNRWA schools) to enhance access to safe and protected inclusive education. The project included accessibility interventions in the main facilities of the target schools, with adaptations to bathroom facilities, corridors, playgrounds, libraries, and other rooms, as well as the installation of sign panels supported by written texts, sign language, and Braille for the main school facilities. The program also developed 11 child-friendly, age-, gender-, and disability-responsive playgrounds in Ministry of Education and UNRWA schools.

Additionally, the targeted schools received comprehensive training to develop an accessible and child-friendly environment. Teachers, school principals, and other staff participated in inclusive education and disability trainings, and 80% of the 53 teachers in mainstream schools who were trained in Gaza and 89% of teachers in the West Bank indicated improved knowledge and skills on inclusive education and adapted learning strategies. As a female teacher in a UN school said, *“From my point of view, I see the resource room [is] made for multiple uses. It is not made for a certain group of children; it is for all the learners. I even can see it as a rest area for a child who may feel exhausted and needs rest”* (internal project monitoring, 2022).

For full details, see Case Study 3 in Annex 1.

Understanding and addressing community attitudes and negative social and cultural beliefs and practices, which can be significant barriers to education for girls with disabilities, is also vital. Working with existing community structures, families, and OPDs can challenge negative attitudes and empower people with disabilities to share and normalize their experiences. In Right To Play’s Enhancing Quality and Inclusive Education (EQIE) program, community workers work closely with families to ensure that education effectively meets the needs of their children, and they are increasingly likely to ensure they attend school. The Adolescent Girls’ Education in Somalia (AGES) project worked closely with community and religious leaders and with girls’ groups, who helped shift negative social norms affecting the education of girls, particularly girls with disabilities (see Box 6).



## Box 6. Adolescent Girls' Education in Somalia (AGES) (information from Care International in Somalia, 2022)

The Adolescent Girls' Education in Somalia (AGES) project is a six-year initiative (2018–2024) to enable 82,975 marginalized girls and young women – including girls with disabilities – living in conflict-affected areas of Somalia to enroll in school. AGES enrolls girls into education tracks that are responsive to their specific needs, as well as builds financial and business skills, engages girls in savings groups, provides mentorship, and works with community and religious leaders to facilitate shifts in negative social norms affecting girls' education. The project is funded by the Foreign, Commonwealth & Development Office and USAID.

In qualitative research by the program, girls with disabilities said participating in the groups has increased their self-confidence, enabled them to build relationships with peers, and improved their integration within the community. Girls with disabilities described shifting norms around disabilities within schools, including school bans on the discrimination and harassment of children with disabilities and an acknowledgment that girls with disabilities can learn at levels similar to or higher than their peers. They also talked about how they have gained self-confidence and overcome their fear of participating in class, benefiting from a shifting narrative around girls with disabilities in their classrooms.

As one participant in Mogadishu described, “Yes it has changed, now that I have integrated with the community, I have learned new students and teachers, and I have a good relationship with the students who have given me more knowledge and confidence that I did not have before.” A participant in Kismayo said, “The relationship between me and other girls is very good because they assist me where I need help, and a good example [is] we play together as a group during break time and they don't discriminate [against] me; they show me love and respect.”

Quantitative data showed that girls with disabilities had greater gains in both literacy and numeracy literacy compared to girls without disabilities, and parents and caregivers of girls with disabilities reported improvements in school safety, although discriminatory practices continued to be observed at home and in the community.

Respondents in AGES research in Somalia noted that inclusion depends not only on equal treatment but also on meeting the different needs of girls with disabilities, such as transportation, equipment, and adapted school facilities. Teachers were able to explain the adjustments they had made for girls with disabilities in their classes. As one teacher in Baidoa said:

*The biggest challenge...is that those with hearing impairments cannot hear the lesson well so they are seated in the front row or the teachers sit next to them. For a girl who is disabled in one eye, if the blackboard is on the side where she has a disabled eye, she is transferred to a place where she can see the lessons on the board. Yes, it has changed. We do our best to tackle every challenge that arises. Physically disabled girls are supported with transportation.*

### 4.3.2. SYSTEMS AND POLICY ENVIRONMENT

#### Policy and law

A broader enabling environment for inclusive education includes laws and policies, data, and social norms and attitudes that remove barriers to education for girls with disabilities. The [UNESCO Right to Education Database](#) lists national-level inclusive education policies. There, we can see that national legislation often includes the right of children with disabilities to education; however, there often is a gap between policy aspirations and implementation on the ground. In 2020, only 68% of countries had definitions of inclusive education in their policies, leaving many schools and children without a facilitative national framework (GEMR Team, 2020). In the design of inclusive education responses, it is vital to consider the needs of all children with disabilities, including children with invisible disabilities – otherwise, these children remain excluded or are put at greater risk of harm (ECW, 2022b).

Policies and codes of conduct must reflect the guidelines and standards that have been developed to guide organizations in the actions they must take to be inclusive. For example, the International Disability Alliance (2022) [has called for](#) progressive increases in budgetary allocations for disability-inclusive education toward being at least 5% of education budgets. However, UNICEF research demonstrates how difficult it is to determine the percentage of education budgets being spent on educating children with disabilities, as this data is largely unavailable. Results from a survey conducted with WHO suggest that funding for children with disabilities in South Asian countries mainly focuses on expanding special education programs without clear distinctions and allocations for making education systems more inclusive (Grimes & dela Cruz, 2021).

### Box 7. Inclusive education policy in crisis-affected countries

**UNRWA** provides an example of inclusive education policy. The agency aims to ensure that all children have equal opportunities to learn in UNRWA schools and are supported to reach their full potential, as well as to empower teachers to improve their approach and practice. Toolkits and policies that have been developed include:

- UNRWA-wide inclusive education policy and strategy
- Teacher toolkit for identifying and responding to learners' diverse needs
- Psychosocial support framework
- School health strategy
- *Towards Gender Sensitive Classrooms* toolkit (Bengtsson et al., 2021).

As another example, the **Dadaab Refugee Complex in Kenya** provides inclusive education in line with the Kenyan policy on integrating special needs education and the new competency-based curriculum. Each of Dadaab's three camps has an educational assessment and resource center, staffed by a multidisciplinary team that includes an audiologist, a psychosocial counselor, an occupational therapist, and a special needs education assessor. Once a learner's needs are established, they are placed in a school with the trained staff to meet their needs within mainstream classes; 10 schools in the complex have special needs education units. Additionally, partners provide teacher training on inclusive education, such as the requirements under the competency-based curriculum on adapting assessments for special needs education learners.

The Lutheran World Federation employs a full-time special needs education officer to oversee and coordinate special needs education, and special needs education mobilizers undertake outreach activities to identify and refer out-of-school children to the educational assessment and resource center. Humanity & Inclusion also funded a scheme in which trained refugees without teaching qualifications provided additional special needs education support in classrooms (West et al., 2022).

Another element of effectively delivering inclusive education is using teaching assistants and specialist education officials. Support personnel with responsibility for inclusion are often an integral part of delivering inclusive teaching in schools and ensuring children with disabilities can attend mainstream schools. However, very little is known about this role. The 2020 GEMR concluded that comparable international data is unavailable on the inclusion-related use of support personnel (GEMR Team, 2020).

### Improving data collection and use

Identifying children with disabilities and their individual needs is critical to providing the support children need to thrive. Projects and programs are experimenting with ways to use the Child Functioning Module, Washington Group questions, and greater disaggregation to design and deliver more effective support for children with disabilities, as well as create comprehensive data and monitoring systems that can facilitate the provision of tailored support. ECW's recent [gender implementation guide for ECW staff and partners](#) encourages partners to adopt an intersectional approach to gender and

disability, including through data collection and use. The guidance encourages all indicators, particularly gender-specific indicators, to be systematically disaggregated by sex, education level, and disability status in order to identify gaps and ensure that no girl with disabilities is left behind.

Data collection and data management can support projects developing services to target the individual needs of children with disabilities. We were able to locate a few examples of work specifically with girls with disabilities. For example, Adolescent Girls' Education in Somalia (AGES), led by Care International and being implemented with local partners (2018–2024), created comprehensive individual tracking profiles for over 60,000 girl participants. The profiles include disability status (using the Washington Group short set of questions) and allow for disaggregation to see how disability intersects with gender, displacement status, language, and ethnicity in learning and classroom participation processes.<sup>37</sup> Additionally, Right To Play's Enhancing Quality and Inclusive Education (EQIE) program (2020–2024) has developed a disability tracking tool giving the program team, including local support partners, the information they need to ensure the correct measures are in place to support each individual child with disabilities (see Box 8).

The Support Mainstreaming Inclusion so all Learn Equally (SMILE) project, implemented by Sightsavers in Kaduna, Nigeria, is another example of collecting and using targeted data. SMILE conducted a situation analysis of the barriers to education in Nigeria and realized they needed a tool to better understand each individual child's learning needs. The project was piloted using the Child Functioning Module during school enrollment; if a child was identified as having a functional difficulty or difficulties, the information was shared with their parent or carer, with recommendations for further medical assessment and resources and support from the school. The data also supported SMILE in providing tailored training for teachers to make adaptations and create the best environment for the child (Roolvink & Mackay, 2023).

### **Box 8. Enhancing Quality and Inclusive Education (EQIE)<sup>38</sup>**

Funded by the Norwegian Agency for Development Cooperation, Right To Play's Enhancing Quality and Inclusive Education (EQIE) project addresses the unmet and intersecting needs of children facing poverty, conflict, and other disruptions to their learning in Ethiopia, Mali, Mozambique, Tanzania, Lebanon, and oPt. Girls, particularly girls with disabilities, are disproportionately marginalized in this context. EQIE (2020–2024) supports inclusive, gender-responsive, play-based learning approaches to advance children's learning outcomes, life skills development, and holistic well-being at home and at school.

The project adopts a social model of disability and focuses on what can be done to make the education environment – the people, resources, structures, and settings – more enabling, inclusive, equitable, and geared toward strong learning outcomes for children with disabilities as well as their developmentally typical/non-disabled peers. EQIE is working to achieve this through a focus on individualized support for children with disabilities and their families. To ensure high-quality case handling, EQIE developed a disability tracking tool that captures each child's needs and circumstances and informs the development of a holistic support plan.

Early results from work in oPt demonstrate that EQIE has supported extremely high retention rates of children with disabilities even in comparison to non-disabled peers. Of the initial cohort of 192 children with disabilities (91 girls and 101 boys) enrolled in June 2020, 149 (76 girls, 73 boys) from a cohort of 152 passed the 2021/2022 academic year. Additionally, community sensitization events leveraging play-based learning methodologies have been particularly important to families and communities, allowing them to interact in a way that challenges stigma and exclusion.

*For full details, see Case Study 4 in Annex 1.*

<sup>37</sup> Information from program staff

<sup>38</sup> Information from program staff



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## CHAPTER 5: SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR) EDUCATION IN EMERGENCIES

### Key findings

- In 2018, 32 million of the 134 million people in need of humanitarian assistance were women and girls of reproductive age, all in need of SRHR information and services. SRHR education is key to preventing unintended pregnancies, which lead to school drop-out or exclusion for up to 4 million teenage girls annually in sub-Saharan Africa alone.
- Low levels of comprehensive knowledge on HIV/AIDS can be observed in crisis-affected countries, leading to higher rates of infection for adolescent girls and their children. However, evidence shows that adolescent girls who receive a school-based sex education intervention have greater HIV knowledge, self-efficacy related to condom use, and confidence to refuse sex, reducing rates of infection. Researchers have also observed that CSE programs that address gender and power have a much higher association with lower rates of STIs and unintended pregnancies compared to programs solely focusing on the biological aspects of reproduction and not addressing gender inequalities and power dynamics.
- Very few crisis-affected countries have a CSE curriculum for out-of-school children. Yet where a curriculum has been developed to specifically target out-of-school groups, the training content appears to be far more comprehensive and cover a wider range of topics than in-school curricula, creating a greater scope to address sensitive and challenging topics.
- There is greater resistance to delivering CSE in primary schools compared to higher grades. This resistance comes mainly from the community and faith-based organizations, creating negative attitudes toward CSE at this age. However, with high numbers of over-age girls in primary schools in crisis settings and 90% of girls more likely to be out of school at the secondary level than in non-crisis settings, the need to deliver CSE at the primary level is clear.
- The effectiveness of CSE delivered in schools relies heavily on the teachers' training, knowledge, and any inherent attitudes and gender biases. Without training and support, teachers focus only on less contentious topics and can reinforce harmful gender norms.
- Youth must be core to the development of SRHR curricula – with curricula designed by them and for them – and successful outreach approaches have had youth at their core as peer educators. These successful approaches have included the successful delivery of SRHR education through web-based platforms.
- Men often dominate SRHR decision-making, limiting wives' and daughters' ability to access contraceptives and increasing the unmet need seen among adolescents. Engaging men and boys in SRHR education is critical to start addressing inequitable power dynamics, harmful gender norms, and toxic masculinities that can shape men and boys' behavior in a way that undermines women and girls' access and choices related to SRH.

Sexual and reproductive health and rights (SRHR) stretches across numerous fundamental human rights, including the right to health and education, the right to be free from torture and discrimination, and the right to privacy. The original *International Technical Guidance on Sexuality Education (ITGSE)*, published in 2009, positioned sexuality education primarily as part of HIV response focusing on education around reproductive health, risk, and disease (UNESCO, 2018). However, while HIV prevention remains important, evidence and practice demonstrate that sexuality education has much broader relevance, not only for young people's SRH but also for their overall well-being and personal development. The revised ITGSE reflects this in its truly comprehensive approach, reaffirming CSE's position within a framework of human rights and gender equality. It is a rights-based and gender-transformative approach to building adolescent knowledge and skills around sexuality and is premised on several international and regional agreements. Sexuality education helps efforts to realize several international commitments, as well as achieve the 2030 Agenda goals related to health, well-being, high-quality and inclusive education, gender equality, and women and girls' empowerment (UNESCO, 2018).

### Box 9. What is CSE?

**CSE** teaches children and young people about the “cognitive, emotional, physical and social aspects of sexuality” (UNESCO, 2018, p. 16). It is a rights-based approach that is nonjudgmental and seeks to provide learners with the necessary knowledge, skills, values, and attitudes to make informed, meaningful decisions about:

- Their sexual health and well-being, supporting full bodily autonomy;
- Respectful social and sexual relationships; and
- How to understand and protect their rights (UNESCO, 2018; UNFPA, n.d.a).

**UNFPA** (n.d.b) outlines that in order to achieve good SRH, meaning “complete physical, mental and social well-being in all matters relating to the reproductive system,” individuals must:

- Have access to accurate information, and choice over and access to, “safe, effective, affordable and acceptable contraception method[s]” (UNFPA, n.d.b);
- Have access to information on STIs and be empowered to prevent STIs; and
- Be empowered to make their own choices on when (and if) to have children, and expectant mothers and parents must have access to quality healthcare providers to ensure healthy pregnancies, safe delivery, and healthy children.

## 5.1 INTRODUCTION TO EDUCATION AND SRHR

HIV, pregnancy, and childbirth are among the leading causes of death for adolescent girls globally (WHO, 2022a). Every year, there are 21 million pregnancies among girls aged 15 to 19 in developing countries. Six million of these pregnancies end in abortion, 2.5 million of which are unsafe, meaning that the pregnancies are terminated by people lacking the necessary skills, people in an environment lacking minimal medical standards, or both, as is often the case (WHO, 2022a). Adolescent pregnancy, early marriage, and girls' education are intrinsically linked. In sub-Saharan Africa alone, up to 4 million teenage girls drop out of school or are excluded each year due to teenage pregnancy, sometimes leading to child marriage (MSI United States, 2021). However, access to SRHR helps prevent unintended pregnancies, improve maternal health, and prevent and treat STIs, including HIV/AIDS. All of these enable girls to stay in school and learn. Furthermore, going to school reduces – but does not eliminate – girls' vulnerability to GBV (INEE, 2021c).

The links between SRHR and education are bidirectional: Education contributes to realizing SRHR, while the consequences of a lack of SRHR remain key barriers to education, which are exacerbated by living in protracted crisis. As *Mind the Gap 1* highlighted, girls going to school are less likely to experience harmful practices like female genital mutilation, early marriage, and trafficking (Savado-

go & Wodon, 2017; Wodon et al., 2018), and an increase in the number of years of education can directly affect contraceptive use and delay both pregnancy and marriage (Bhalotra & Clarke, 2013; Sperling et al., 2016). Women and girls' literacy outcomes are one of the most important factors in achieving development gains and have more influence on four key life outcomes (fertility, child mortality, empowerment, and financial practices) than gains from schooling alone (Bhalotra & Clarke, 2013; Sperling et al., 2016).

Girls and young women can be equipped with SRHR knowledge through school as part of a CSE curriculum or, as more frequently seen in emergency contexts, as life skills interventions in safe spaces for adolescent girls, which can also support out-of-school girls' return to education (INEE, 2021c).

In crisis settings, adolescent SRH outcomes remain poor, with high rates of child marriage, sexual coercion and violence, STIs/HIV, unintended pregnancy, and unsafe abortions. In these settings, CSE can equip girls with the information and skills they need to make informed decisions about their relationships and sexual and reproductive behaviors. CSE is important from both a rights-based and public health perspective, with firm evidence that when well-delivered and age-appropriate, it can delay initiation of sexual activity and unprotected sexual intercourse, decrease the number of sexual partners, increase contraceptive and condom use, and therefore, decrease unintended pregnancies and STIs (UNESCO, 2018). However, delivering age-appropriate CSE becomes even more challenging in crisis settings, with higher numbers of over-age learners receiving CSE content designed for their grade and not their age.

A global review of existing evidence by UNESCO (2015a) concludes that when properly implemented, CSE has a positive impact on SRH and contributes to reducing STIs/HIV and unintended pregnancies. It also demonstrates impact with regard to improving knowledge and self-esteem, changing attitudes and gender and social norms, and building self-efficacy. However, a lack of political will, inadequate resources and funding, and discrimination against women and girls all prevent full access to SRHR education worldwide, especially in crisis-affected countries. Additionally, a lack of high-quality, age-appropriate, and developmentally appropriate sexuality education can leave young people vulnerable to harmful sexual behaviors and sexual exploitation.

## **5.2 THE NEED TO PROVIDE SRHR IN CONFLICT- AND CRISIS-AFFECTED CONTEXTS**

In 2018, 32 million of the 134 million people in need of humanitarian assistance were women and girls of reproductive age, all in need of SRH information and services (Singh et al., 2018). Of the preventable maternal deaths that occur globally, over half take place in settings of conflict, displacement, and disasters, with the death ratio in these countries being nearly twice the global figure (UNFPA, 2015). With crisis comes the sudden loss of home, community, and livelihood options; with this breakdown in social norms and protective structures, women and girls' exposure to GBV and its consequences increases. Many are coerced into sex against their will in order to survive, and the conditions in crisis settings favor the spread of HIV/AIDS and other STIs, putting women and adolescent girls in numerous vulnerable situations (CARE International, n.d.). Women and girls with disabilities are among those who have the least information about their sexual and reproductive rights, including a lack of information on GBV prevention and response services. However, they continue to be at increased risk of violence and abuse and are at least twice as likely as non-disabled women and girls to be victims of GBV. This is heightened further for those with cognitive, intellectual, and psychosocial disabilities (IPPF, 2021).

Pregnancy rates increase in crisis settings. These pregnancies are often unintended, largely because sex, marriage, and pregnancy are often neither voluntary nor consensual (UNFPA, 2022), and many lack access to SRHR information to make informed decisions. Pregnancy poses life-threatening consequences in terms of SRH where supportive health services and antenatal care are unavailable or access is limited because of damage to infrastructure, disruption to supply chains, and limited trained health professionals (Catterson, 2021). Barriers are further exacerbated by norms and social stigmas, gender inequality, and limited bodily autonomy (Zampas & Brown, 2022).

The increase in GBV in crisis settings, both at school and within the community, further contributes to the rates of unwanted pregnancies. In response, many women perform self-induced and unsafe abortions, with 97% of abortions in sub-Saharan Africa being unsafe (McGinn & Casey, 2016). These can result in complications and death when access to post-abortion care is unavailable. While research has not yet been conducted in crisis settings to demonstrate a correlation between CSE provision and a reduction in GBV, many of the core qualities of the ITGSE indicate its potential to contribute to GBV prevention: being based on gender equality and explicitly recognizing how gender and power affect relationships (UNESCO, 2018).

In line with previous studies showing associations between education and access to SRHR services, a study in Uganda revealed that level of education was a determinant of access to information on GBV prevention during the COVID-19 lockdowns. This underscores education's role as a protective factor and social determinant of health in the context of access to information during pandemics and crises, such as COVID-19 (Bukuluki et al., 2023). Access to SRHR information was positively associated with access to GBV information during COVID-19 lockdowns, clearly demonstrating the importance of identifying links between GBV and SRHR in policy and programmatic interventions.

Another limitation in learners' access to SRHR information in crisis-affected countries is around screening for cervical cancer, which is the fourth most common cancer among women globally, with an estimated 604,000 new cases and 342,000 deaths in 2020 (WHO, 2022b). Around 90% of the new cases and deaths worldwide in 2020 occurred in LMICs. Additionally, women living with HIV are six times as likely to develop cervical cancer, with HIV's contribution to cervical cancer disproportionately affecting younger women (WHO, 2022b). With HIV levels increasing in crisis-affected contexts, and given the correlation between HIV and SRH information, SRH education is important to cancer prevention in younger women. Research has shown a Pap smear (or Pap test) can lower the incidence of cervical cancer by 60% to 90% and mortality by up to 90%, particularly when more than 70% of the population at risk get the test (Aimiosior & Omigbodun, 2020). A study in a Nigerian female secondary school on learners' knowledge related to cervical cancer screenings found 85% of learners were not adequately informed about the cancer itself or its causes, let alone the related screening methods. This highlights the need to provide cervical cancer information in emergency contexts and include it within SRHR education, as the lack of testing was related to a lack of information and guidance on how and why to test and go for follow-ups (Aimiosior & Omigbodun, 2020).

### Challenges specific to refugee populations

Mobile populations, including refugee and migrant populations, are at increased risk of STIs, including HIV (WHO, 2016). Therefore, inaccessibility of or limited access to critical information around SRH becomes particularly damaging. This is amplified for girls with disabilities, who have historically been denied the access and agency to fulfill their SRH rights and are less likely to have information on, and be screened for, HIV/STIs (Berger et al., 2022). When forcibly displaced, refugees can face extreme hardship due to food, housing, and income insecurity, and due to a lack of decent job opportunities, many refugees may resort to transactional sex to meet their basic needs or obtain security and protection while crossing borders. Recent border closures as a result of COVID-19, as well as COVID's impact on both mobility and the economy, have created additional entry points for transactional sex among displaced populations. In humanitarian contexts with forced displacement, where choices and opportunities are limited, this sexual exploitation brings increased risks to girls' SRH, increasing risks of HIV/STIs alongside mental health concerns (Lauren et al., 2020). These risks continue to be heightened for girls with disabilities, who hold less power in society and depend more on others for survival.

Having migrated from their homes, refugees lose the social networks that are integral to accessing useful information, including on SRH, and this compounds the difficulties they face in navigating their new country's healthcare system. Refugees may be unfamiliar with how SRHR services in the host countries are structured and provided, as well as lack information on reporting pathways for GBV and lack information around their rights in the host country. Refugees have limited awareness of SRHR referral pathways, pointing to the need for education and information; for example, one study found only 43% of babies in Cox's Bazar, Bangladesh, were being delivered in healthcare facilities due to low awareness (Schnabel & Huang, 2019). Many women and girls also confront major discrepancies between the legal and policy environment in their home country compared to their host country: for example, refugees from Ukraine finding abortion care and emergency contraception to be unavailable in host countries like Poland (Regional Gender Task Force, 2022).

While SRH risks increase across crisis settings, the impacts continue to be more acute for girls and adolescents with lower levels of education. In one study in Kule Refugee Camp, Ethiopia (where a high prevalence of syphilis was found among pregnant women), pregnant women who were unable to read and write were 6.6 times as likely to be syphilis ser-positive as those who attended high school and above. Syphilis potentially causes stillbirth and birth defects, highlighting education's importance for both a mother's SRH and that of her family (Tadesse & Geda, 2022).

As seen following the Ukraine invasion, national CSOs in many countries have led efforts to respond to refugees' SRHR needs. However, these organizations operate in challenging circumstances, and when capacity is strained, they often have to move from long-term education and rights work to immediate humanitarian response to meet refugees' urgent needs. This leads to a shift from sexual and reproductive education to service provision (Regional Gender Task Force, 2022). However, there are cases in which NGOs have been able to promote inclusive SRHR, such as HIAS Kenya (see Box 10).

### Box 10. SRHR education delivered by, and for, youth refugees in Kenya

Figure 10. HIAS advocacy approaches (HIAS, 2021, p. 3)



HIAS Kenya identified that refugees' SRHR needs were not being adequately integrated into humanitarian planning and work, with one of the most vulnerable groups being refugee youth. In 2019, HIAS set out to improve the state of SRHR for refugee youth through three main advocacy approaches: educating the community, building evidence, and engaging the state.

HIAS recognized that promoting increased and sustained access to comprehensive, high-quality SRH services requires raising awareness and providing education, so it is using refugee youth to promote awareness via social media. It recruited and trained refugee peer champions to conduct peer education discussions with refugee populations in Kenya. The peer champions' success led to invitations for them to speak to learners in neighboring schools and requests for them to provide guidance and counseling. These peer discussions focused on refugees themselves but also involved faith-based leaders in the communities, who were influential in community resistance to SRHR education. As a result, fewer early pregnancies were seen in refugee communities where HIAS had worked (HIAS, 2021).

Two of the main unmet SRHR needs of adolescent girls are around (1) access to contraception and (2) information and services around HIV/STIs. While the supply of contraceptives in crisis-affected countries is a key barrier to girls' ability to access them, SRHR education – with a focus on addressing gender inequalities – is key to addressing this unmet need due to the stigma and negative attitudes among health providers and community members, including parents and spouses. A recent Women's Refugee Commission survey found that 41% of global contraceptive programs in humanitarian settings reported contraceptives were never, or only sometimes, available to unmarried adolescents because of those gatekeepers limiting access (Rich, 2021). So, while investment in the provision of contraceptives is vital, decision-makers must be educated so they can start viewing contraceptives as lifesaving services. Awareness and SRHR education are critical to support this.

Men's awareness and education are also vital. In Bangladesh, for example, family planning services in government-run facilities are restricted to registered married couples. Within the Rohingya community, male partners often limit women's access to SRHR services. Adolescent girls are particularly vulnerable when these restrictive policies are in place, as they have the highest unmet need for contraceptive services but are often not married until well into reproductive age. Among women wanting

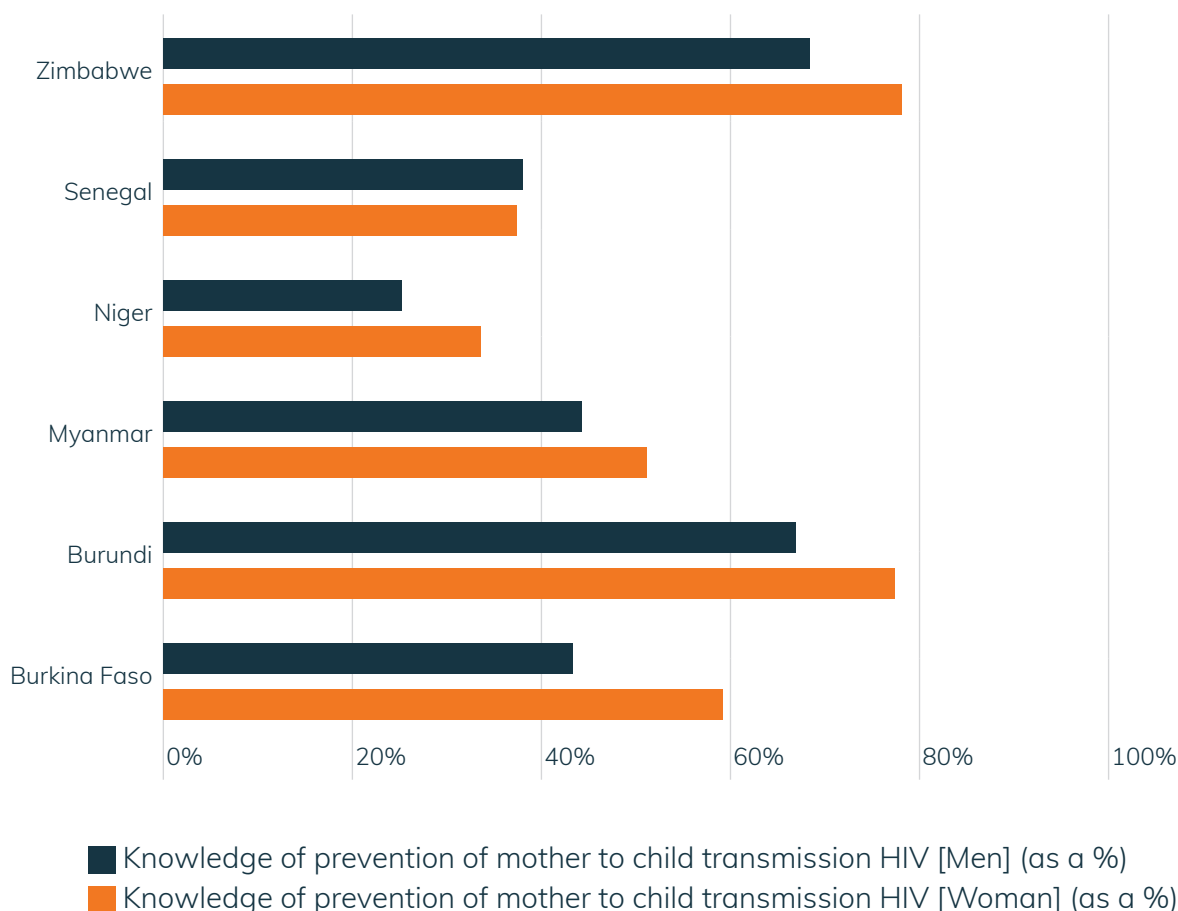


to avoid pregnancy in LMICs, unmet need is much higher for adolescents than it is for all women aged 15 to 49 (43% vs. 24%) (Guttmacher Institute, 2020). However, it is not only adolescent girls who face these challenges but also married women whose husbands may not allow them to use contraceptives. Therefore, engaging men in SRHR education is central to addressing these inequitable power dynamics and achieving gender equality.

Due to patriarchal structures, men and boys have often been absent from the focus on SRHR, yet SRHR education can start to address harmful male gender norms that discourage health- and help-seeking behaviors and promote sexual dominance. Thus, men’s engagement in SRHR education needs to move beyond primarily focusing on their role as supportive peers and partners to instead engage them as stewards of their own SRH. Successfully meeting the SDG target on ensuring universal access to SRHR will be impossible without engaging men and boys as full, equitable partners who are invested in their own health and are supportive of – and not decision-makers in – women’s health and autonomy (Shand & Marcell, 2021).

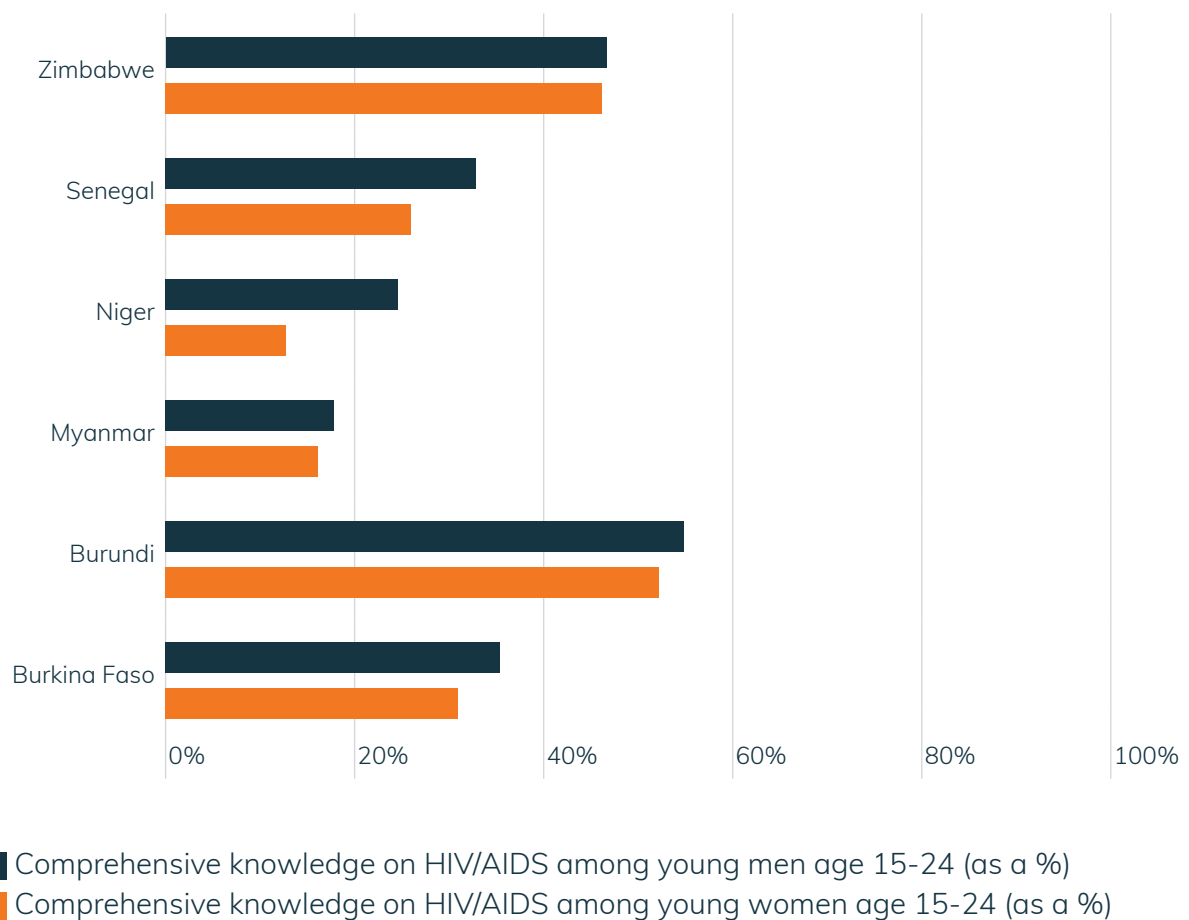
Figures 11 and 12 highlight the other main unmet SRH need, knowledge on HIV/AIDS. The number of crisis-affected countries with post-2015 data available is limited. Nevertheless, these figures demonstrate a concerning lack of comprehensive knowledge on AIDS, as well as the need for education around the prevention of mother-to-child transmission of HIV.

**Figure 11. Male and female knowledge on preventing mother-to-child transmission of HIV**



Source: Countries’ 2015–2021 DHS survey data, covering only six of the 44 crisis-affected countries that had DHS data from 2015–2021. Retrieved in February 2023 from [STATcompiler](#) by USAID.

**Figure 12. Comprehensive<sup>39</sup> knowledge on HIV/AIDS among young men and women**



Source: Countries' 2015–2021 DHS survey data, covering only six of the 44 crisis-affected countries that had DHS data from 2015–2021. Retrieved in February 2023 from [STATcompiler](#) by USAID.

Figure 12 shows that for the crisis-affected countries with post-2015 DHS data available, comprehensive AIDS knowledge levels among youth aged 15 to 24 remain low and are lower for women than men across all the countries represented. Only 13% of women from Niger had comprehensive knowledge on AIDS, followed by 16% of women in Myanmar. Lower HIV knowledge levels are consistent with higher rates of infection for adolescent girls and young women (Shamu et al., 2020) and knowledge of HIV/AIDS increased across all these countries with increasing levels of education, according to the USAID data from [STATcompiler](#).

While these statistics do not consider SRH's inclusion in the curriculum or correlations between increased comprehensive knowledge and levels of education, studies have shown that those who receive sexual education interventions increase their knowledge levels. For example, a review of 64 programs in LMICs found that learners who received school-based sex education interventions had significantly greater HIV knowledge, greater self-efficacy related to condom use or refusing sex, fewer sexual partners, and less initiation of first sex during follow-up (Fonner et al., 2014).

Another review found that sexuality and HIV programs that addressed gender or power were five times as likely to be effective as those that did not; 80% of the programs addressing gender or power were associated with a significantly lower rate of STIs or unintended pregnancy, while those that did not only had a 17% association (Haberland, 2015). This demonstrates the urgent need to have CSE that addresses inequitable power dynamics and harmful gender norms. Otherwise, women's rights can continue to be undermined and gender inequalities exacerbated even where a seemingly comprehensive curriculum is in place and being taught.

<sup>39</sup> Women and men are defined as having comprehensive knowledge of AIDS if they know the two primary prevention methods (use of condoms and having just one uninfected faithful partner) that reduce the chance of getting HIV; and know that a healthy-looking person can have HIV; and reject the two most common local misconceptions about HIV/AIDS transmission or prevention.

## 5.3 COVERAGE AND COMPREHENSIVENESS OF SRHR AND CSE IN CONFLICT- AND CRISIS-AFFECTED COUNTRIES

The prioritization of SRHR in humanitarian settings is a recent development. It was not until the 1994 International Conference on Population and Development (ICPD) in Cairo that there was general support for SRHR, and then, the 1995 Fourth World Conference on Women in Beijing when the international community acknowledged that women in displaced settings had an equal right to SRHR (Sch-nabel & Huang, 2019). During ICPD, national governments achieved consensus, resulting in a program of action that positioned SRH and gender equality at the heart of population policies as a prerequisite for sustainable development (Heidari et al., 2019). In response, global and regional frameworks and indicators have been developed to support the delivery of sexuality education (see Table 5, which features Eastern and Southern Africa). These indicators and frameworks are relevant for many of the crisis-affected countries discussed in this report.

**Table 5. Examples of regional/global CSE frameworks and indicators**

<b>SDG 4</b>	Goal to ensure inclusive and equitable quality education and promote lifelong learning opportunities for all
<b>SDG 4.7.2</b>	Measures the percentage of schools that provided life skills-based HIV and sexuality education within the previous academic year
<b>SDG 5.6.2</b>	Measures the number of countries with laws and regulations that guarantee full and equal access for women and men aged 15 years and older to SRH care, information, and education
<b>1994 ICPD Programme of Action</b>	Specifies key features of sexuality education to promote the well-being of adolescents: Education should take place both in schools and at the community level, be age-appropriate, begin as early as possible, foster mature decision-making, and specifically aim to improve gender inequality. Such programs should address specific topics, including gender relations and equality, violence against adolescents, responsible sexual behavior, contraception, family life, and STI/HIV/AIDS prevention.
<b>Eastern and Southern Africa (ESA) Ministerial Commitment</b>	A commitment signed by 15 Southern African Development Community countries; 20 countries endorsed and affirmed in 2013. Education and health ministers from these countries committed to accelerating access to CSE and health services for young people in the region. Comoros is the only Southern African Development Community country that is not part of this commitment.
<b>Southern African Development Community Protocol on Gender and Development, Article 11</b>	States that members should ensure that girls and boys have equal access to information, education, services, and facilities on SRHR and that member should adopt laws, policies, and programs to ensure girls' and boys' development
<b>Southern African Development Community SRHR Strategy for Ensuring CSE</b>	Notes that member states should accelerate and improve the delivery of quality CSE for in-school and out-of-school youth by the education and youth sectors

Source: Gender Links (2021)

To keep up the momentum following ICPD, the Inter-agency Working Group on Reproductive Health in Crises was established to ensure ICPD commitments were upheld in crisis contexts, and more and more young people have joined together to call for their right to sexuality education and urge their leaders to deliver on political commitments for current and future generations. At ICPD's Global Youth Forum in 2012, young people specifically called on governments to “create enabling environments and policies to ensure that they have access to comprehensive sexuality education in formal and non-formal settings, through reducing barriers and allocating adequate budgets.” (ICPD, 2012). Young people have been joined by communities, parents, faith leaders, and stakeholders in the education sector who are increasingly championing sexuality education as an essential component of a good quality, comprehensive, life skills-based education that supports young people in developing the knowledge, skills, ethical values, and attitudes they need to make conscious, healthy, and respectful choices about relationships, sex, and reproduction (UNESCO, 2018).

As this momentum has grown, more technical guidance and standards have been produced (especially from 2018 on) to support those designing curricula and developing programs to support CSE implementation. UN agencies have led the way in the development of global guidance, a number of international nongovernmental organizations (INGOs) have developed their own tools and guidance, and UNFPA's technical guidance is used globally for both in and out-of-school curricula. Examples include:

- **International Technical Guidance on Sexuality Education (ITGSE) (UNESCO, UNAIDS, UNFPA, UNICEF, UN Women, and WHO)**: An evidence-informed approach, this technical tool presents the evidence base and rationale for delivering CSE to young people in order to achieve the global SDGs. It highlights the importance of CSE being age-appropriate and suitable for learners' realities. The tool aims to support curriculum developers and program managers, and it is used globally by funders, practitioners, and civil society.
- **International Technical and Programmatic Guidance on Out-of-School Comprehensive Sexuality Education (CSE) (UNFPA, with UNESCO, UNAIDS, UNICEF, and WHO)**: Adapted from the ITGSE, this guides the development of non-formal, out-of-school CSE programs that aim to reach young people from left-behind populations.
- **Journey Towards Comprehensive Sexuality Education: Global Status Report (UNESCO, UNAIDS, UNFPA, UNICEF, UN Women, and Education 2030)**: This 2021 report draws on multiple data sources to provide a snapshot of how countries are advancing on their journeys toward school-based CSE, including a look at the coverage of laws and policies across the world.
- **Plan International's Putting the C in CSE**: Produced in 2020, this set of standards was developed to support educators and implementers in formal and non-formal settings to deliver effective CSE.

While there has been an increase in policies and programs supporting SRHR, these continue to be tailored toward heterosexual, cisgender women of reproductive age, as are sexuality education curricula, even those considered “comprehensive.” CSE programs often omit relevant content for lesbian, gay, bisexual, queer, questioning, intersex, and asexual + (LGBTQIA+) people, including information about sex characteristics or biological variations (which particularly affect intersex children and young people), and LGBTQIA+ people face increasing obstacles in accessing information and services (Heidari et al., 2019).

Increasing the challenge are the de-prioritization of SRHR among some education actors, combined with political resistance, leadership and coordination challenges, and scarce resources. Inconsistent monitoring and inadequate mechanisms to hold humanitarian actors accountable on SRHR for crisis-affected populations also continue to be problematic (Heidari et al., 2019).

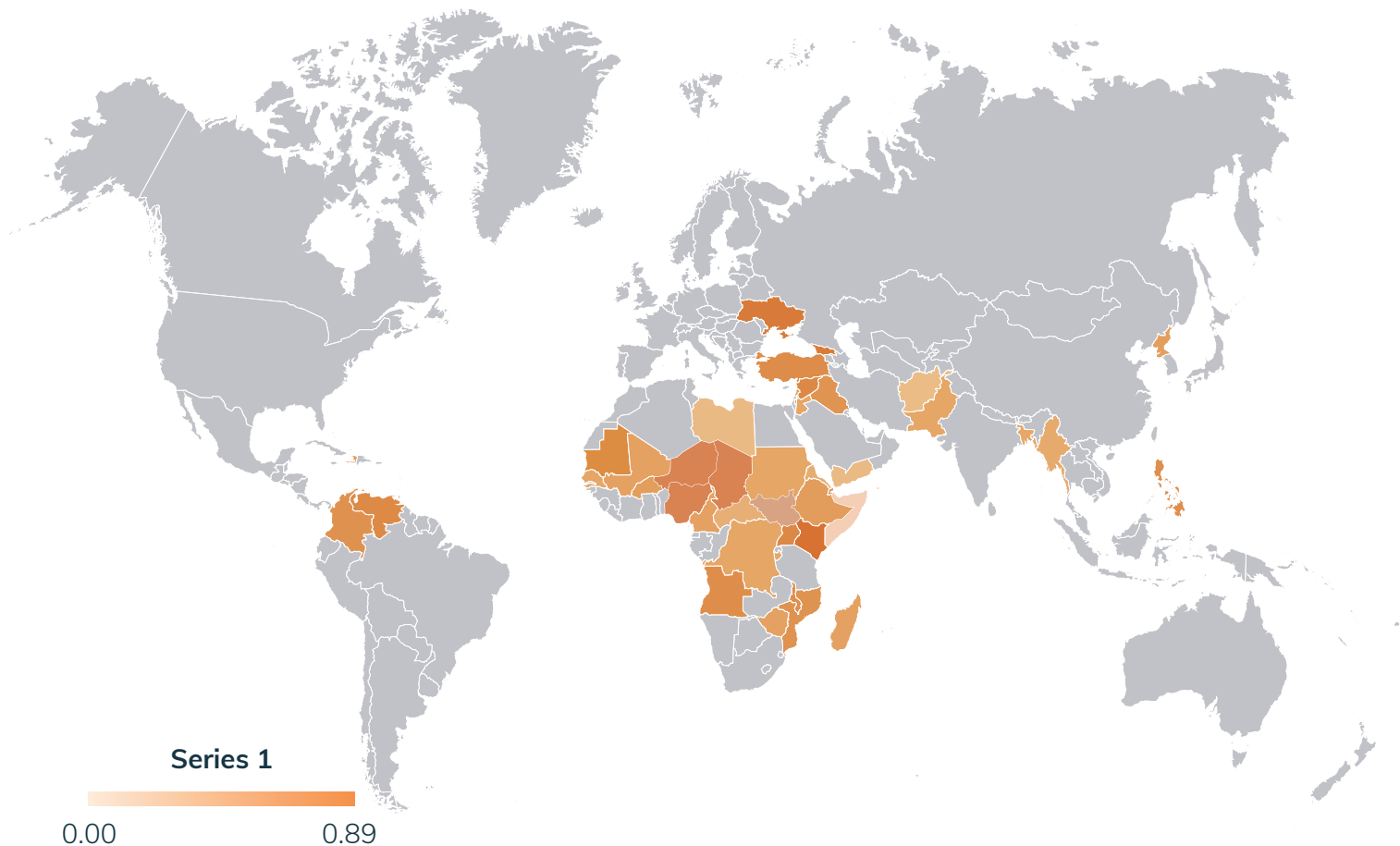
### 5.3.1. COVERAGE OF SEXUAL EDUCATION LAWS, POLICIES, AND CURRICULA

The Girl's Education Policy Index includes a set of indicators that measure countries' policy efforts related to girls' education; Figure 1 in Mind the Gap 2 mapped index scores for the 44 crisis-affected countries. One of these indicators assesses effective SRH policies, and we can see that 11 of the bottom 20 countries<sup>40</sup> on this indicator are among the 44 crisis-affected countries analyzed in this report (see

<sup>40</sup> Somalia, Jordan, Senegal, Libya, Cameroon, the Philippines, Iraq, Bangladesh, Afghanistan, Liberia, and South Sudan

Figure 13). The top 20 countries (not shown in Figure 13) have scores of at least 0.8 out of 1, while the bottom 20 countries score under 0.3, with limited bans on child marriage, ongoing legal restrictions around the availability of contraceptives, a limit on laws mandating sexuality education in schools, and a lack of separate toilet and sanitation facilities. Somalia scores the lowest on this index, with no minimum age for marriage; however, Somalia lacks data for the other indicators, making it difficult to understand the availability of contraceptives and whether sexuality education is mandated in schools.

**Figure 13. Girls' Education Policy Index ratings for crisis-affected countries: SRH indicator**



Source: Centre for Global Development (2021)

Cameroon does not perform much better on this index indicator, coming seventh-to-last out of 182 countries for which there is data and fifth-lowest for the 44 conflict-affected countries (Crawford & Hares, 2020). However, the UNESCO Global Status Report on CSE highlights that Cameroon has enthusiasm and open discussions on sexuality education at a policy level. However, this is not reflected at local levels, where there has been reluctance to embrace sexuality education. Initiatives are being put in place to address this challenge, including the development of a platform for journalists and influencers to exchange information related to sexuality education and a network of community radio stations to reduce misinformation on the subject (Wisbaum, 2021).

Mozambique, DRC, Türkiye, Ukraine, and Malawi perform much better against this index, with all five countries scoring above 0.7 on the SRH indicator and ranking among the top 50 countries (Crawford & Hares, 2020). Even within these better-performing countries, though, restrictive policies remain in place. For example, in DRC, the age of consent to sexual activity (14) does not align with the age of access to contraceptives (18); DRC also requires legal reforms to harmonize the age of consent to sex for boys and girls (Gender Links, 2021).

Of the 32 crisis-affected countries for which data is available, 23 have policies covering the inclusion of sexuality education at the primary and/or secondary levels (Table 6). However, these laws and policies are not always translating into comprehensive coverage of sexuality education across the curriculum, and five conflict- and crisis-affected contexts have no policies or laws mandating CSE.

**Table 6. Coverage of sexuality education laws and policies in conflict- and crisis-affected countries (data sources from 2017–2020)**

Policies cover primary and secondary education	Policies cover secondary education only	Have legal frameworks, laws, decrees, acts, and policies on sexuality education, but not specific to education	No laws or policies related to sexuality education
Angola	Ethiopia	Bangladesh	Afghanistan
Cameroon	Ukraine	DRC	Georgia
Central African Republic		Eritrea	Haiti
Colombia		Pakistan	Libya
Congo			Myanmar
Kenya			
Madagascar			
Malawi			
Mali			
Mauritania			
Mozambique			
Niger			
Nigeria			
Philippines			
Senegal			
South Sudan			
Sudan			
Syria			
Uganda			
Venezuela			
Zimbabwe			

Source: Wisbaum (2021, p. 19)

DRC has legal frameworks in place and takes an integrated approach with its national reproductive health program and its national adolescent health policy, both covering CSE and sex education. However, the country continues to face patriarchal cultural limitations: for example, the issue of condom use as a contraceptive method is not supported in traditional Congolese cultural settings, so while the national policy and CSE program do encourage condom use and multiple contraceptive methods, strong cultural resistance remains. This DRC has the fourth-lowest contraceptive prevalence among the Southern African Development Community member states, which helps explain why high teenage pregnancy rates persist (Gender Links, 2021). This example demonstrates that even where supportive policy frameworks are in place, cultural norms and community resistance to sexuality education can impact delivery.

### 5.3.2. COVERAGE OF CSE CURRICULA

Overall, the evidence base continues to grow and strengthen on the effectiveness of school-based sexuality education. Research by UNESCO (2018) for the updated ITGSE concludes that sexuality education built knowledge on different aspects of sexuality, behaviors, and risks of pregnancy or HIV and other STIs. Strong evidence also concludes that age-appropriate sexuality education improved

SRH-related attitudes. Nevertheless, a number of crisis-affected countries still have no relevant content in the curriculum (see Table 7). Even where the curriculum is in place, it does not always translate into learner benefits, primarily because of limited teacher knowledge around the subject, a lack of training and support, and teacher discomfort and a lack of confidence to deliver the content. Teacher discomfort around certain topics can often lead to only parts of the curriculum being delivered as well as there being countries where curriculums are in place but resistance has led to it not being taught. For example, Mali had a curriculum at the primary and secondary levels, but in December 2018, the Malian government announced plans to cancel this primary CSE program after a proposed sexual education textbook evoked opposition from religious leaders (Cone & Lamarche, 2021).

**Table 7. Curricula related to sexuality education in the education system (data sources 2019–2020)**

Gender-responsive, life skills-based HIV and sexuality education is included in primary and secondary education curricula	Gender-responsive, life skills-based HIV and sexuality education is only part of secondary education curriculum	There is related content across the curriculum, though the level or topic are unclear	There is no relevant content in the curriculum
Angola	Colombia	Afghanistan	Chad
Burkina Faso	Mali	Bangladesh	Djibouti
Burundi	Senegal	Pakistan	Ethiopia
Cameroon	Ukraine		Georgia
Central African Republic			Haiti
Congo			Mauritania
DRC			Somalia
Eritrea			Sudan
Kenya			
Malawi			
Mozambique			
Myanmar			
Niger			
Philippines			
South Sudan			
Uganda			
Venezuela			
Zimbabwe			

Source: Wisbaum (2021, p. 25)

Only 15 conflict- and crisis-affected countries report on SDG indicator 4.7.1, although there are inconsistencies in the years they report this data (see Table 8). Only the Philippines, Burundi, and Venezuela report that 100% of primary schools provide life skills-based HIV and sexuality education. In the majority of the countries with data available, we see that a higher percentage of secondary schools than primary schools provide this curriculum. In Niger, for example, only 3.4% of primary schools deliver a life skills-based HIV curriculum, while this jumps to 100% for the secondary level. Thus, learners attending secondary education are more likely to receive sexuality education, although fewer learners, especially girls, attend secondary school; 90% of girls are more likely to be out of school at this level than in non-crisis settings (World Bank, n.d.). This demonstrates the need for CSE to be prioritized at the primary level. To support this, more awareness is needed at the community level around the benefits of SRHR to address ongoing resistance to sexuality education for younger girls and misinformation that sexual education encourages having sex early, when in fact, it has been found to delay girls engaging in sexual relationships (Fonner et al., 2014).

**Table 8. Percentage of schools providing life skills-based HIV and sexuality education**

Country	Primary (%)	Lower secondary (%)	Upper secondary (%)	Reporting year
Bangladesh	N/A	100	77	2018
Burkina Faso	2	21	16	2020
Burundi	100	100	100	2017 <sup>41</sup>
Chad	0	N/A	N/A	2021
DRC	0	0	N/A	2015
Mauritania	0	0	0	2019
Myanmar	84	85	90	2018
Niger	3.4	100	100	2021
oPt	0	96	49	2021
Philippines	100	100	100	2020
Senegal	17	N/A	N/A	2021
South Sudan	N/A	N/A	39	2018
Uganda	0	0	N/A	2017
Venezuela	100	N/A	N/A	2016
Zimbabwe	61	57	67	2020

Source: Data retrieved February 2023 from [the UIS database](#) (also available from UIS SDG indicator 4.7.2)

### 5.3.3. CSE AND OUT-OF-SCHOOL CHILDREN

While CSE is designed to be integrated into the formal education system and school curriculums, adolescents who are out of school have the right to SRHR information and services and can also be more vulnerable to misinformation and exploitation. Girls with disabilities are more likely to be out of school and are more often excluded from SRHR information and services. To address this need, UNFPA recently published [guidance on CSE for out-of-school children](#) that promotes the same topics and learning objectives as the revised UN ITGSE, showing that the content is the same for all children and young people (IPPF, 2022). However, the guidance also provides evidence and practice-informed guidance specifically for programs that deliver CSE out of school and programs to address the needs of marginalized groups that are unlikely to be addressed within the school context (Wisbaum, 2021).

According to an analysis of CSE curricula content across all 44 crisis-affected countries, only five countries have a CSE curriculum explicitly targeting out-of-school children: Djibouti, Iraq, Jordan, Lebanon, and Syria (UNFPA, 2020). Interestingly, the out-of-school curriculum is far more comprehensive than in-school in some of these countries (e.g., Lebanon). This out-of-school curriculum covers topics such as understanding gender, violence and staying safe, sexuality, and sexual behavior, while both the primary and secondary in-school curricula are limited to the human body and development. This points to the flexibility to deliver a wider range of content unrestricted by the formal curricula and to provide more space to underpin the teaching with a gender-transformative approach aiming to shift unequal power dynamics and give girls and women control over their sexual and reproductive behaviors.

<sup>41</sup> Note that Burundi reported data for primary education in later years than 2017; however, data for lower and upper secondary education for the same years was not available.



Engaging in many programs targeting out-of-school children can also benefit young people who do attend formal school, as community-based CSE programs are often held during weekends, evenings, and school holidays. These programs can expand on the content discussed within the classroom and deliver practical guidance, which in some places, is forbidden in school (such as condom demonstrations). CSE offered in non-formal and community settings also offers opportunities to sensitize parents and community leaders and to establish stronger connections with SRH services. For example, Myanmar had no curriculum providing CSE and SRHR information in the migrant learning centers within ethnic armed organization-controlled areas, although the government school delivered a life skills curriculum that included sexuality education. Plan International and partners worked to fill this gap by strengthening young people's knowledge on CSE topics out of school (see Box 11).

### **Box 11. Developing a CSE curriculum for displaced populations in the Thailand-Myanmar ethnic armed organization-controlled areas**

The unstable, crisis-affected border area between Thailand and Myanmar is controlled by ethnic armed organizations. Adolescents in this area have been left behind due to the long-term armed conflicts, and young women and girls (especially those living within the vulnerable context of migration) face gender inequality; a lack of decision-making power; discrimination related to menstruation, HIV, and adolescent pregnancy; and high levels of GBV. Social and cultural norms in this area reinforce negative gender roles and limit girls' agency and decision-making on SRHR.

In these areas, education takes place in migrant learning centers controlled by ethnic armed organizations, without curricula providing CSE or SRHR information. In response, Plan International went through a two- to three-year process, beginning in early 2020, of developing, piloting, and revising a CSE curriculum for the out-of-school adolescents in Kayin State. The curriculum aligned with the ITGSE, was based on Plan's comprehensive CSE standards, and took an approach toward sex and relationships that was comprehensive, human rights-based, sex-positive, gender-transformative, and inclusive. The curriculum was translated into and delivered in the local language (S'gaw Karen) rather than just Burmese, which enabled the adolescent learners in the migrant centers to fully engage and provide input into the design process in their native language, which ensured that the curriculum used the right terms, language, and approach.

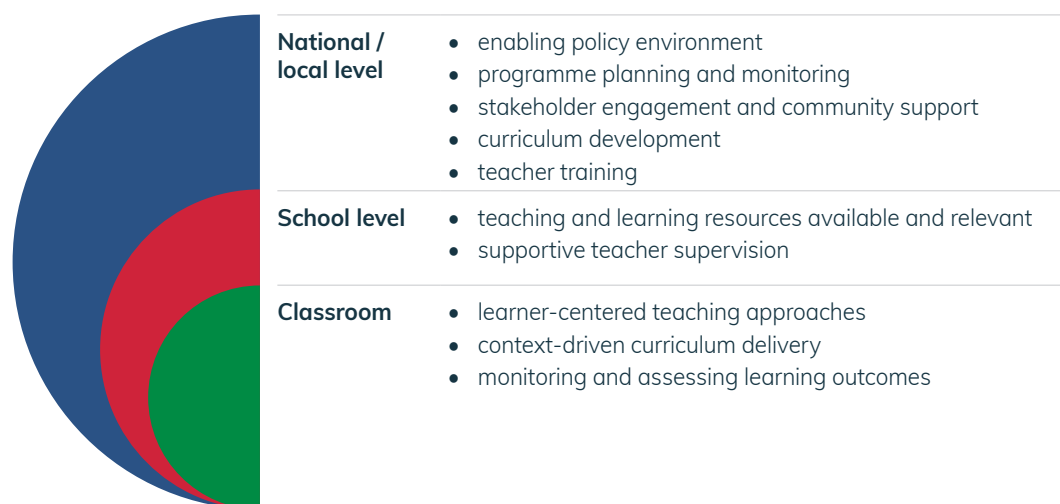
To help deliver this curriculum, trainers were recruited from the migrant learning centers and the local community. This was essential to address community resistance, as well as to ensure the continuity of curriculum delivery during the armed conflict. These trainers' understanding of the local context and their local ties enabled them to deliver cascade training to the community with the support of community members.

Another successful intervention targeting 10- to 24-year-olds out of school was "Y Access," which was delivered in northern Nigeria. This comprehensive health program demonstrated an increase in HIV testing rates and behavioral changes (including delay of sexual initiation, fewer sex partners, increase in condom use/consistent condom use, and increased use of contraceptives) among young people participating in the intervention. Y Access provided CSE through youth groups and mobile phones and was able to reach a large proportion of its target age group in the region (Access Consortium, 2020).

#### **5.3.4. WHAT IS NEEDED TO DELIVER EFFECTIVE CSE CURRICULA?**

A holistic approach is needed to deliver effective CSE that combines national laws and policies supporting CSE across levels with international CSE standards and teacher training, drawing on best practice. As Figure 14 demonstrates, other factors also need to be considered at the classroom, school, and national/local levels: community support, relevant teaching and learning resources to support the effective delivery of a CSE curriculum, and the use of learner-centered teaching approaches, among others.

**Figure 14. Factors enabling successful CSE implementation at different operational levels of the education system**



Source: UNESCO & Guttmacher Institute (2019)

### Teacher capacity

Preparing teachers and building their capacity to provide high-quality CSE is critical, as school-based programs taught by poorly prepared teachers could deliver inaccurate information or reproduce values and attitudes that silence discussions on gender, sexuality, and rights. Adequate preparation ensures the teachers involved feel comfortable delivering the required breadth of CSE topics, have the correct knowledge to do so, and can engage appropriately with learners in discussions about sexuality (UNESCO & Guttmacher Institute, 2019). Teacher training and support for CSE delivery must pay attention to existing social norms around sexuality education as well as teachers' own views and biases that could affect how the curriculum is delivered and whether it is done in a truly inclusive and gender-transformative way. Teachers are important role models for adolescents, which is why it is critical that teachers deliver a rights-based curriculum in a nonjudgmental way that does not reinforce harmful gender stereotypes or cultural norms. Many contexts may need efforts to work with teachers to challenge their own attitudes, values, and biases that influence their ability to deliver CSE in a truly inclusive way for all. Discrimination, stigma, and misconceptions around disability also need to be considered to ensure girls with disabilities are not prevented from knowing and understanding their rights; often, their agency is limited and decisions around their SRH are made for them.

The UNESCO global status report on CSR noted the challenges teachers face in providing sexuality education due to concerns about parent and community member views, as well as personal discomfort. Thus, although most countries reported providing some sexuality education training to teachers, findings indicate that this may be inadequate and that a number of barriers may prevent effective delivery (Wisbaum, 2021).

Importantly, teachers need to be able to tailor curricula and teaching materials to respond to learners' needs. In a study on CSE delivery in Kenya and the bottlenecks to effective teacher delivery, one Kenya NGO representative said:

*“When you look at issues that you might need to address, assuming you want to address issues in West Pokot or Kajiado, you might want to have a content which is female genital mutilation and gender-based violence specific, but we are saying issues might be irrelevant in Makeni or some other areas where they don't practice female genital mutilation. You might not want to use the same methodology to talk about HIV, or even the same emphasis when you are doing it in Kisumu, such areas with high HIV prevalence compared to some other areas which are considered to have low prevalence rates”*

(UNESCO & Guttmacher Institute, 2019)

Ongoing teacher training in CSE content, and the ability to contextualize through participatory methodologies, are essential ingredients for success. Teachers don't have to be experts on sexual health but do need to be able to explain specific CSE topics – moving beyond talking about puberty as physiological and biological changes to discuss the effects it has on learners' daily lives. Teachers who are trained to deliver CSE can act as agents of change and provide learners with good-quality information, which in turn helps prevent reproductive risk behaviors. For example, a study of 75 Mexican public schools found that training in CSE improved teachers' knowledge about SRH and that learners who received counseling from teachers trained in participatory, innovative CSE techniques used more contraceptive protection and delayed sexual debut (Ramírez-Villalobos et al., 2021).

As another example, the Pakistani NGO Aahung builds public and private school teachers' capacity to integrate quality life skills-based education into the school curriculum. Teachers are equipped with accurate knowledge and an effective teaching methodology to discuss adolescent issues in the classroom (Jahangir & Mankani, 2016). The curriculum follows the WHO key guidelines for life skills-based education, adapted to the local context, and the teachers undergo a comprehensive training of trainers and receive teachers' guides and accompanying workbooks on life skills-based education for girls and boys. This is supplemented by on-site teaching support and annual refresher trainings. Activities reaching a wider audience (such as theater, art competitions, and debates on life skills-based education topics) are organized at least once a year in each institution. This interactive teaching methodology increased awareness on rights within marriage and negotiation around SHRH issues (such as bodily rights and birth spacing), as well as increased knowledge about the dangers of early pregnancy (Jahangir & Mankani, 2016).

While it is promising that many teaching and learning materials have been developed to support CSE delivery, resources may not always be reaching teachers. Some reporting indicates that teachers lack materials (Wisbaum, 2021), highlighting the importance of supporting NGOs and development partners in delivery and training around these resources.

### **Box 12. The development of in-school CSE modules in Mali**

In Mali, CARE International noticed that while schools were providing basic SRH content around bodily anatomy, discussions were absent around adolescents' ability to have a safe, satisfying sex life and their decisions and freedoms around reproduction. In response, CARE's Janndé Yirriverre ("Education for Change") project worked to co-develop CSE modules with the Ministry of Education through consultations with teachers, learners, and parents, with the goal being to empower adolescents to make their own SRH choices and enjoy consensual relationships.

This curriculum was developed in consultation with youth in order to be age-appropriate and address the target population's specific needs and concerns. To roll it out, CARE trained 451 teachers across 50 schools, and CARE delivered training in stages and followed up with in-school coaching support to avoid there being an information overload for teachers and ensure their understanding and ability to effectively deliver the content. This is critical in conflict settings, where the environment's uncertainty makes it harder to retain information from lengthy trainings, as teachers are dealing with ongoing tensions and insecurity.

The program addressed teachers' initial reluctance and resistance to deliver SRHR content, as well as hesitation by parents and the community, by working closely with local education officials and conducting dialogues with community leaders and parents. It worked with local women's networks to conduct these community-level dialogues and facilitated reflections on the parents' own experiences, especially those of mothers, to understand their views and where the resistance was coming from.

*For full details, see Case Study 5 in Annex 1 (and additional information on the friendship circle approach also used in this program in Box 15).*

## 5.4. HOW SRHR EDUCATION CAN EFFECTIVELY REACH GIRLS IN CRISIS-AFFECTED COUNTRIES

In some contexts, opposition and resistance have resulted in the withdrawal of CSE curricula (especially for younger age groups). Given this reality, continued efforts are needed to ensure communities are aware of the health and social benefits of SRHR education, including CSE, as well as to address misinformation about drawbacks. Working closely with decision-makers, influencers, local politicians, and religious authorities when designing sexuality education is needed across all countries, including crisis-affected ones. It is often parents who have the highest levels of resistance, yet this can be due to the influence of community and religious leaders. While parents may not oppose CSE and support certain elements of CSE delivery, such as STI testing, studies highlight that parents take issue when they perceive curricula as being delivered when children are “too young” or as containing subjects or ideas that contradict the guidance they would give as parents (Access Consortium, 2020).

Gaining community support and overcoming resistance were two components of a successful, sustainable CSE program in Pakistan, where two NGOs – Aahung and Rutgers Pakistan – reached over 500,000 learners in all four of the country’s provinces with life skills-based education. Their success came down to the time spent understanding the genuine, nuanced context within the communities and developing the program in a way that recognized deep-rooted societal and cultural barriers to sexuality education right from the planning stage. To build understanding and respond to opposition and misunderstanding, the NGOs collaborated with parents, school officials, religious leaders, media personnel, and adolescents themselves. Box 13 highlights some of the specific strategies used, which can be taken as best practice in building community support for CSE.

### Box 13. Strategies to build community support for CSE

- Tactfully designing and framing the curricula with careful consideration of context, language, and sensitive topics
- Institutionalizing the programs within the school system
- Showcasing the programs to increase transparency
- Engaging the media to build positive public perceptions
- Looking for windows of opportunity to shape public discourse

Source: Wisbaum (2021)

*“I have two daughters, one is studying in this school and the other has graduated from Grade 10. She was really fond of the LSBE course and often used to share whatever she learned from it. When my elder daughter completed her school, my husband decided to marry her with his nephew. But my daughter wanted to complete higher education. She spoke with my husband and convinced him to let her continue her education. My husband agreed but was unwilling to support her financially. Now, my daughter is working as an assistant teacher in this school and attending colleges in the evening to complete her formal education.”*

*Mother of an LSBE course attendee in Pakistan (Jahangir & Mankani, 2016)*

### 5.4.1. THE ROLE OF YOUTH AS ADVOCATES FOR SRHR

An outreach model that has proven highly effective in providing SRHR information is using youth as advocates and peer educators. The involvement of girls and youth should be integral to all stages of an SRHR program and central to the consultations when developing a new or revised CSE curriculum. When CSE curricula are developed in consultation with young people, it is more likely to be age-appropriate and responsive to the changing needs of those youth for whom the curriculum is designed. To ensure the devel-

opment of a fully inclusive curriculum, girls with disabilities also must be central in the consultation process to ensure their needs are addressed and that the training or curricula being developed challenges discriminatory norms and myths, such as those suggesting that girls with disabilities are not sexually active.

Engaging young people promotes their participation and encourages them to build effective communication, teamwork, and leadership skills. They can provide valuable input on where services are accessible and where they are not, as well as where and how young people are exposed to violence. These youth should be trained on how to provide health information, conduct health education sessions, assist in camp registration processes for displaced persons, become facilitators in child-friendly and adolescent-friendly spaces, and serve as teaching assistants and nurse aides (IPPF, 2022).

The Palestinian Family Planning and Protection Association used this approach in the West Bank and Gaza Strip. It introduced CSE by contextualizing the IPPF-designed *It's All One Curriculum* and engaged with peer educators, who conducted community outreach sessions in Hebron; refugee camps in the West Bank and Gaza Strip; and schools, youth centers, and women's centers. When people were staying home during COVID-19, the association engaged 70 youth as peer educators to conduct 280 sexuality education sessions in the West Bank and Gaza via Zoom and WhatsApp. This outreach model proved effective, as young people knew where to find other young people outside of the formal education structures, and peer education became easier with trust and relatability in place (IPPF, 2022).

Another example is found in Lebanon, where the Lebanese Association for Family Health (SALAMA) trained Syrian refugee adolescents and youth, as well as young people from the host community, on SRHR content. They made videos with, and for, young people and posted them on Facebook, where youth could watch when they had time and privacy. These videos were well received by Syrian refugees (IPPF, 2022).

#### **Box 14. The informal provision of CSE modules for Syrian youth**

In partnership with Questscope for Social Development, UNFPA began implementing “A Space for Change” in Zaatari Youth Center in 2015. It is the only dedicated youth center in Jordan's Zaatari Refugee Camp where Syrian refugees can come to engage in sports, art, and music, as well as to receive essential SRH and GBV awareness training that includes life skills. Over 1,500 youth benefit from this center and this awareness training every year, equipping them to take control of their SRH and take ownership of their own decision-making in this area.

With high rates of child marriage – reaching 53% – and significant misinformation and stigma around menstruation, the camp had a clear need for informal SRHR information. Generally, there is a lack of SRH education across Jordan, and CSE is culturally unacceptable. Thus, as with many of Arabic countries, it does not yet have a CSE curriculum in schools and a huge knowledge and provision gap exists, as well as substantial resistance from communities, including religious leaders.

Thus, UNFPA and Questscope for Social Development worked to gain acceptance by using language the community understands rather than labeling the program as “CSE.” They developed a toolkit called “I Change” and discussed content with the community, with a focus on the health aspects of CSE and preventing GBV. Syrian outreach volunteers from the community and trained Jordanian youth educators provided awareness-raising sessions for parents around the SRHR of young people, encouraging them to have open dialogues about this with their children.

The toolkit was designed for youth and meant to be interactive and engaging. It was developed through a consultative, participatory approach while also aligning closely with other content being delivered in the Arab region. The intervention's reach and impact were enhanced by having youth educators trained to deliver the modules, enabling adolescents to open up via detailed discussions and build trust among peers. Through this program, youth have started to show the confidence to discuss areas previously thought of as taboo, such as the challenges the LGBTQI+ community is facing. Additionally, with the use of a private question box, these youth have gained the confidence to ask about more sensitive topics. More youth continue to request referrals for SRHR or GBV cases following the training, and girls better understand their bodies, consent, and the right to say no. As a girl respondent in the youth center said: “I love myself more now, because I know how to express myself more, and I start saying no for things that bother me.”

For full details, see Case Study 6 in Annex 1.

## 5.4.2. DELIVERING CSE THROUGH ONLINE PLATFORMS

Learning platforms moved to the internet during the pandemic, and therefore, advances in CSE and adolescent SRH knowledge were needed to transition to include internet-based curricula and awareness-raising. These advances were beneficial, but as the *Mind the Gap 2* chapter on distance education demonstrated, the move to online learning can deepen education inequalities – with girls often having the most limited access, especially in crisis settings (INEE, 2022b). This highlights the critical role that school-based CSE will continue to play going forward, especially where private access to digital services remains limited.

Young people have developed and led many platforms themselves, targeting their peers. These platforms can often have greater reach than ones developed by adults. Adolescents are attracted to discreet, shame-free spaces in which users can ask any questions, including ones that might not be covered by sources such as school-based sexuality education (UNESCO & UNFPA, 2020). *Love Matters* is one such successful web platform and is active across a number of countries, including Kenya, DRC, and Nigeria. It uses a distinctive model that is designed to reach young people with open, honest, and pleasure-positive information on love, sex, and relationships. *Love Matters* creates localized, digital communities that use content, engagement, and moderation as the main tools, with information delivered across multiple platforms, including Facebook, Instagram, and YouTube (UNESCO & UNFPA, 2020). Additionally, a Care International program in Mali uses a digital platform to provide relevant, age-appropriate information to both boys and girls in and out of school (see Box 15).

### **Box 15. Using digital platforms within friendship circles as a means to equip youth in and out of school with SRHR knowledge in Mali**

CARE International's Janndé Yirriverre ("Education for Change") project in Mali is working with 25,031 in-school and out-of-school adolescents in order to facilitate positive shifts in gender norms associated with SRH and GBV, as well as encourage increased access to SRH services from a baseline of only 2%. With frequent teacher strikes and school closures due to insecurity, learners' exposure to content in school is often disrupted; additionally, this in-school content rarely reaches out-of-school adolescents, particularly those from severely marginalized households with high levels of drop-out.

CARE developed out-of-school spaces called friendship circles, or *amicales*, to help fill this gap. These circles enable broader access to information and ensure continuity of access to SRHR information and dialogues between adolescents during crisis. These friendship circles bring together those mainly aged 13 to 17 in mixed groups of in- and out-of-school adolescents to learn about SRHR issues. The learners are supported by teachers from the schools (where this project was also introducing a new sex-positive and rights-based CSE curriculum). These teachers were trained as mentors to facilitate and support discussions within the groups. The friendship circles were also designed to have learners become part of the delivery process to improve their leadership skills, seeing them lead outreach programs to out-of-school adolescents and establish and run these circles outside of the school environment. As 17-year-old Ramata from Bandiagara described:

*When I got involved in the [Education for Change] project, I had little knowledge of SRH because I was using traditional medicines as contraceptives, which caused awful effects on me. I was always in trouble with severe stomachaches. I took advantage of SRH information received from the amicale and teachers, to go to the health center, where a specialized woman doctor advised me to use a better contraceptive method, which saved me from infections and relieved the pains I felt before. Today, I am not facing issues anymore, and I am preventing an unwanted pregnancy.*

In addition to teacher mentors and peer leaders, the friendship circles provide information and guidance through a mobile platform providing information on SRHR, GBV, and suitable service providers in nearby locations. This platform enables content to be shared in response to questions asked through the platform, ensuring that information is tailored to each group's needs and challenges. Interaction with the platform has been very high, and participants used information shared to advocate with local authorities, peers, and parents on issues such as early marriage, harassment, and access to SRH services. These friendship circles continued to meet during school closures, ensuring the continuity of SRHR information and leading to changes in attitudes and behaviors.

*For full details, see Case Study 5 in Annex 1.*

A study by Restless Development into how young people engage with digital platforms to get SRHR information found that spaces are most successful when they do not require signing up or personal details, they are specifically designed for a community, the content is interesting, they use formats that youth enjoy, and the content is accurate and reliable (UNESCO & UNFPA, 2020).

More research is needed, as there is not yet rigorous evidence on positive behavior changes related to these web-based platforms. However, smaller NGO-led studies are starting to show some effect. Digital interventions alone are unlikely to lead to the desired SRHR outcomes, but they could be key to achieving deeper and wider impact when they are supported by school-based, gender-transformative sexuality education and investment in service delivery.

One notable example of an online tool is the [Sexuality Education Review and Assessment Tool \(SERAT\)](#) housed on the UNESCO Health and Education Resource Centre website. SERAT provides an online library with access to more than 6,000 downloadable resources, and ministries of education and partners have developed further resources to support both learners and teachers, such as a combination of printed curriculum materials for home use and scripted lesson plans for TV and radio learning. With digital spaces now offering new options for learning, access to digital sex education can help to fill gaps in places without sufficient or effective sex education in schools, as well as complement current school-based CSE (Gender Links, 2021). However, this online support should be a complement to classroom teaching, with a UNESCO (2020) report warning that sex education for young people should translate to digital spaces alongside the safe and age-appropriate continuation of other CSE.

*“Honestly I prefer meeting in person, but now it’s a pandemic, so we go through digital media and that is easy to use to share knowledge or information”*

*— 15-year-old Indonesian interviewed for the IPPF Technical Brief on Comprehensive Sexuality Education for Adolescents in Protracted Humanitarian Settings (IPPF, 2022)*

Alongside providing information and guidance to youth, digital tools can support teachers in delivering school-based CSE, and there are a number of examples of digital tools being used in the classroom across conflict-related contexts. This development was definitely aided by COVID-19, when new platforms and tools were tested to varying degrees. These digital tools offer low-cost opportunities to expand coverage and deliver high-quality, engaging content. However, the evidence demonstrating the effectiveness of digital tools supporting CSE in improving outcomes isn’t yet there and needs further research (Wisbaum, 2021).

It must be highlighted that CSE in school and SRHR education out of school can only be truly effective when they are linked to effective access to and provision of SRH services. CSE has a role in providing the links to SRH services by building awareness, acceptance, and support for youth-friendly SRH education and services, as well as addressing gender inequality in terms of attitudes, beliefs, and norms. Additionally, outside the scope of in-school CSE programs, healthcare providers must be trained in and support youth-friendly services delivered in a nonjudgmental way.



## CHAPTER 6. CLOSING THE GAP: ARE WE MAKING PROGRESS?

### Key findings

- Obtaining accurate and reliable disaggregated data remains challenging, with many EMISes not having been updated or released since *Mind the Gap 2* was released in spring 2022.
- Girls in crisis-affected countries are more than twice as likely to be out of school as girls elsewhere (for the primary and lower secondary levels only).
- In crisis countries, 68% of girls at the primary level, 49% at the lower secondary level, and 30% at the upper secondary level complete that level of schooling.
- For girls in conflict-affected countries, completion growth rates are slow at the primary and lower secondary levels (averaging 1% per year) and even slower at the upper secondary level (averaging 0.5% per year). At their current growth rates, it will be another 139 years before 100% of girls complete upper secondary education.
- By ECW estimations, 91% of children attending school in countries covered by interagency plans/appeals are not learning. Children and adolescents are predicted to be faring worse in mathematics compared to reading, though the picture is stark for both subjects; 91% are estimated to be in school and not learning in mathematics compared to 85% in reading at the primary and lower secondary levels. It is impossible to sex-disaggregate these estimates due to a lack of primary data on learning outcomes.

When the first *Mind the Gap* report was written in 2020, UNESCO UIS lacked recent data on completion rates and out-of-school rates for many of the 44 crisis-affected countries. Since then, there have been considerable advances in data availability for these two indicators, primarily through the development and application of statistical methods and models that use a range of existing data sources to develop estimates and projections of data collected in previous years.

In 2021, UIS released new estimates for completion rates based on a statistical model to address issues around outdated data and inconsistencies in sampling. In 2022, the UNESCO Global Education Monitoring Report (GEMR) Team used these models to make time series of completion rates available for a wide range of countries. The GEMR Team also developed more accurate out-of-school rate estimates and extrapolations by combining household survey data with a range of administrative enrollment data and population estimates. These new estimates are available through the [GEMR's Visualizing Indicators of Education for the World \(VIEW\) database](#).



In this third *Mind the Gap* report, we use the GEMR VIEW database for statistics on completion and out-of-school rates because this provides a comprehensive source of data. For the first time, we can track girls' completion and out-of-school rates in crisis-affected countries since the Charlevoix Declaration. As with the previous *Mind the Gap* reports, the average rates given are unweighted averages of the values for crisis-affected countries with available data.<sup>42</sup> In addition, ECW (2022c) has also released estimates on the number of out-of-school children in crisis-affected countries. This new measure, which is drawn from multiple data sources, supersedes all previous country estimates for out-of-school children and enables sex disaggregation in this particular area, though overall, sex disaggregation is limited.

Since the previous *Mind the Gap* study, UNESCO UIS has released a report on using EMISes to effectively monitor SDG4 at the national, regional, and global levels (Sigdel, 2022). The report outlines some of the core challenges faced by UIS in collating data for effective monitoring (see Table 9).

**Table 9. Challenges in UIS disaggregation at the national, regional, and global levels (from Sigdel, 2022, p. 13–16)**

Metric	Importance of disaggregation in this area	Challenges in disaggregating by this metric
<b>Sex</b>	Disaggregation by sex is essential for education-related gender statistics, as it provides the context for most analyses of the social and demographic characteristics of a population.	Most EMISes collect data disaggregated by “male” and “female,” with a small number (such as Nepal and Canada) collecting third-gender data. Disaggregating by sex as a binary concept is outmoded and not inclusive for those who identify as a different gender than the one assigned at birth.
<b>Age</b>	Recording date of birth helps establish age accurately, especially when EMIS data collection occurs more than once during the same school or academic year. It is important for accurately recording gross and net enrollment rates.	Age groupings used to record and report education data vary, which hampers the comparability and efficacy of the data. There is no standardized approach to recording age data. Age can be based on an official document, vital registration, or the judgment of a headteacher.
<b>Location</b>	Data on disparities in education access between rural and urban areas is important for education decision-making.	There is no standard definition of “urban” or “rural,” and EMISes record information aligned with national or even more localized definitions. Data disaggregation by urban/rural is often not harmonized and comparable even within the same country. Government authorities typically delegate classifications to local agencies, and definitions can differ within a country and also across time (i.e., the person classifying it the following year provides a different classification). In countries with political volatility, the classification of rural and urban can keep changing.
<b>Disability</b>	Learners with disabilities can be defined as “persons who are at greater risk than the general population for experiencing restrictions in performing specific tasks or participating in role activities” (p. 14), and children with disabilities globally make up at least one-third of out-of-school children.	In many countries, data about learners with disabilities is limited to those enrolled in educational institutions, with data often aggregated by grade at the school level. Additionally, the definition of “disabilities” is not uniform across countries (e.g., India has identified 21 types of disabilities, including acid-affected individuals).
<b>Ethnicity</b>	Collecting data on ethnicity can help understand the diversity of a population and target interventions to sub-groups.	In many cases, individuals do not want to disclose their ethnicity due to fear of stigmatization or discrimination.
<b>Wealth</b>	Wealth characteristics are typically related to adults or households and are determined using two main models: (1) the income model, and (2) the assets model. Wealth is an important factor in education outcomes and a measure of the extent to which SDG4 is being met.	Not enough data is collected through EMISes to determine wealth status. Wealth data is usually collected through the national statistical office and household surveys, and it requires self-reporting on sensitive information, making the reliability of the data debatable.

42 Authors' own calculations

Metric	Importance of disaggregation in this area	Challenges in disaggregating by this metric
<b>Migration</b>	It is important for education planning to understand how education provision may need to shift with population movement.	International migration and internal migration both pose challenges to education systems. International migration is “the set of persons who have ever changed their country of usual residence, which is to say, persons who have spent at least a year of their lives in a country other than the one in which they live at the time the data are gathered” (p. 15). It is challenging for EMISes to record migration, even though it is important for planning. There is also inconsistency in the definition of forced migration and internal migration in many countries. Standardizing this will be important for comparability.
<b>Conflict-affected countries</b>	Many of the largest education gaps are in conflict-affected areas. Conflict-affected countries account for over 20% of all children – but around half of all out-of-school children – of primary school age. COVID-19 further revealed the pressing need for accurate, disaggregated, reliable, and timely data on education in emergencies.	Challenges include inconsistency in definitions, overlapping definitions, and duration of crisis. As an example, for IDPs, there is no consensus on what constitutes a protracted crisis, and there is resistance to using duration and scale as markers of protraction.
<b>Language</b>	First or home language is defined as a student’s main language of communication outside the school environment. It is usually the first language learned or the language of the learner’s family or local community. The first language may not be the language of instruction, which can affect learning outcomes, meaning disaggregated data by language is important to target policies and programs.	Children can have multiple home languages, where each parent or adult in their household primarily speaks a different language at home. This exposes children to two home languages. The EMIS metadata survey shows that most countries only gather data for one main home language.

## 6.1. PROGRESS IN ENROLLMENT AND COMPLETION RATES FOR GIRLS

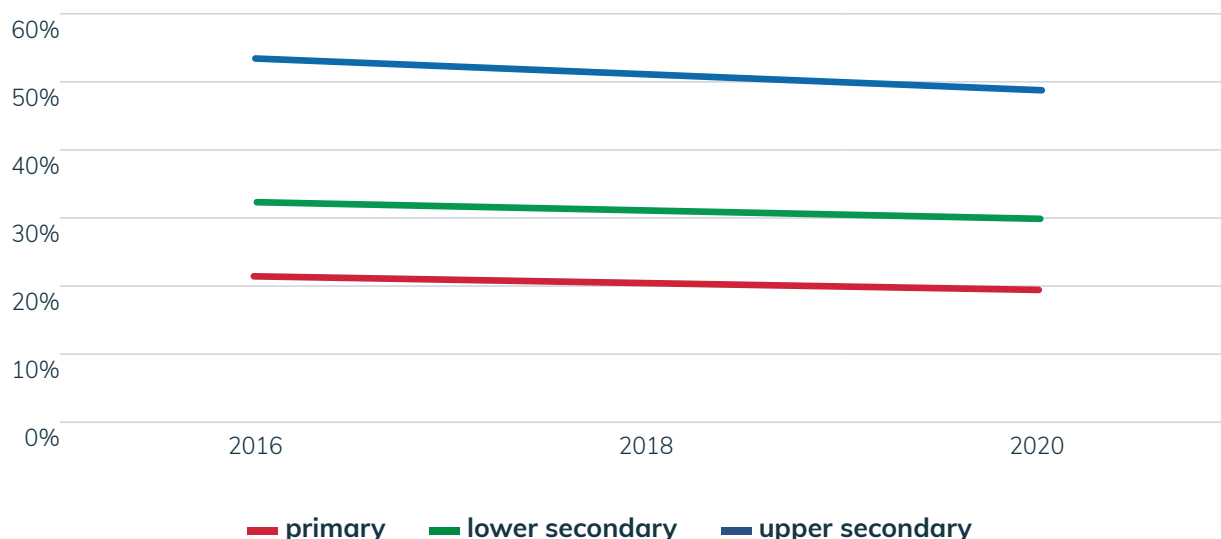
### 6.1.1. OUT-OF-SCHOOL RATES

The GEMR VIEW data set includes estimates for 41 of the 44 crisis-affected countries covered by this report (all except DPRK, Libya, and Somalia). Estimates are available for all years since 1990, with projections up to 2023. However, because the statistical models cannot predict events such as wars and pandemics, the estimates beyond 2020 do not reflect changes such as those due to COVID-19, the regime change in Afghanistan, or the war in Ukraine. Here, therefore, we consider data only up to 2020.

The crisis-affected country average for girls’ out-of-school rates decreased at the primary, lower secondary, and upper secondary levels between 2018 and 2020, continuing the trend in the years prior to Charlevoix. For girls of primary school age, the average out-of-school rate in crisis-affected countries was 20% in 2020. This is around twice the global average out-of-school rate for girls of this age,<sup>43</sup> and the rate was decreasing at only 0.25 percentage points a year (see Figure 15). If progress continues at this rate, it will take until after 2090 for all girls of this age to access school. Given that progress often stagnates around the 90% enrollment rate, it is unlikely that even this date would be met. The rate of improvement was faster at the secondary school level, but there is further to go, with 30% and 49% of girls of lower and upper secondary school age, respectively, out of school. Notably, these estimates do not include the likely setback to progress caused by COVID-19.

43 The GEMR global estimates for female out-of-school rates in 2020 are around 10% at the primary level, 14% at lower secondary, and 29% at upper secondary (data extracted from <https://education-estimates.org/out-of-school/averages/>).

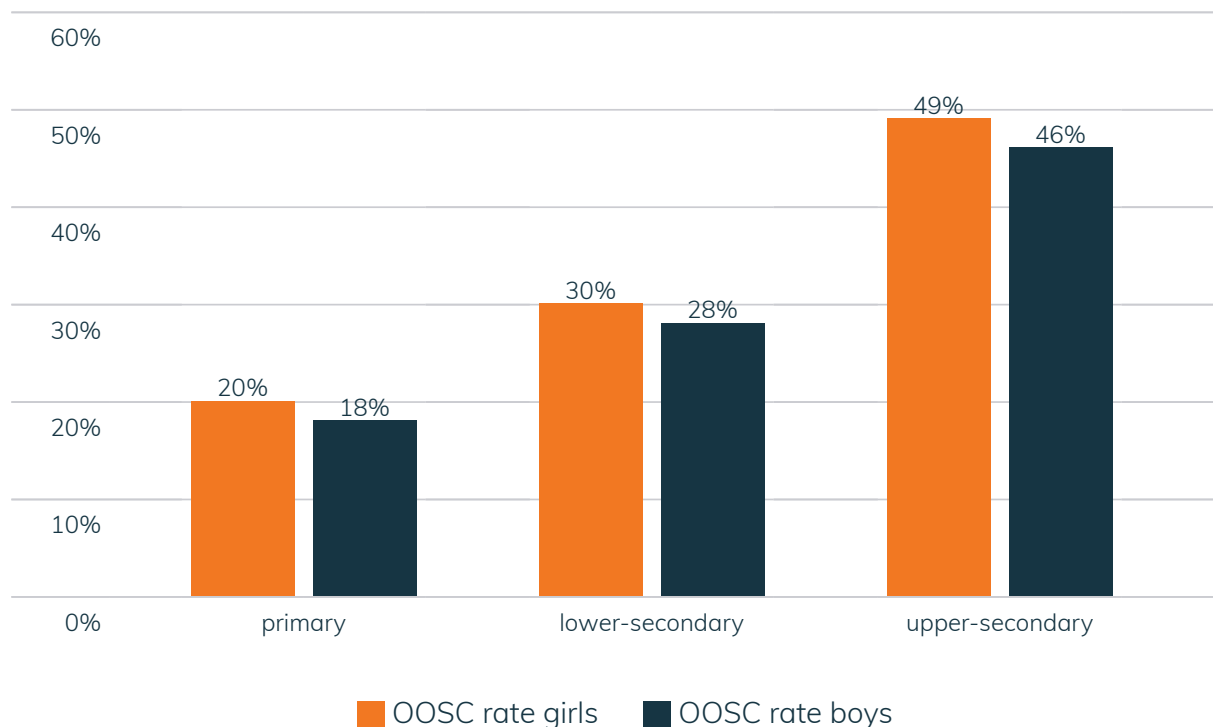
**Figure 15. Average out-of-school rates for girls in 41 crisis-affected countries**



Source: Extracted from *GEMR VIEW* on February 3, 2023

On average, out-of-school rates in crisis-affected countries are higher for girls than boys, and the gender gaps are larger at higher levels of schooling (see Figure 16). These gender gaps are small on average and appear to be closing at the secondary level, with the difference at the upper secondary level decreasing from 6 percentage points in 2016 to just 3 percentage points in 2020. The averages also hide large gender differences in some countries. For example, in Afghanistan, lower secondary school-age girls were nearly five times as likely to be out of school as boys of that age. Conversely, in Bangladesh, boys of lower secondary school age were twice as likely to be out of school as girls.

**Figure 16. Comparison of boys' and girls' out-of-school rates (44 countries)**

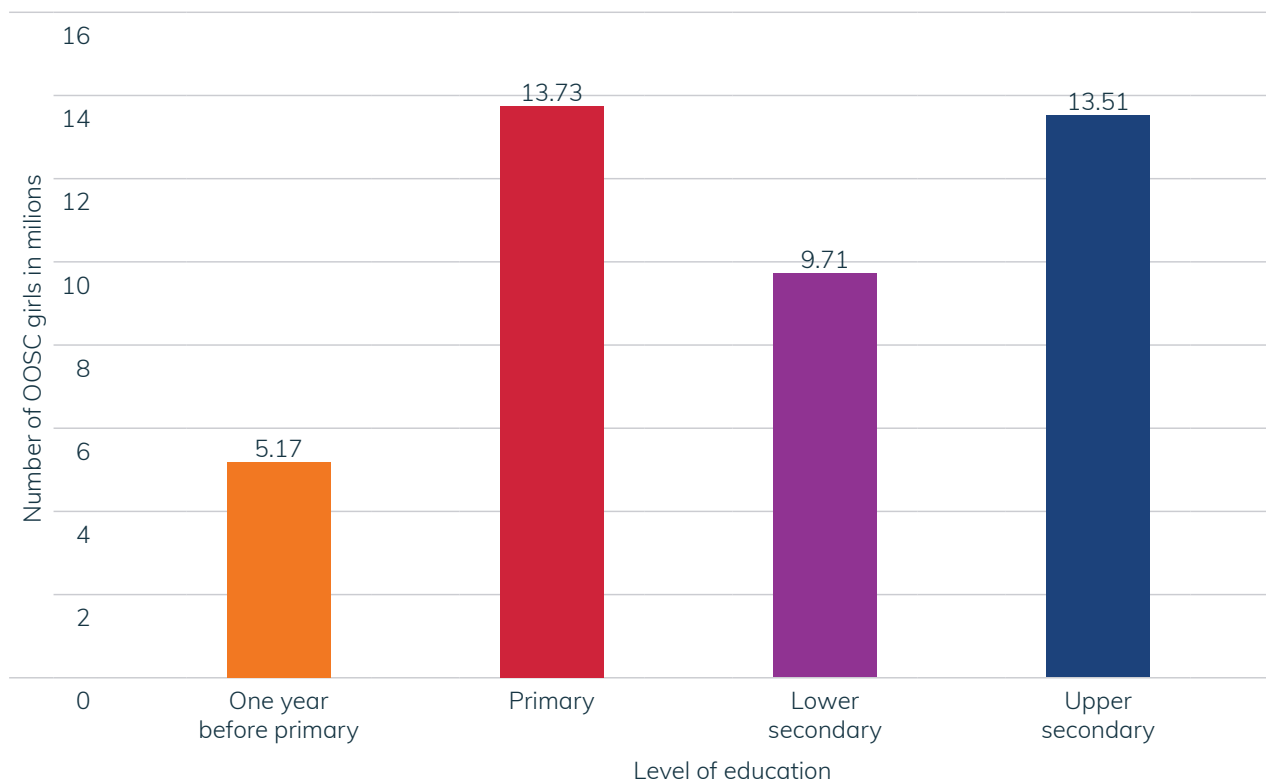


Source: Extracted from *GEMR VIEW* on February 3, 2023

## 6.1.2. ESTIMATES ON THE TOTAL NUMBER OF OUT-OF-SCHOOL GIRLS IN CRISIS-AFFECTED COUNTRIES

ECW (2022c) provides estimates on the number of crisis-affected children and adolescents (Figure 17).<sup>44</sup> The report finds that 222 million school-aged children globally are affected by crisis, with 78.2 million children out of school. Of those 78 million, 54% are girls. ECW also developed a “worse-case scenario’ premium” on COVID’s impact on out-of-school rates.<sup>45</sup> These premiums resulted in estimations of 4.8 million additional out-of-school children that can be attributed to the effects of COVID-19 (ECW, 2022a, p. 12).

**Figure 17. Number of out-of-school girls in crisis-affected countries by level of education (in millions)**



Source: Extracted from ECW (2022c, p. 19) report estimating the total number of out-of-school children

## 6.1.3. COMPLETION RATES

Completion rates for this report have been extracted from the GEMR VIEW database, which includes completion rate estimates for countries up to 2020. Of the 44 countries considered in this report, 26 have consistent data for completion rates for 2016 to 2020 inclusive.<sup>46</sup> The average completion rates<sup>47</sup> for these countries in 2020 were:

- Primary: 68% for girls and 64% for boys
- Lower secondary: 49% for girls and 50% for boys
- Upper secondary: 30% for girls and 31% for boys

<sup>44</sup> “Out-of-school children” does not include those in school repeating grades.

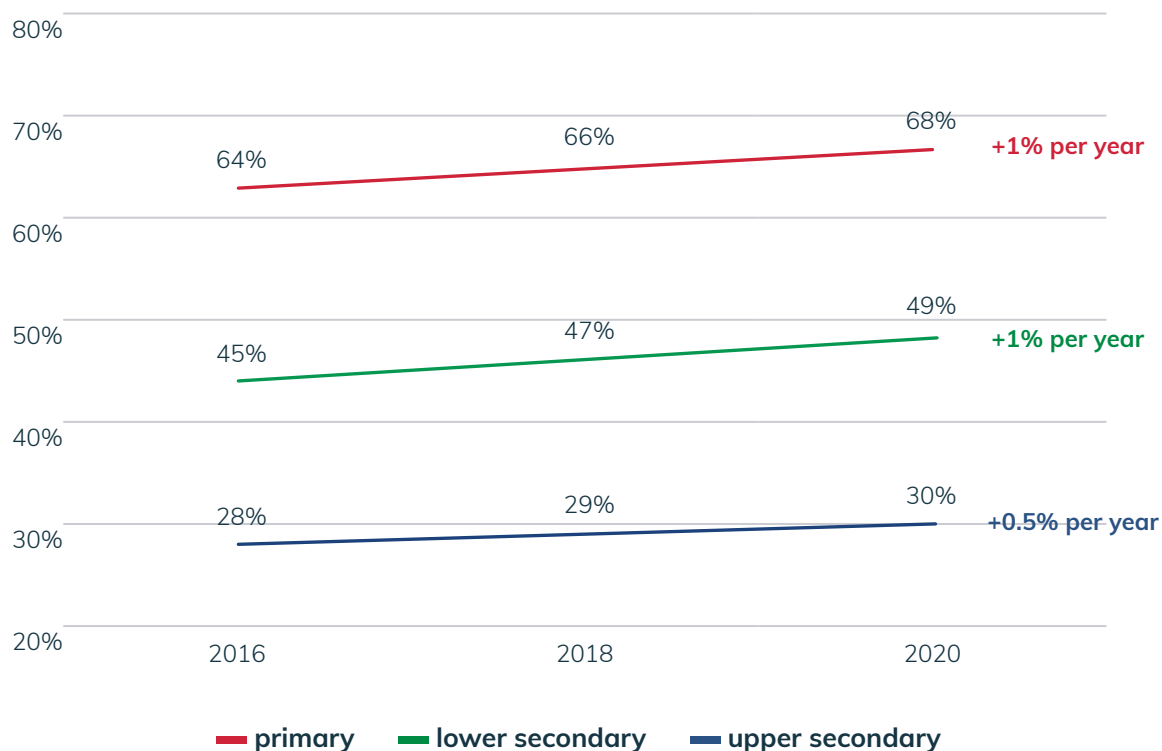
<sup>45</sup> Values are assigned to the country with the longest closure (Uganda), which kept schools closed for more than 65 weeks since the start of the pandemic. The team then assigned a premium to all the other countries in their data set in terms of their length of school closures relative to Uganda’s.

<sup>46</sup> Afghanistan, Angola, Bangladesh, Burundi, Cameroon, Colombia, Congo, DRC, Ethiopia, Georgia, Jordan, Kenya, Madagascar, Malawi, Mali, Mauritania, Myanmar, Niger, Nigeria, oPt, Pakistan, the Philippines, Senegal, South Sudan, Uganda, and Zimbabwe

<sup>47</sup> Authors’ own calculations, not weighted by population

VIEW also provides global estimates for the same indicators, with female completion rates of 88% at primary, 78% at lower secondary, and 60% at upper secondary (2020 estimates). These global estimates are weighted by population, so they are not directly comparable to the conflict- and crisis-affected countries, but do help provide context. Among the conflict- and crisis-affected countries, the data indicates a steady increase of around 1 percentage point per year for primary and lower secondary completion, with upper secondary completion rates moving at half the speed (0.5 percentage points per year).

**Figure 18. Completion rates (female) in crisis-affected countries by level of education (% points)**



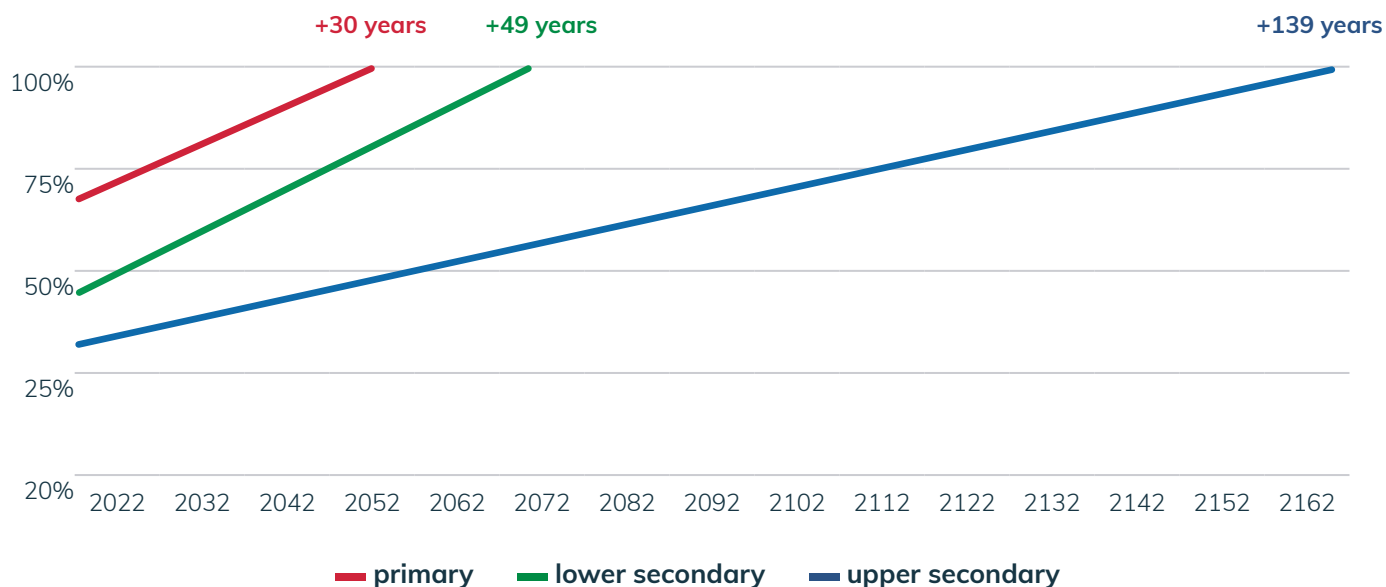
Source: Extracted from *GEMR VIEW* in February 2023

Projections based on these rates of improvement (2016 to 2020) suggest that at that rate of improvement, all girls in crisis-affected countries would complete:

- Primary schooling by 2052
- Lower secondary schooling by 2072
- Upper secondary schooling by 2161

It should be noted that the rates of improvement used for this calculation are optimistic, as they do not account for the effects of COVID-19 or the fact that progress tends to stall as rates approach the 90% mark. Additional resources and effort are needed to ensure the most vulnerable girls and boys, including those with disabilities, can access and complete a cycle of schooling. It is for this reason that out-of-school rates for girls at the primary level are decreasing more slowly than girls' primary school completion rates are increasing. This explains why the estimate for all girls being in primary school is later than the optimistic estimate of when all girls would be able to complete primary education calculated by the same method.

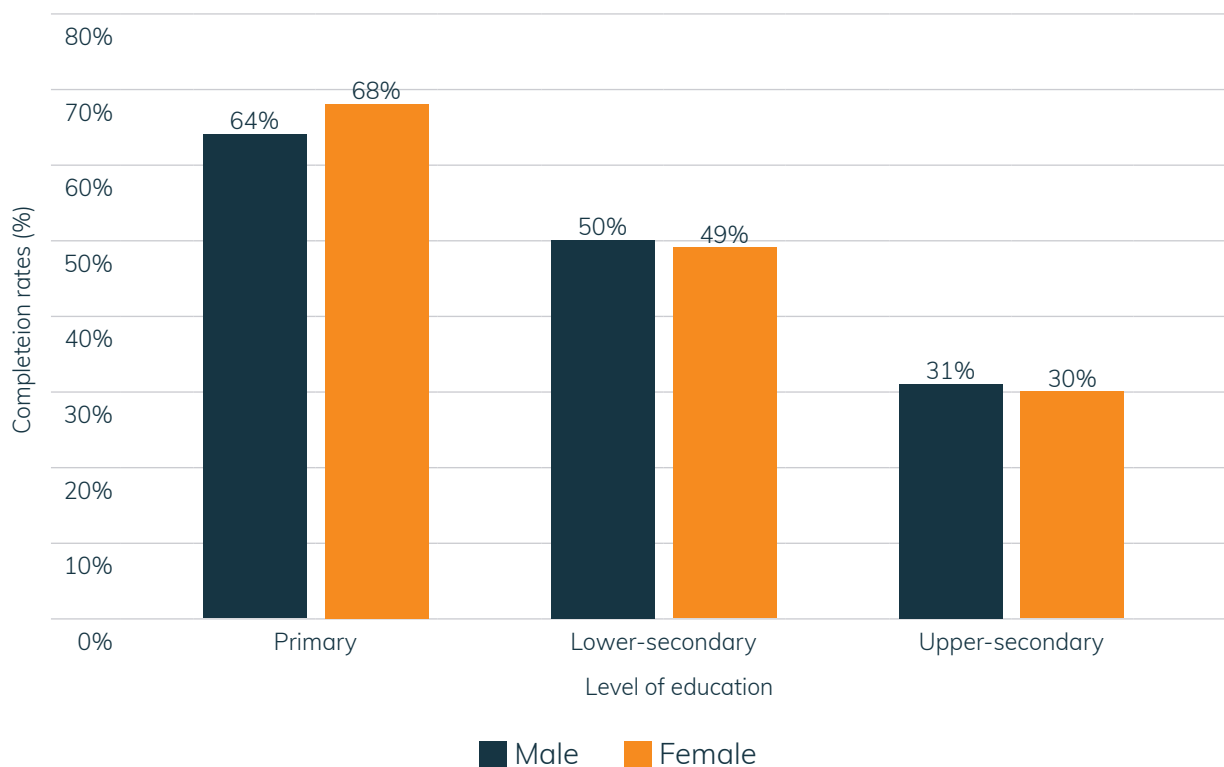
**Figure 19. Projections of when all girls in crisis-affected countries will complete each level of education**



Source: Authors' calculations based on data extracted from [GEMR VIEW](#) in February 2023

Mind the Gap 1 noted that girls' completion rates appeared to be improving faster than boys' and that gender gaps were closing. Using the 2020 data projections from the UNESCO GEMR team, girls' completion rates are very similar to boys' for the 26 crisis-affected countries. Girls are marginally more likely to complete schooling at the primary level, with this shifting at the lower and upper secondary levels.

**Figure 20. Completion rates (female vs. male) at each level of schooling in crisis-affected countries**

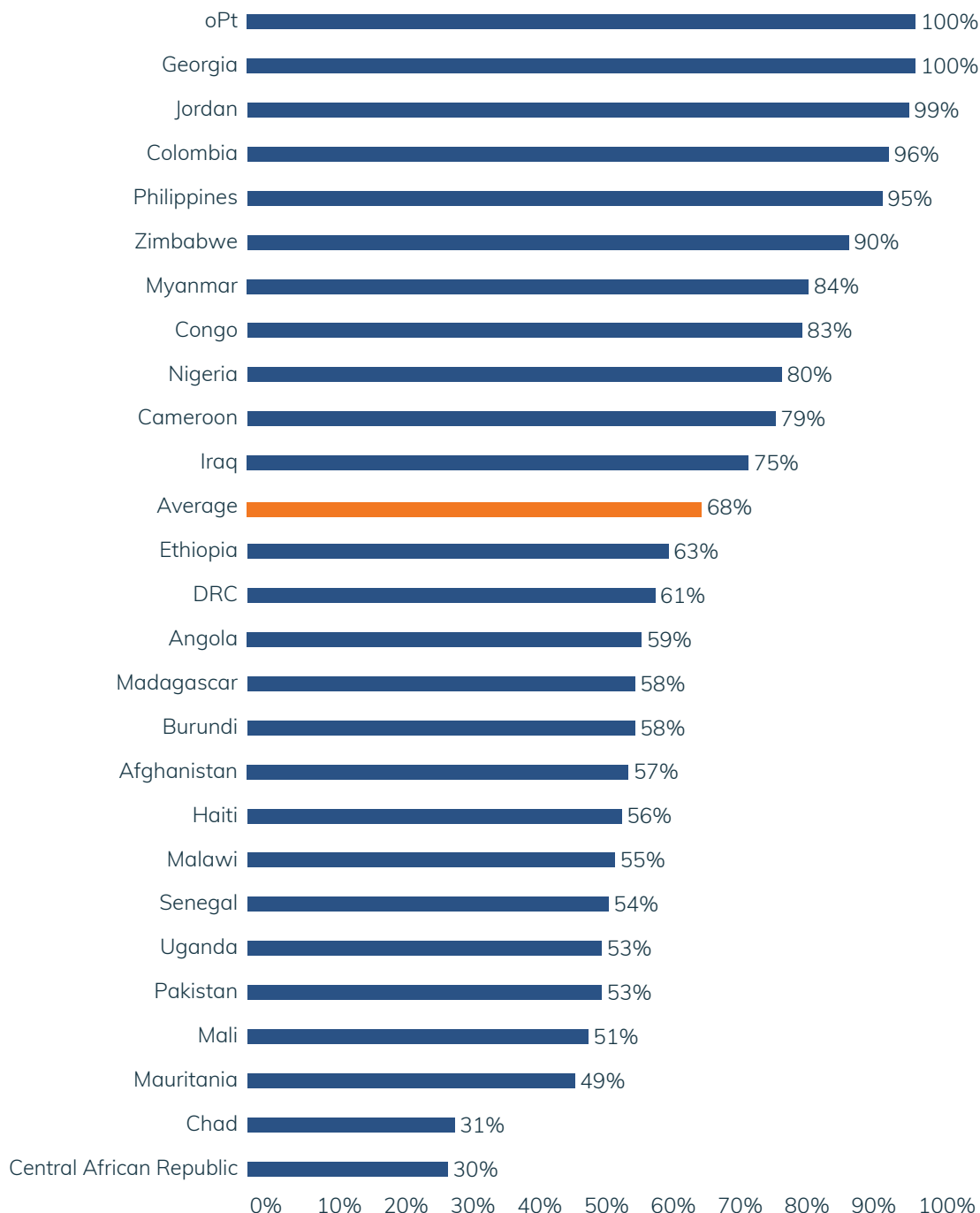


Source: 2020 data extracted from [GEMR VIEW](#) in February 2023

#### 6.1.4. PRIMARY COMPLETION RATES

At the primary level, 68% was the average completion rate among female learners in the countries included in the analysis. oPt, Georgia, and Jordan reported the highest primary completion rates, at 99% or more. Chad (31%) and the Central African Republic (28%) reported the lowest.

**Figure 21. Primary-level completion rates (female) in crisis-affected countries (%)**



Source: 2020 data extracted from *GEMR VIEW* in February 2023

When observing trends from 2016 to 2020, seven countries made above-average gains in the percentage of girls completing primary school. Table 10 outlines the relative gains from 2016 to 2020 for countries with a completion rate of 90% or less in 2016. Zimbabwe has made slow progress but has reached a 90% completion rate, which is typically associated with stagnation in progress. Additionally, it is possible that the gains in Afghanistan will have declined since 2020, with recent UNESCO (2023) figures indicating that nearly 30% of girls in Afghanistan have never entered primary education.

**Table 10. Trends over time in primary completion rates (female) by crisis-affected country**

Country	Completion rate (%)			Percentage point difference		Relative gains, 2016 to 2020
	2016	2018	2020	2016 to 2018	2018 to 2020	
<b>Average</b>	56%	59%	61%	2	2	
<b>Afghanistan</b>	45%	51%	57%	6	5	Above average
<b>Ethiopia</b>	54%	59%	63%	5	4	Above average
<b>Burundi</b>	50%	54%	58%	4	4	Above average
<b>Angola</b>	53%	56%	59%	3	3	Above average
<b>Haiti</b>	50%	53%	56%	3	3	Above average
<b>Mali</b>	45%	48%	51%	3	3	Above average
<b>Madagascar</b>	52%	55%	58%	3	3	Above average
<b>Iraq</b>	71%	74%	75%	2	2	Average
<b>DRC</b>	56%	59%	61%	2	2	Average
<b>Myanmar</b>	79%	82%	84%	2	2	Average
<b>Mauritania</b>	45%	47%	49%	2	2	Average
<b>Malawi</b>	51%	53%	55%	2	2	Average
<b>Pakistan</b>	50%	51%	53%	2	2	Average
<b>Chad</b>	26%	28%	31%	2	2	Average
<b>Uganda</b>	50%	51%	53%	2	2	Average
<b>Congo</b>	80%	82%	83%	2	1	Below average
<b>Cameroon</b>	76%	78%	79%	1	1	Below average
<b>Central African Republic</b>	28%	29%	30%	1	1	Below average
<b>Nigeria</b>	78%	79%	80%	1	1	Below average
<b>Senegal</b>	52%	53%	54%	1	1	Below average
<b>Zimbabwe</b>	89%	90%	90%	1	1	Below average

Source: 2020 data extracted from *GEMR VIEW* in February 2023

The difference in boys' and girls' completion rates was 10 percentage points or less in 20 of the 26 countries included in the analysis. Ethiopia, Malawi, Uganda, and Haiti were among the countries with the highest relative completion rates for girls versus boys. Afghanistan had the greatest difference in completion rate, with girls' completion rate 20 percentage points lower than boys'. Additionally, for nine countries, the rate of progress in primary completion rates was the same for girls and boys between 2016 and 2020. For example, in Nigeria, the completion rate for both boys and girls increased by 2 percentage points. In 16 of the countries, boys' progress in primary completion rates was slower than girls'. Only one country, Congo, recorded boys' rate completion rate improving by a greater margin than girls'.



**Table 11. Percentage-point difference in primary school completion rates between girls and boys in crisis-affected countries**

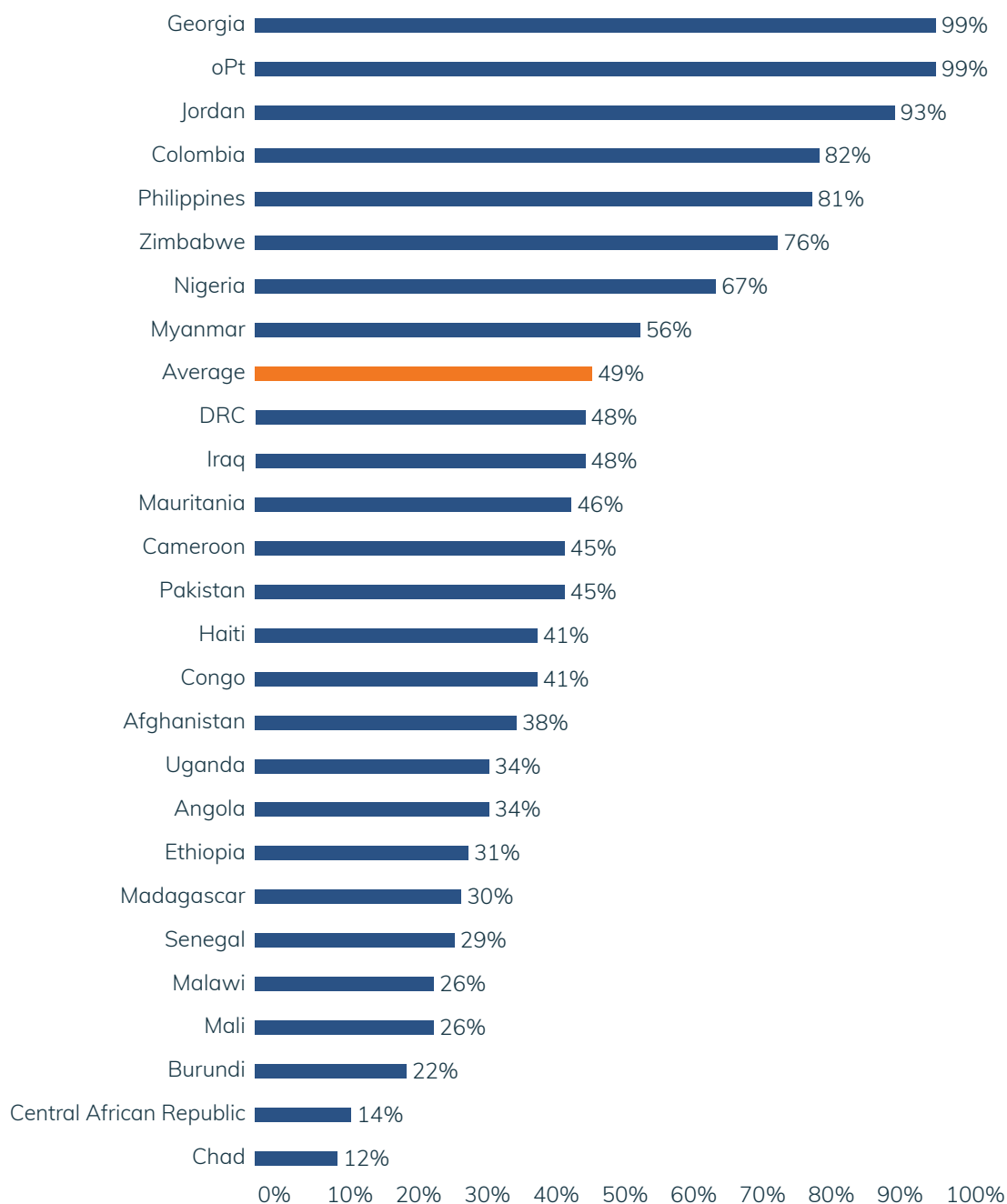
Country	Female	Male	Percentage point difference
Average	68%	64%	4
Afghanistan	57%	77%	-20
Mali	51%	55%	-5
Central African Republic	30%	34%	-4
Congo	83%	86%	-3
Iraq	75%	77%	-2
Chad	31%	32%	-2
Nigeria	80%	81%	-1
Pakistan	53%	54%	-1
Georgia	100%	100%	0
oPt	100%	99%	1
Angola	59%	58%	1
Jordan	99%	97%	2
Colombia	96%	93%	3
Myanmar	84%	80%	4
Mauritania	49%	44%	4
Cameroon	79%	74%	5
Senegal	54%	47%	7
DRC	61%	54%	7
Zimbabwe	90%	83%	7
Philippines	95%	87%	8
Burundi	58%	47%	10
Madagascar	58%	46%	12
Ethiopia	63%	49%	15
Malawi	55%	40%	15
Uganda	53%	38%	15
Haiti	56%	37%	18

Source: 2020 data extracted from [GEMR VIEW](#) in February 2023

### 6.1.5. LOWER SECONDARY COMPLETION RATES

At the lower secondary level, an average of 49% of girls complete school (Figure 22). Georgia, oPt, and Jordan have the highest completion rates (99%, 99%, and 93%, respectively). Chad, the Central African Republic, and Burundi have the lowest (12%, 14%, and 22%, respectively).

**Figure 22. Lower-secondary completion rates (female) in crisis-affected countries (%)**



Source: 2020 data extracted from [GEMR VIEW](#) in February 2023

When observing trends from 2016 to 2020, nine countries made above-average gains in the percentage of girls completing lower secondary school. Table 12 outlines the countries with a girls' completion rate lower than 90% in 2016 that made above-average gains between 2016 and 2020. Among the countries with the greatest gains were Afghanistan (8%), Senegal (5%), and Ethiopia (6%). Although Afghanistan made above-average gains in lower secondary, these have since been undermined by countrywide restrictions on girls attending secondary school and higher education (UNESCO, 2023). The slowest gains were observed in countries with above-average enrollment rates overall, with the exception of Chad, Madagascar, Congo, and the Central African Republic.

**Table 12. Trends over time in lower secondary completion rates (female) by crisis-affected country**

Country	Completion rate (%)			Percentage point difference		Relative gains, 2016 to 2020
	2016	2018	2020	2016 to 2018	2018 to 2020	
<b>Average</b>	45%	47%	49%	2	2	
<b>Afghanistan</b>	30%	34%	38%	4	4	Above average
<b>Senegal</b>	24%	27%	29%	3	2	Above average
<b>Ethiopia</b>	26%	29%	31%	3	3	Above average
<b>Mauritania</b>	41%	44%	46%	3	2	Above average
<b>Cameroon</b>	40%	43%	45%	3	2	Above average
<b>DRC</b>	44%	46%	48%	3	2	Above average
<b>Haiti</b>	36%	38%	41%	2	3	Above average
<b>Malawi</b>	21%	24%	26%	3	2	Above average
<b>Iraq</b>	44%	46%	48%	3	2	Above average
<b>Burundi</b>	17%	19%	22%	2	2	Average
<b>Myanmar</b>	51%	54%	56%	2	2	Average
<b>Mali</b>	22%	24%	26%	2	2	Average
<b>Uganda</b>	30%	32%	34%	2	2	Average
<b>Pakistan</b>	42%	43%	45%	2	2	Average
<b>Average</b>	45%	47%	49%	2	2	Average
<b>Angola</b>	31%	32%	34%	2	2	Average
<b>Madagascar</b>	27%	29%	30%	2	1	Below average
<b>Zimbabwe</b>	73%	74%	76%	2	1	Below average
<b>Congo</b>	38%	40%	41%	2	1	Below average
<b>Nigeria</b>	65%	66%	67%	1	1	Below average
<b>Philippines</b>	79%	80%	81%	1	1	Below average
<b>Chad</b>	10%	11%	12%	1	1	Below average
<b>Central African Republic</b>	13%	14%	14%	1	1	Below average
<b>Colombia</b>	81%	81%	82%	1	1	Below average

Source: 2020 data extracted from [GEMR VIEW](#) in February 2023

As noted in the previous *Mind the Gap* reports, however, these averages hide great variation in gendered patterns of school completion. In 10 of the 26 countries with data, girls are less likely than boys to complete lower secondary education; in four of the 26, they are close to parity,<sup>48</sup> and in 12 of the 26, girls are more likely to complete lower secondary than boys with a difference of 3 percentage points or more. Countries with the largest gaps in favor of boys include Afghanistan, Congo, and Chad. Countries with large gaps in favor of girls include the Philippines, Haiti, and Zimbabwe.

<sup>48</sup> The ratio of girls' completion rates to boys' completion rates at lower secondary is between 0.97 and 1.03.

**Table 13. Percentage-point difference in girls' and boys' lower secondary school completion rates in crisis-affected countries**

Country	Female	Male	Percentage point difference
Afghanistan	38%	61%	-23
Congo	41%	63%	-22
South Sudan	12%	23%	-11
Bangladesh	22%	31%	-10
Nigeria	67%	77%	-9
Burundi	14%	21%	-6
Angola	34%	40%	-6
oPt	45%	51%	-6
Uganda	34%	39%	-5
Mali	26%	30%	-4
Myanmar	46%	46%	-1
Cameroon	45%	45%	0
Georgia	99%	98%	1
Malawi	30%	28%	2
Kenya	48%	46%	3
Niger	26%	23%	3
Colombia	48%	46%	3
Madagascar	93%	90%	3
Senegal	29%	26%	3
Philippines	99%	95%	4
DRC	82%	77%	6
Mauritania	56%	50%	6
Ethiopia	31%	24%	7
Zimbabwe	76%	69%	7
Jordan	41%	31%	10
Pakistan	81%	64%	17

Source: 2020 data extracted from [GEMR VIEW](#) in February 2023

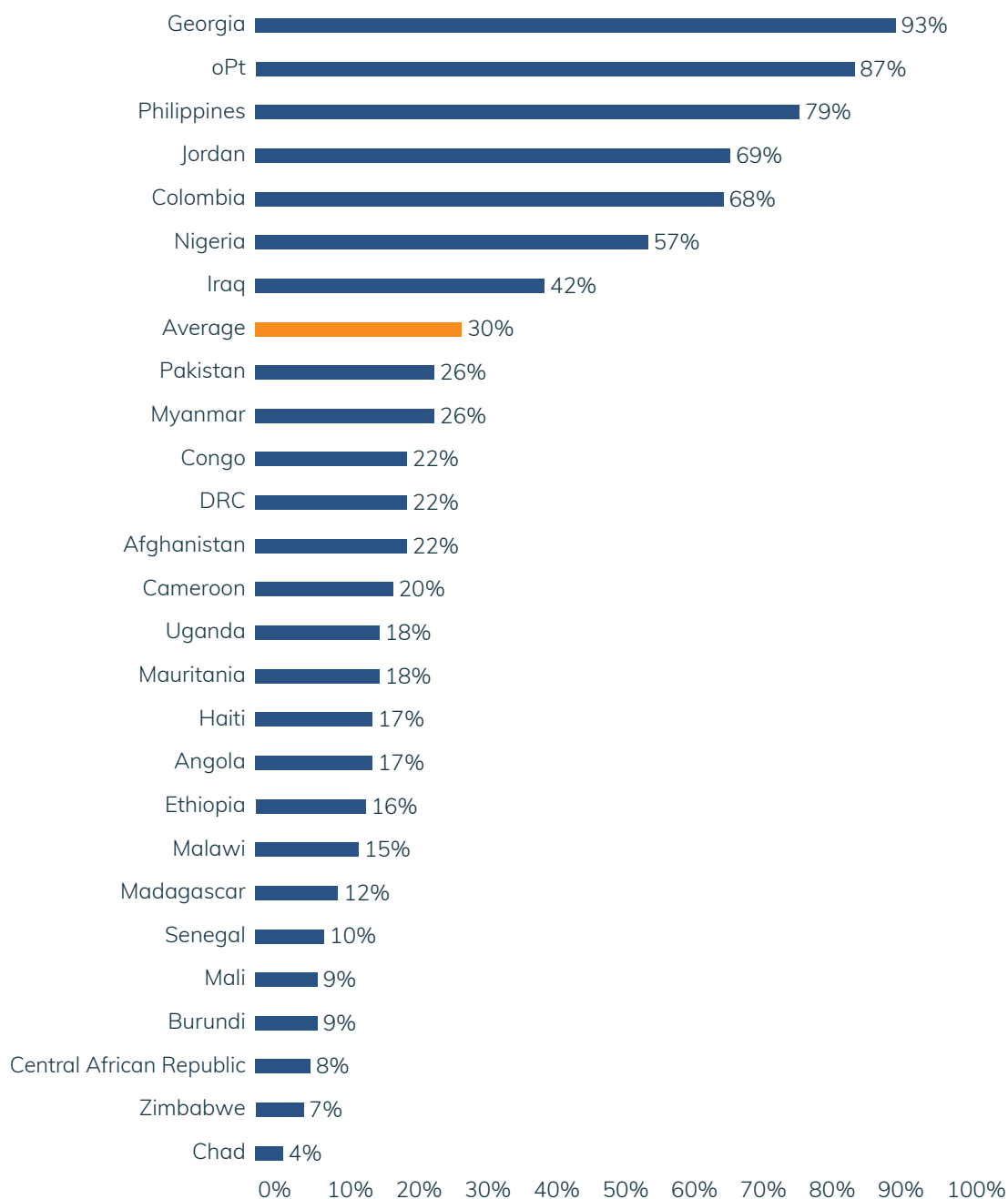
Between 2016 and 2020, girls and boys had the same relative progress in completion rates in six of the 26 countries, (Georgia, Iraq, Jordan, Madagascar, Nigeria, oPt, and Chad). Girls made greater gains than boys in 16 countries<sup>49</sup>; in the majority of cases, this was girls “catching up” with boys, though there were some instances of girls overtaking boys in completion rates, such as the DRC, where both girls’ and boys’ completion rates were 44% in 2016, with girls’ increasing to 48% in 2020 and boys only increasing to 46%. Boys made greater gains in completion rates than girls in Burundi, Congo, and Colombia. For example, in Congo, the percentage of girls completing lower secondary grew from 38% to 41% from 2016 to 2020; boys’ rates leaped from 52% to 63% in the same period.

<sup>49</sup> Afghanistan, Angola, Central African Republic, Cameroon, DRC, Ethiopia, Haiti, Mali, Myanmar, Mauritius, Malawi, Pakistan, the Philippines, Senegal, Uganda, and Zimbabwe

### 6.1.6. UPPER SECONDARY COMPLETION RATES

As with other levels of education, Georgia, oPt, the Philippines, and Jordan were among the countries with the highest completion rates at upper secondary (93%, 87%, 79%, and 69%, respectively). Chad and Zimbabwe had the lowest completion rates of all countries (4% and 7%, respectively).

**Figure 23. Upper secondary completion rates (female) in crisis-affected countries**



Source: 2020 data extracted from [GEMR VIEW](#) in February 2023

Trends over time show slow progress in female learners' completion rates, with an average of 0.5 percentage points per year across crisis-affected countries. Table 14 shows the relative gains between 2016 and 2020 among the countries with a completion rate lower than 90% in 2016. Iraq saw the greatest gains in attendance, with an 8 percentage point increase in the completion rates of female learners at the upper secondary level. As with lower secondary, although Afghanistan made above-average gains in upper secondary, these gains have been undermined by countrywide restrictions on girls attending secondary school and higher education (UNESCO, 2023).

**Table 14. Trends over time in upper secondary completion rates (female) by crisis-affected country**

Country	Completion rate (%)			Percentage point difference		Relative gains, 2016 to 2020
	2016	2018	2020	2016 to 2018	2018 to 2020	
<b>Average</b>	28%	29%	30%	1	1	
<b>Iraq</b>	34%	39%	42%	5	3	Above average
<b>Afghanistan</b>	18%	20%	22%	2	2	Above average
<b>Pakistan</b>	22%	24%	26%	2	2	Above average
<b>DRC</b>	18%	20%	22%	2	2	Above average
<b>Cameroon</b>	17%	18%	20%	2	2	Above average
<b>Nigeria</b>	54%	55%	57%	1	2	Above average
<b>Uganda</b>	16%	17%	18%	1	2	Above average
<b>Myanmar</b>	23%	25%	26%	1	1	Average
<b>Ethiopia</b>	14%	15%	16%	1	1	Average
<b>Mauritania</b>	15%	17%	18%	1	1	Average
<b>Congo</b>	19%	21%	22%	1	1	Average
<b>Malawi</b>	13%	14%	15%	1	1	Average
<b>Haiti</b>	15%	16%	17%	1	1	Average
<b>Senegal</b>	8%	9%	10%	1	1	Average
<b>Philippines</b>	77%	78%	79%	1	1	Average
<b>oPt</b>	86%	86%	87%	1	1	Average
<b>Burundi</b>	7%	8%	9%	1	1	Average
<b>Angola</b>	15%	16%	17%	1	1	Average
<b>Mali</b>	8%	9%	9%	0	1	Below average
<b>Madagascar</b>	11%	11%	12%	0	1	Below average
<b>Georgia</b>	92%	93%	93%	0	1	Below average
<b>Jordan</b>	68%	68%	69%	0	1	Below average
<b>Central African Republic</b>	7%	8%	8%	0	0	Below average
<b>Chad</b>	4%	4%	4%	0	0	Below average
<b>Zimbabwe</b>	7%	7%	7%	0	0	Below average
<b>Colombia</b>	71%	69%	68%	-2	0	Below average

Source: 2020 data extracted from [GEMR VIEW](#) in February 2023

The gender gap persists in upper secondary completion rates (Table 15). Afghanistan continued to have the biggest gap, with completion rates for girls 23 percentage points lower than for boys; Nigeria had the second-largest gap, with girls' completion rate 15 percentage points less than boys'. In five countries, boys' and girls' rate of progress was the same between 2016 and 2020 (Afghanistan, Angola, Madagascar, Mali, and Zimbabwe). In 15 of the countries, girls made greater progress than boys in upper secondary completion rates.<sup>50</sup> In Colombia, Georgia, Iraq, and oPt, boys made greater gains in progress than girls. For oPt, this was due to girls already having higher completion rates than boys. In Iraq, boys' upper secondary completion rate was lower than girls' in 2016 (34% for girls and 32% for boys), with boys having a higher completion rate by 2020 (42% for girls and 45% for boys).

<sup>50</sup> Burundi, Central African Republic, Cameroon, DRC, Congo, Ethiopia, Haiti, Myanmar, Mauritius, Malawi, Pakistan, the Philippines, Senegal, Chad, and Uganda

**Table 15. Percentage-point difference in upper secondary completion rates between girls and boys in crisis-affected countries**

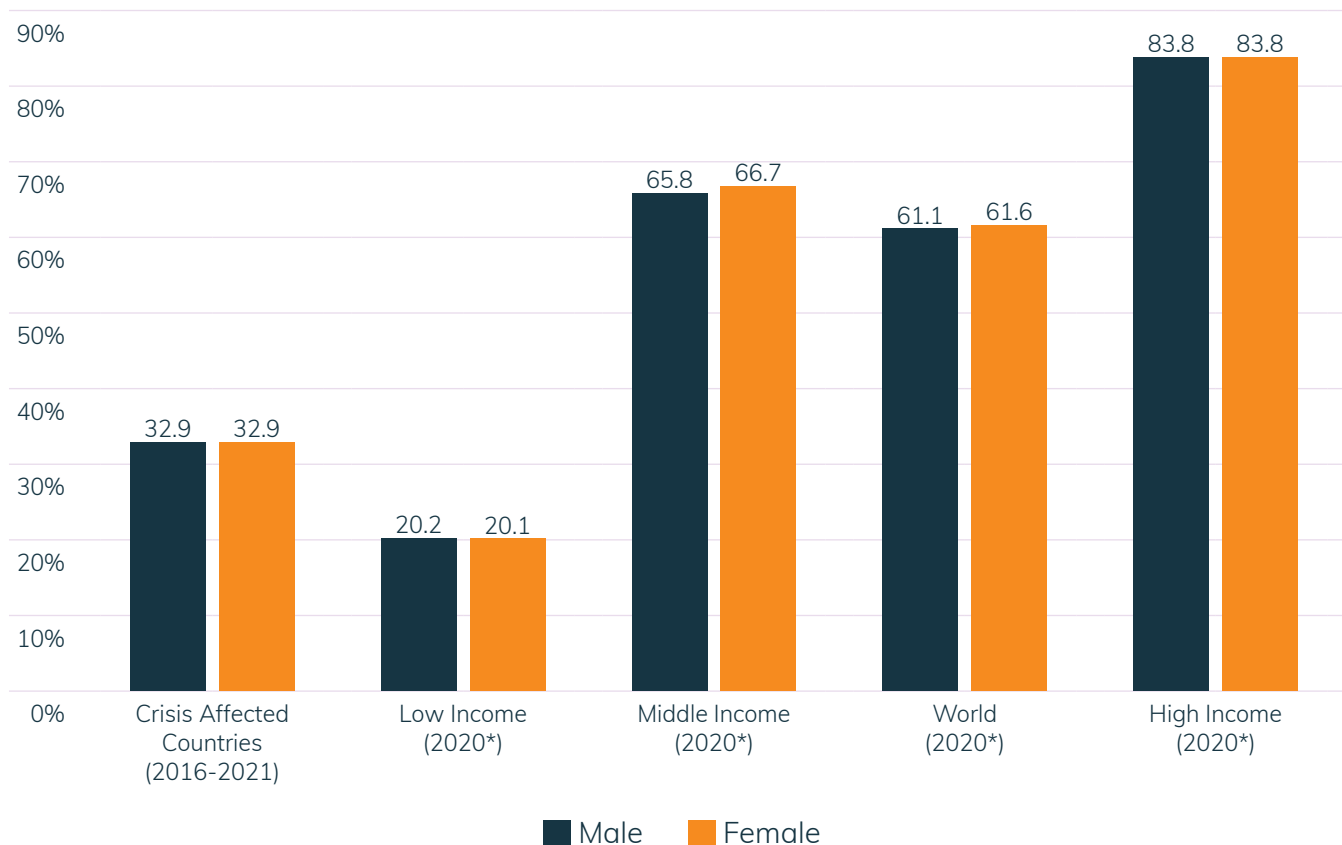
Country	Female	Male	Percentage point difference
Afghanistan	22%	44%	-23
Nigeria	57%	72%	-15
Myanmar	18%	27%	-10
Congo	22%	28%	-6
Mali	9%	15%	-6
Angola	17%	22%	-5
South Sudan	4%	9%	-5
Burundi	8%	12%	-4
Zimbabwe	7%	10%	-3
Kenya	42%	45%	-3
Colombia	22%	24%	-3
Cameroon	20%	21%	-1
Senegal	10%	11%	-1
Bangladesh	9%	9%	0
Uganda	18%	18%	0
Niger	15%	15%	0
Malawi	12%	11%	1
Jordan	17%	16%	1
Georgia	93%	92%	2
oPt	26%	23%	3
Ethiopia	16%	13%	4
DRC	68%	63%	5
Mauritania	26%	18%	8
Philippines	87%	76%	12
Pakistan	79%	63%	15
Madagascar	69%	53%	16

Source: 2020 data extracted from [GEMR VIEW](#) in February 2023

### 6.1.7. PRE-PRIMARY ENROLLMENT EDUCATION

Pre-primary enrollment figures have not been updated since *Mind the Gap 2* for most countries, with data up to 2020 available through UIS (exceptions include Bangladesh, Burkina Faso, Burundi, Chad, Djibouti, Ethiopia, Jordan, Niger, oPt, the Philippines, Senegal, Somalia, and Zimbabwe). The average enrollment rate has remained at 33% for both boys and girls in conflict-affected countries at the pre-primary level.

**Figure 24. Pre-primary gross enrollment ratios in crisis-affected countries, LMICs, and the world (female vs. male)**



Source: Data retrieved January 2023 from [the UIS database](#); crisis-affected countries average based on authors' own calculations from most recent available data (2016–2021) for 33 countries with data available  
\*Indicates UIS estimate

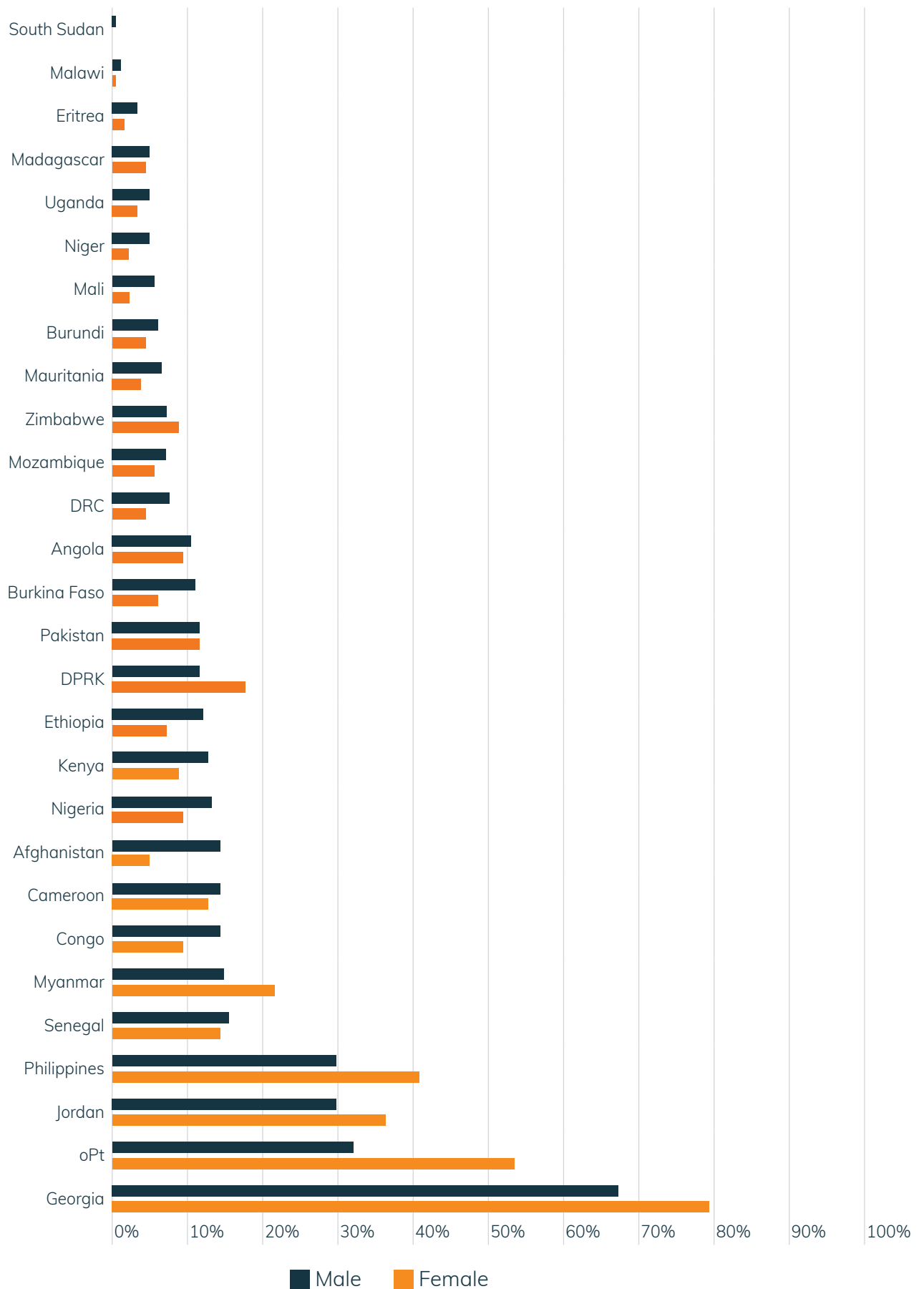
Variations exist among the conflict-affected countries included in the UIS database. The countries with the weakest pre-primary enrollment rates include Burkina Faso, Central African Republic, Chad, DRC, Mali, Niger, Somalia, Myanmar, and Yemen, with these countries having enrollment rates lower than 10%; this is one more country than in *Mind the Gap 2*. By contrast, Colombia, the Philippines, Ukraine, Venezuela, and Zimbabwe all have pre-primary enrollment rates of about 70%. As with the low-performing countries, there was one additional country achieving at least 70% enrollment compared to *Mind the Gap 2*.

### 6.1.8. TERTIARY EDUCATION/TECHNICAL AND VOCATIONAL EDUCATION AND TRAINING

Overall, gross enrollment rates at this level are similar to those in *Mind the Gap 2*, with 20% for girls and 21% for boys in crisis-affected countries, although countries varied widely. Overall, in countries with higher gross enrollment rates at the tertiary level, women typically have higher enrollment rates than men. In countries with overall lower enrollment rates, men are marginally more likely to be enrolled than women. For example, Georgia has the highest tertiary-level enrollment rate among the countries included in the analysis, and its female enrollment rate was 12 percentage points higher than men's, whereas South Sudan had the lowest tertiary enrollment rate and men were 1 percentage point more likely to be enrolled. Notably, three countries that previously had no data on this indicator now have their data updated in the UIS database: Malawi, Mali, and Nigeria. Also of note, changes in Afghanistan since the time of this data collection will mean no women are in tertiary education at the time of writing this report (UNESCO, 2023).

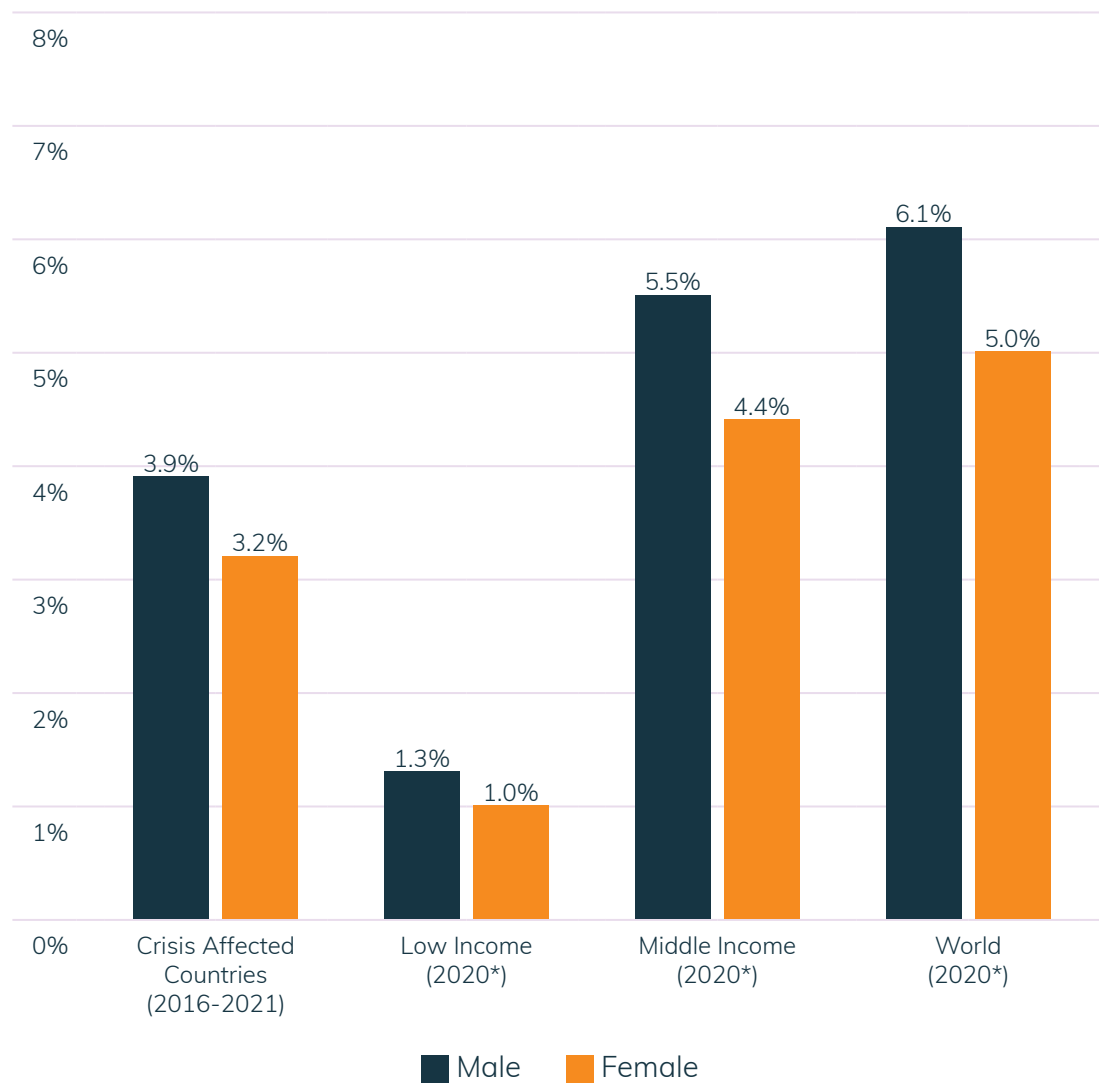


**Figure 25. Gross enrollment ratios in tertiary education for crisis-affected countries, by gender (%)**



Source: Data retrieved January 2023 from [the UIS database](#); crisis-affected country averages from most recent available data (2016–2021) for 28 countries with data available

**Figure 26. Proportion of 15- to 24-year-olds enrolled in technical and vocational education**



Source: Data retrieved January 2023 from [the UIS database](#); crisis-affected countries average based on authors' own calculations from most recent available data (2016 –2021) for 19 crisis-affected countries with data available

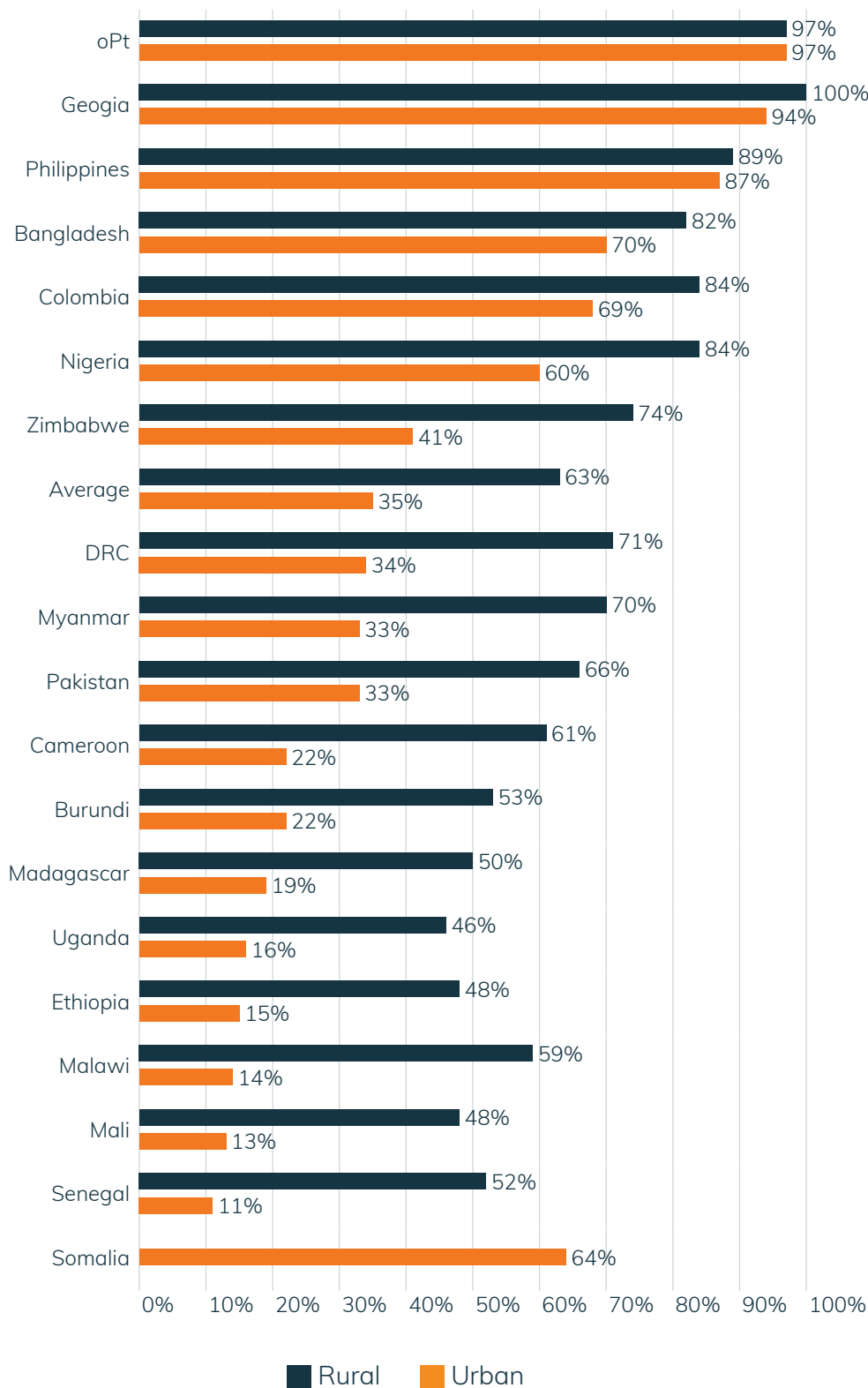
\*Indicates UIS estimate

Note: 2021 female and male data available for Burundi, Djibouti, Georgia, Jordan, and oPt; the rest of the countries have data ranging from 2016 to 2020

### 6.1.9. URBAN AND RURAL COMPLETION RATES

UIS data reveals gaps in lower secondary completion rates between girls in urban areas and rural ones for all countries analyzed, with the exception of oPt, with a completion rate of 97% for all girls (Figure 27). The greatest gap was in Somalia, with no girls reported to complete lower secondary in rural locations compared to 64% in urban ones.

**Figure 27. Lower secondary completion rates in crisis-affected countries for rural and urban female learners**

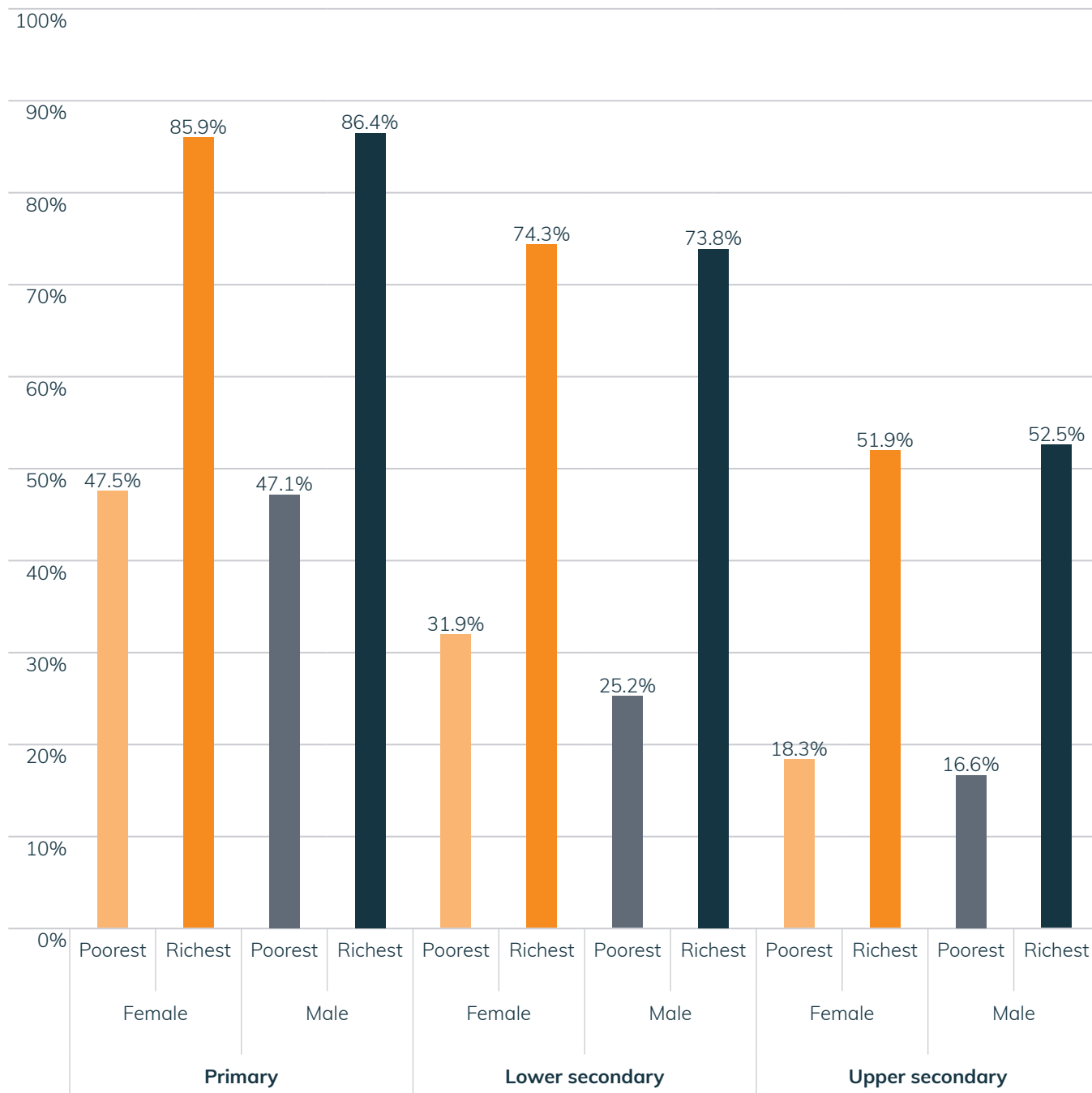


Source: Data retrieved January 2023 from [the UIS database](#); crisis-affected country averages based on authors' own calculations from most recent available data (2016–2020) for 19 countries with data available

### 6.1.10. WEALTH QUINTILES AND COMPLETION RATES

Substantial gaps remain between the richest and poorest learners in terms of completion rates at all levels of education (Figure 28). Male and female learners' completion rates were largely similar within wealth quintiles across all levels of education, with the greatest gap in lower secondary (32% completion among the poorest girls compared to 25% among the poorest boys).

**Figure 28. Crisis-affected countries' average completion rates by sex and poorest/richest wealth quintile\***



Source: Data retrieved January 2023 from [the UIS database](#); averages are authors' own calculations from most recent available data (2016–2020) for 23 crisis-affected countries with data available

\*No increase in number of countries from previous report, but statistics of some countries were updated and adjusted upward

## 6.2. LEARNING

Though some progress is being made with learning data, it has been slow (Table 16). Since 2021, one additional country has reported conducting a learning assessment at the primary level, with less than two-thirds of conflict-affected conducting nationally representative learning assessments at the end of primary in the last five years.

**Table 16. UIS data on learning assessments conducted since 2018 in crisis-affected countries**

Grade or education level	Discipline/subject	# of crisis-affected countries that have conducted a learning assessment (n=44)
End of Grade 2 or 3	Mathematics	28
	Reading	30
End of primary	Mathematics	29
	Reading	26
End of lower secondary	Mathematics	34
	Reading	33

Source: Data retrieved January 2023 from [the UIS database](#); data available for all 44 crisis-affected countries

A [recent ECW \(2022c\) report](#) presents a new methodology for estimating the number of children in crisis-affected countries in need of support, and it provides new options for determining learning loss. This approach, however, highlights the challenges of disaggregating learning data by sex because the lack of primary data available for learning outcomes means disaggregation is typically impossible. ECW does provide overarching estimations for children attending school and not learning. By ECW estimations, 91% of children attending school in countries covered by interagency plans/appeals are not learning (Table 17). Children and adolescents are predicted to be faring worse in mathematics than reading, though the picture is stark for both subjects. ECW estimates that in total, 89% of all crisis-affected children and adolescents globally, either in or out of school, are not learning (ECW, 2022c, p. 20).

**Table 17. Estimations of 222 million crisis-affected children and adolescents of school age attending school and not learning**

Dimension	Total	% in protracted crisis	% in countries covered by interagency plans/appeals
<b>Attending school, not achieving minimum proficiency (reading)</b>	87.27 million (85% of those attending primary or lower secondary)	83%	92%
<b>Attending school, not achieving minimum proficiency (mathematics)</b>	93.04 million (91% of those attending primary or lower secondary)	83%	92%
<b>Attending upper secondary school, learning-deprived</b>	26.56 million (90% of those attending upper secondary)	85%	90%
<b>Grand total, in school, not learning</b>	119.6 million (91% of those attending school)	84%	91%

Source: ECW (2022c, p. 20)



## CHAPTER 7: FUNDING TO GIRLS' AND WOMEN'S EDUCATION IN CRISIS-AFFECTED COUNTRIES

### Key findings

- The availability of education finance data has improved. There is now data on national education spending available for 33 crisis-affected countries.
- From 2016 to 2020, we see a slight fall in the percentage of government expenditure going to education: 13.5% to 12.9%. The percentage of GDP going to education has remained constant, at 3.4%.
- Humanitarian appeal funding requested by education has increased, from US\$876 million in 2018 to US\$2.954 billion in 2022, in part due to the Ukraine crisis. The proportion of education appeals funded was 48.2% in 2018, 39.8% in 2020, and 26.4% in 2022 due to the increased demand, though funding levels remained stable.
- The proportion of ODA education funding targeting gender equality and women's empowerment has increased sector-wide, with a particular increase in targeted funding at postsecondary.
- Aid support to education is under threat as the number of emerging and protracted crises around the world continues to increase, including the ongoing conflict in Ukraine and aftermath of COVID-19. This continues to create competing funding priorities, resulting in donors shifting allocations.

## 7.1 NATIONAL PUBLIC EXPENDITURES

The [Education 2030 Framework for Action](#) urged governments to commit to allocating 4% to 6% of a country's GDP, or at least 15% to 20% of total public spending, to the education sector (UNESCO, 2015b; Global Education Meeting, 2021; INEE, 2022b). A total of 21 crisis-affected states committed to these targets through endorsing the Paris Declaration and/or the Kenyatta Declaration.

However, few crisis-affected countries meet this threshold, as their in-country averages over time have consistently been lower than the minimum established expenditure benchmark (INEE, 2022b). Besides being low, national public expenditure is often inequitable, as public spending per student at the tertiary level is generally much higher, but it is predominantly those from the wealthiest households that benefit (UNESCO, 2021). For instance, in Bangladesh and the Philippines, children from the wealthiest fifth of the households use about 25% of public spending on education compared to 15% for children from the poorest fifth (UNICEF, 2020b)

This section uses UIS data to establish government commitments to these internationally established education spending benchmarks, and the data available has increased since *Mind the Gap 2*. In the UIS database, 29 countries have their latest education expenditure as a percentage of GDP updated for 2020, with another 10 countries having posted their 2021 data.<sup>51</sup> By contrast, four countries had recent data (2020) reported in *Mind the Gap 2*.<sup>52</sup> Additionally, 29 of the 44 countries have posted 2020 data on education expenditure as a percentage of total government expenditure, up from 11 countries in *Mind the Gap 2*; 26 countries have updated their education expenditure as a percentage of total government expenditure for 2021, and 15 countries have done so for 2022.

From the updated data, it is evident that since *Mind the Gap 2*, Burundi has joined Burkina Faso, Ethiopia, and Senegal as countries that have met both of the desired benchmarks: 4% of GDP and 20% of government expenditure (see the [Education 2030 Framework for Action](#), Paris Declaration, and Kenyatta Declaration). Others – including Chad, Colombia, Kenya, Mali, Mozambique, oPt, and Ukraine – meet the 4% of GDP threshold but have not reached 20% of the government expenditure. Analysis in [this year's Education Finance Watch](#) suggests these budgetary changes may be primarily due to changes to the fiscal space, economic groups, and overall resources available to government budgets. Countries with poor macroeconomic performance pre-COVID are likely to have much worse performance post-COVID, suggesting the inequalities in national education spending are only likely to worsen (UNESCO UIS & World Bank, 2022).

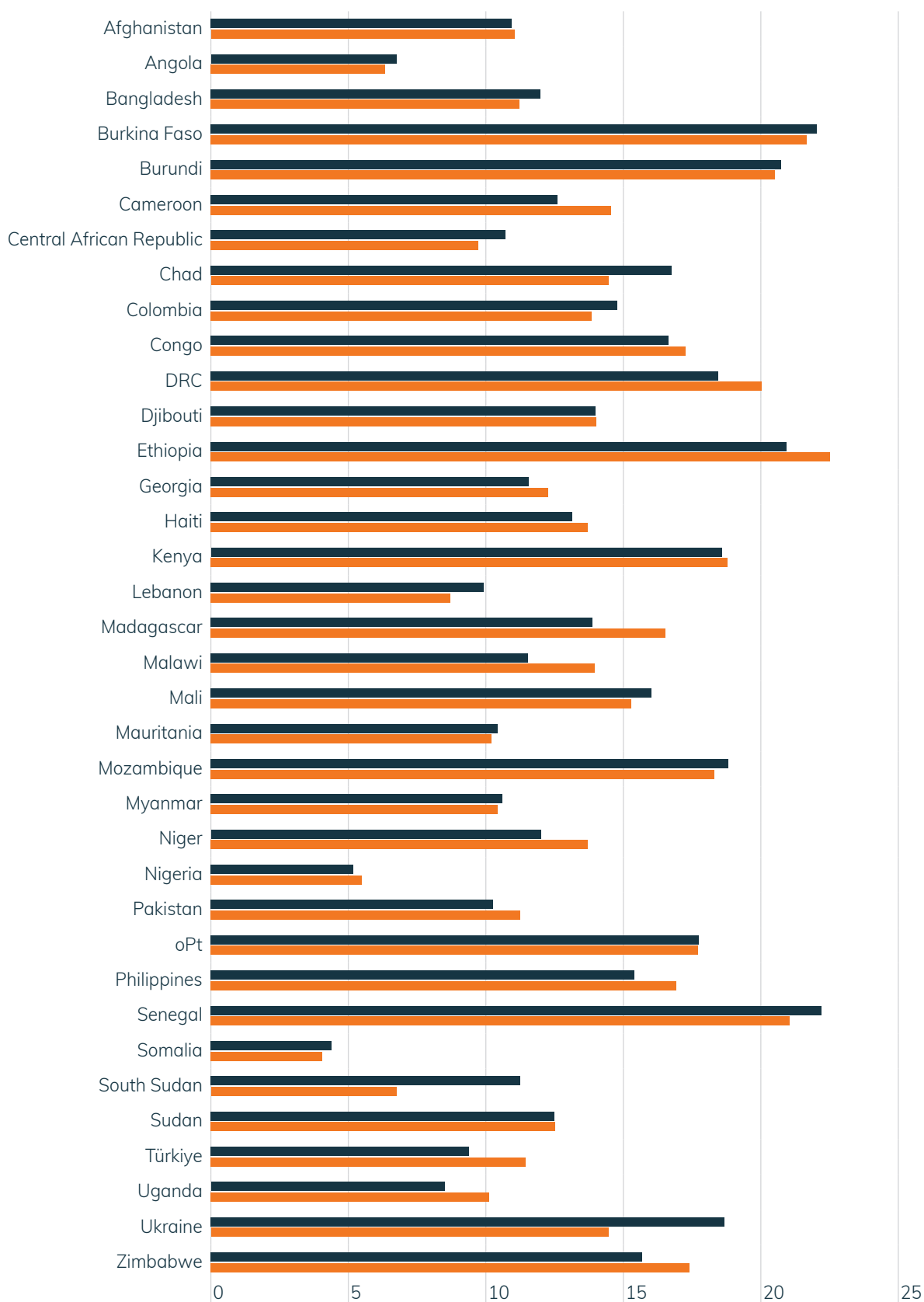
Comparing government spending on education as a total percentage of government expenditure against the national average expenditure between 2018 and 2022, we see that most crisis-affected states spent close to, or slightly less than, their average in the latest year for which data is available. Some crisis-affected countries did spend a higher proportion than average; Senegal spent 1.1 percentage points more and Chad 2.3 percentage points more in 2022.

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<sup>51</sup> Bangladesh, Chad, DRC, Georgia, Kenya, Mali, Mauritania, Uganda, Pakistan, and Jordan

<sup>52</sup> The four countries are Georgia, Kenya, Malawi, and Mauritania. Colombia, the Philippines, and Senegal have since added their 2020 data.

**Figure 29. Government expenditure on education in crisis-affected countries (latest available data compared to averages for 2018-2022)**



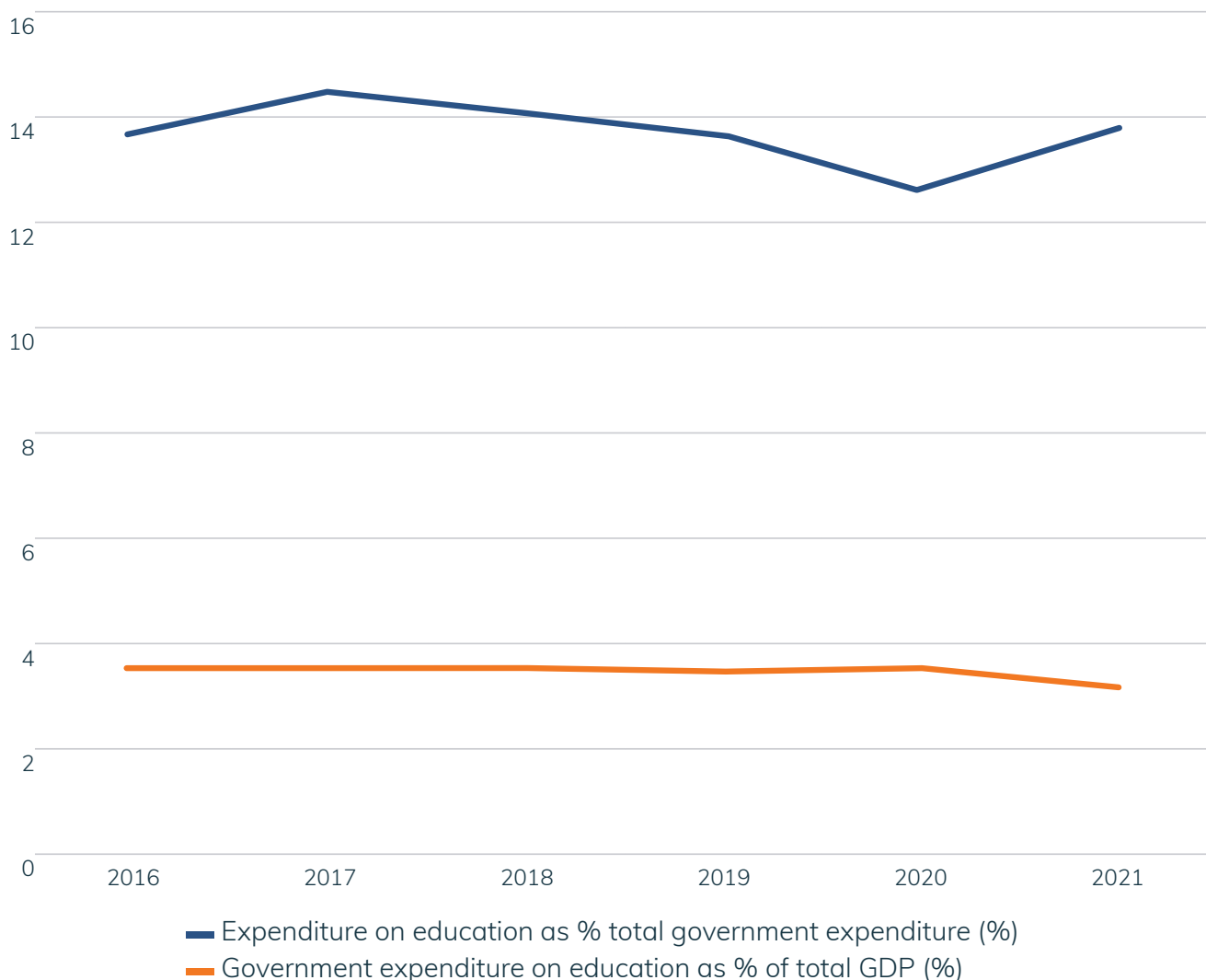
■ Government expenditure on education as % of total government expenditure. Average from 2018 - 2022  
■ Government expenditure on education as % of total government expenditure. Latest available data (2017 - 2022)

Source: Data retrieved February 2023 from [the UIS database](#); most recent available data (2017– 2022) for 37 crisis-affected countries with data available



Comparing the mean percentage expenditures for a consistent set<sup>53</sup> of crisis-affected countries over 2016 to 2021, we see a slight fall in the percentage of government expenditure going to education from 2019 to 2020, from 13.7% to 12.6%, with expenditure returning to 2019 levels in 2021 (Figure 29). The percentage of GDP going to education has remained relatively constant over time, 3.4% on average, with a slight drop to 3.2% in 2021.

**Figure 30. Trends in means for a consistent set of countries with data for 2016-2021<sup>54</sup>**



Source: Data retrieved February 2023 from [the UIS database](#); most recent available data (2017– 2022) for 34 crisis-affected countries with data available

Similar to the analysis of education spending as a percentage of GDP, this report categorizes countries based on their education spending as a percentage of government expenditure. Looking at trends across the 29 countries with sufficient data, more countries are decreasing their percentage spent on education than increasing it (14 versus nine). Most concerningly, 13 countries have an expenditure rate that is low and falling. In Zimbabwe, investment in education as a proportion of total expenditure dropped more than 6.5 percentage points over the period, and spending in Malawi and Pakistan dropped by over 4 percentage points. On the positive side, government spending in South Sudan grew from less than 1% of government spending in 2016 to over 10% in 2021.

<sup>53</sup> Based on 34 countries with at least three data points for both indicators over the period. Missing data points have been replaced by estimates based on the average data from adjacent years. Countries: Angola, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Congo, DRC, Djibouti, Ethiopia, Kenya, Madagascar, Malawi, Mali, Mauritania, Mozambique, Niger, Senegal, Seychelles, Somalia, Uganda, Zimbabwe, Afghanistan, Bangladesh, Pakistan, Myanmar, the Philippines, Colombia, Haiti, Ukraine, Georgia, Jordan, Lebanon, and oPt.

<sup>54</sup> Where countries are missing, a single annual data point has been estimated based on data for adjacent years.

**Table 18. Change in government spending on education as a percentage of total government expenditure**

Government spending as % of GDP (most recent data)	Declining* spending as % of total government expenditure (2016–2021)	Little change* in spending (less than 0.5%) (2016–2021)	Rising* spending as % of expenditure (2016–2021)
<b>Low government spending on education (&lt;18%) (mean value 2018–2022)</b>	Afghanistan	Angola	Central African Republic
	Bangladesh	Cameroon	Congo
	Chad	Colombia	Lebanon
	Georgia	Haiti	Mauritania
	Madagascar	Mali	Somalia
	Malawi		South Sudan
	Niger		Ukraine
	Nigeria		
	Pakistan		
	Philippines		
	Türkiye		
	Uganda		
	Zimbabwe		
<b>High government spending on education (&gt;18%) (mean value 2018–2022)</b>	Mozambique	Burundi	Burkina Faso
			Senegal

Source: Data retrieved January 2023 from the UIS database

\*Change calculated based on the difference between the mean spending in 2016 and 2017, compared to the mean in 2020 and 2021 data

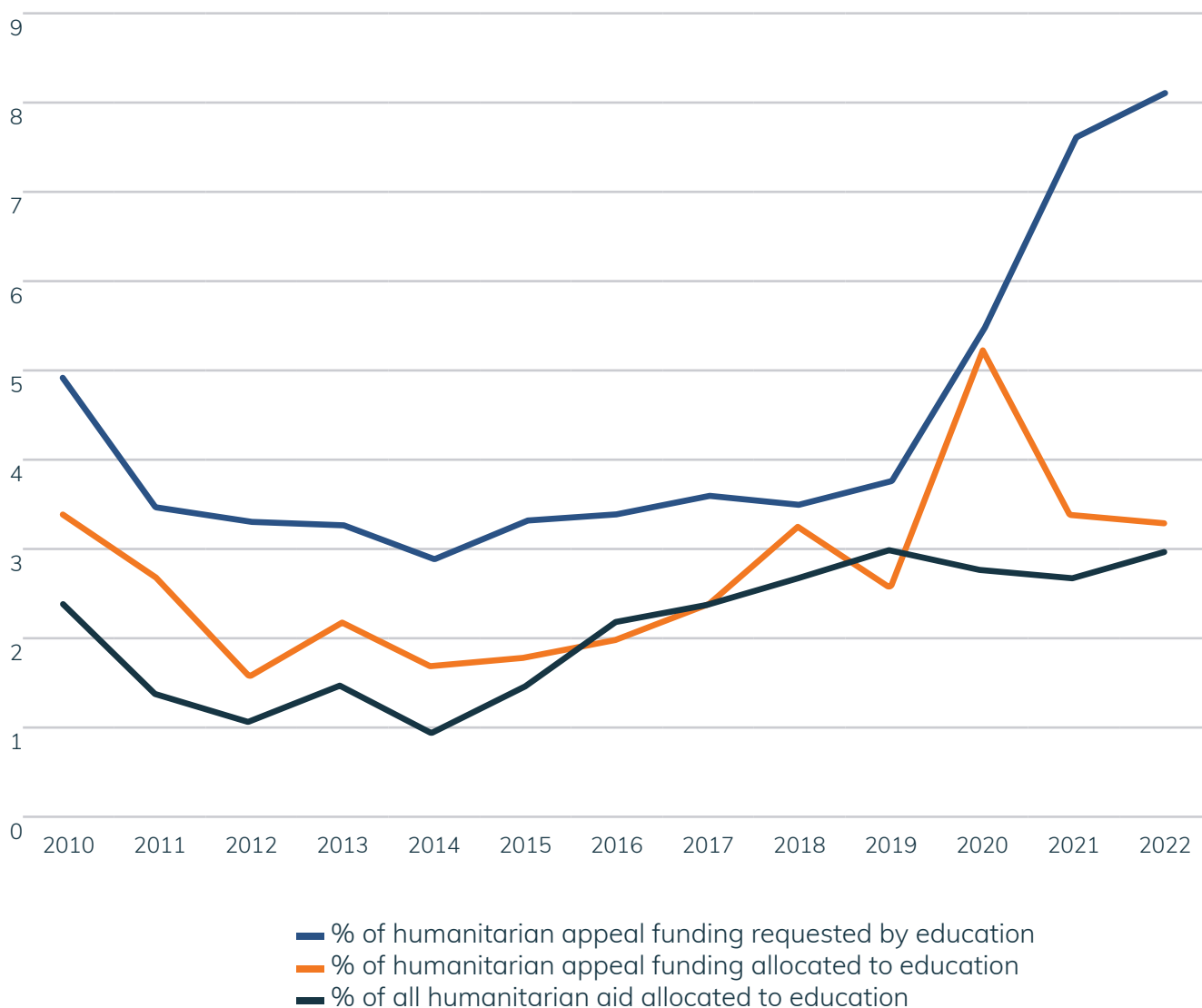
Education Finance Watch Report 2022 (UNESCO UIS & World Bank, 2022) looks at changes in national education budgets since the onset of COVID-19. It found that upper-middle- and high-income countries have prioritized education in their 2022 budgets, with education taking a greater share of total government budgets. For low- and lower-middle-income countries,<sup>55</sup> education's share of the budget decreased in 2020, recovered in 2021, but fell again in 2022 – remaining below 2019 levels. A total of 65% of LMICs reduced their education budget, although average reductions were smaller than pre-COVID. This divergence threatens to exacerbate inequalities in education spending.

55 28 countries with data available in the UIS database

## 7.2. INTERNATIONAL EXPENDITURE

In this section, we explore international expenditure on education, specifically the global humanitarian aid to education. The [UN OCHA Financial Tracking Service](#) helps in this analysis, with data categorized by sector, hence outlining the funding allocated to the education sector over time. The data itself is categorized as funding appeal/request, allocated funding/actual funding, and total humanitarian aid allocated to education. The proportion of all humanitarian aid allocated to education in the past five years (2018–2022) remained relatively stable, at 2.8%, while the funding appeal/request category grew, peaking in 2022 (Figure 31).

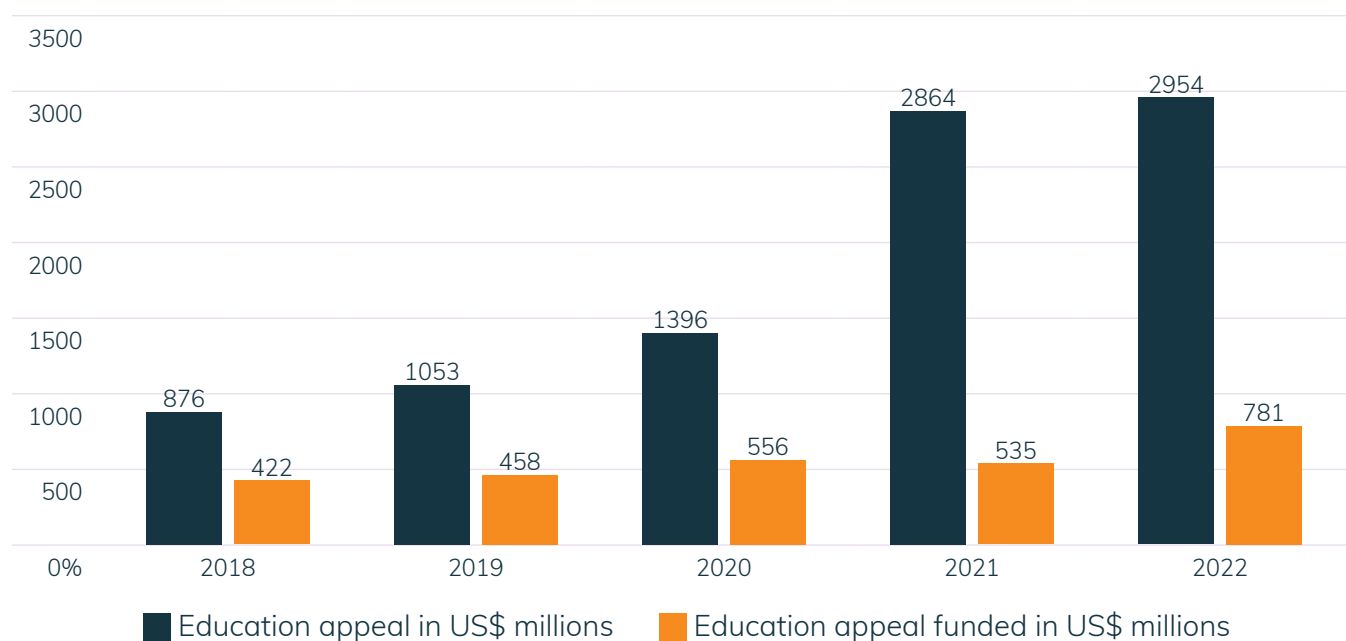
**Figure 31. Proportion of humanitarian aid to education, 2010 to 2021**



Source: Retrieved January 2023 from [UN OCHA Financial Tracking Service](#)

In terms of absolute numbers, education funding appeals grew from US\$876 million in 2018 to US\$2.954 billion in 2022 (Figure 32). Funding requests, however, do not necessarily translate to funding. In fact, the number of funded appeals fell over the five-year period, from 48.2% in 2018 to 39.8% in 2020 to 26.4% in 2022.

**Figure 32. Absolute humanitarian aid appeals to education**



Source: Retrieved January 2023 from [UN OCHA Financial Tracking Service](#)

Analysis in [Education Finance Watch 2022](#) (UNESCO UIS & World Bank, 2022) uses data from a wide range of sources.<sup>56</sup> The analysis shows that overall direct aid to humanitarian causes in education (excluding direct budget support) was stagnant between 2018 and 2022, and it fell by US\$359 million among bilateral donors. The decrease was concentrated among four donors (Saudi Arabia, Turkey, the UK, and the US), while France, Germany, and Japan increased their education aid by US\$597 million. Several donors have announced that funding will be repurposed as a result of ongoing crisis and in the aftermath of COVID-19. For example, Norway reduced its education support by US\$19 million in 2020 and postponed payments to the Global Partnership for Education, while Germany is committed to repurposing aid budgets to support Ukrainian refugees. It is unclear whether these funds have been allocated for Ukrainian refugees in general or those entering the respective countries allocating aid.

New crises, such as the war in Ukraine, can pose a challenge to the funding landscape, wherein funds are reallocated rather than increased to respond to a new crisis. International aid has been diverted from other crises to Ukraine rather than additional funds being allocated. The UK, for example, funded the costs of hosting Ukrainian refugees from its aid budget, with estimates that up to a quarter of the UK's annual aid budget was spent on hosting refugees in 2022 (Hughes & Mitchell, 2022). Sweden and Denmark announced cuts to other aid priorities after diverting funds to the Ukraine crisis, equating to 14% of Sweden's and 10% of Denmark's 2021 aid budget (Ritchie & Breed, 2022). By November 2022, Sweden had diverted \$150,000 from Sri Lanka, with Denmark diverting funds previously allocated to Syria, Mali, Burkina Faso, and Bangladesh (Sajjad, 2022).

### Box 16. ECW High-Level Financing Conference

During the 2023 ECW High-Level Financing Conference, 17 donors announced a total US\$826 million in pledges to ECW. Five of the 17 contributions were from new donors (Global Business Coalition, Italy, Qatar, Spain, and Zürcher Kantonalbank). The largest commitment of the day came from the United Kingdom, with an announced £80m in new funding to ECW. Germany remains ECW's largest donor, at a total EUR210 million commitment.

At the conference, ECW received donations from both traditional and nontraditional donors, with broad support from governments, UN agencies, the private sector, CSOs, and other strategic partners. ECW's strategy is seeking \$1.5 billion overall to deliver its 2023–2026 strategic plan.

Source: ECW (2023b)

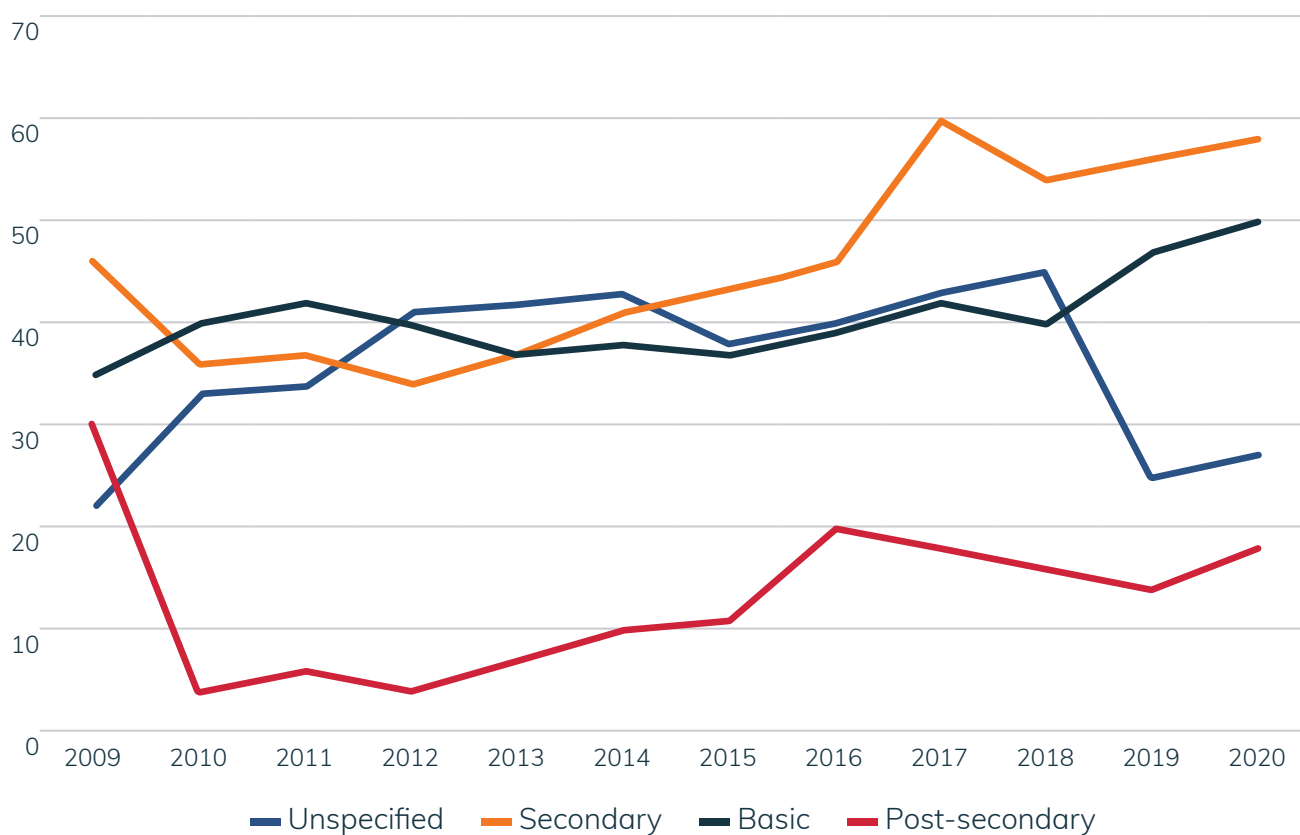
<sup>56</sup> Includes data from UNESCO, the World Bank, the International Monetary Fund, and OECD

### 7.3. INTERNATIONAL EXPENDITURE ON GIRLS AND WOMEN

The ODA data, as captured in the UN OCHA Financial Tracking Service and OECD Creditor Reporting System database, does not detail specific women and girls' education priority areas supported by humanitarian education funding in the recipient countries. As in previous *Mind the Gap* reports, we must note that aid to other sectors (e.g., health, GBV prevention, protection, and child protection) can all support efforts to overcome gendered barriers to education but would not be captured within educational funding.

Analyzing OECD Creditor Reporting System data on development aid that supports gender equality and women's empowerment, we see the proportion of spending at basic levels of education for the 44 crisis-affected countries has been gradually increasing, from 35% in 2009 to 50% in 2020. This growth is also observable at the secondary level, from 36% in 2010 to a peak in 2017 (60%) to a slight decline in 2020 (58%) (Figure 33).

**Figure 33. Proportion of education aid that targeted gender equality and women's empowerment, 2009 to 2020 (%)**



Source: Retrieved January 2023 from [OECD's Creditor Reporting System database](#)

Since *Mind the Gap 2*, there has been an upturn in the gender focus of spending sector-wide, and particularly in funding for postsecondary education. Notably, the ODA targeting gender equality at the primary/basic education level has continued to grow, although the [2022 SDG Gender Index Report](#) discusses how adolescent girls' and women's voices are often absent in decision-making on how education aid is spent, (Equal Measures 2030, 2022). This implies that women and girls' perspectives are not adequately considered in the design and targeting of funding.



# CHAPTER 8: CONCLUSIONS

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## 8.1 EVIDENCE OF PROGRESS

The data provides some evidence of progress toward the goals set out in the Charlevoix Declaration on Quality Education. This progress is easier to see than in previous *Mind the Gap* reports due to the new statistical models used by the GEMR team to make a time series of completion rates available for a wide range of countries. Some of the main trends include the following:

- Average out-of-school rates for girls in crisis-affected countries fell at the primary, lower secondary, and upper secondary levels between 2018 and 2020. However, this figure is still falling very slowly: for example, only 0.25 percentage points a year at the primary level. Without greater investment and support, it will take until 2090 for all primary school-age girls in crisis settings to access school.
- While out-of-school rates remain higher for girls in crisis-affected countries than for boys, the gender gaps for out-of-school children at the secondary level are closing, declining from 6 percentage points in 2016 to just 3 percentage points in 2020.
- We are seeing a slow and steady improvement to girls' completion rates at the primary and lower secondary levels, around 1 percentage point per year. However, these rates could be optimistic, as they do not take the effects of COVID-19 into account and they mask the greater challenges faced by those with intersecting vulnerabilities, such as girls with disabilities. Allowances, alongside additional resources and effort, are needed to ensure the most vulnerable are included in these improvement rates.
- Although boys have slightly higher completion rates overall at the lower and upper secondary levels, nine crisis-affected countries have made above-average gains in the percentage of girls completing lower secondary from 2016 to 2020.

ECW's [new methodology](#) is another helpful tool for determining learning loss, although the method highlights the challenges of disaggregating learning data by sex due to the lack of primary data available for learning outcomes in crisis countries. The ECW report also gives us a bleak picture of learning, with an estimated 91% of children attending school in countries covered by interagency plans/appeals not learning and children continuing to do worse in math compared to reading. Global learning poverty is on the rise, and progress against this had stalled even before COVID-19, sitting at 57% in 2019 (ECW, 2022c).

One area that continues to see progress is the global and donor community's focus on and commitment to gender equality in and through education. There has been a global shift from talking about girls' education to the need for gender equality in and through education and more gender-transformative approaches. This was particularly evident at the Transforming Education Summit in September 2022, when the initiative around advancing gender equality became a transforming education flagship to be

promoted, championed, and monitored under the SDG4-Education 2030 High-Level Steering Committee. These commitments are being matched by a greater proportion of education aid targeting gender equality and women's empowerment, as well as an upturn in the gender focus of crisis countries' education spending, especially at the postsecondary level.

Since *Mind the Gap 2*, we also see greater recognition of the needs of the most marginalized girls in crisis settings, including girls with disabilities. Over the past year, the global community has continued to highlight how COVID-19 is still affecting the educational marginalization of girls and people with disabilities, increasing focus and commitment to this area. Evidence and research during the pandemic put a spotlight on those who were being left behind, and in response, the international community continued promising to build back better for all those who were most severely impacted by learning loss as well as those lacking protection. Against the backdrop of this pandemic, we saw the following commitments in 2022 to support the most marginalized in situations of crisis, emergency, and conflict:

- Commitments around inclusive education at the Global Disability Summit, with heightened awareness around the discrimination and abuse that women and girls with disabilities face being demonstrated
- A G7 communiqué (following the G7 foreign ministers' meeting) agreeing to contribute to a more resilient, inclusive, and gender-transformative education system by ending structural barriers and harmful gender norms; this came with collective agreement to increase the share of bilateral ODA on advancing gender equality and women's empowerment
- A call to action after the Transforming Education Summit calling for governments to put gender equality at the heart of education sector plans, budgets, and policies, with a particular focus on emergency and crisis contexts where vulnerabilities are most pronounced
- COP27 calling on parties to make gender equality, women's empowerment, and women's leadership central to climate action

While policies and legal barriers still remain in enabling girls to access education in crisis-affected countries, we do continue to see progress. The Central African Republic recently removed exceptions around the minimum age of marriage and brought in some level of protection from violence, for example. Cameroon put legal frameworks in place to protect pregnant and parenting girls' right to education. (While promising, the global rate of change needs to be addressed; only 7% of crisis-affected countries currently protect this right.) Despite movements in the right direction, too, the situation in Afghanistan demonstrates how fragile progress can be, wherein a change in regime can destroy years of work.

## 8.2 WHERE GAPS REMAIN

### 8.2.1 PRIORITIZATION OF EDUCATION BUDGETS

Upper-middle-income and high-income countries have prioritized education in their 2022 budgets, with education taking a greater share of total government budgets. However, this is not the case for low- and lower-middle-income countries, including crisis-affected countries. In 2022, 65% of LMICs reduced their education budget. This demonstrates that while there has been increased awareness around learning loss during COVID-19, this is not being adequately addressed in crisis-affected countries, and the need for international support is growing.

The data on funding appeals highlights the large increase in requests in recent years. However, the proportion of education appeals that are actually being funded by the international community has continued to drop, from 39.8% in 2020 to only 26.4% in 2022. This highlights how the ongoing commitments around gender equality in and through education, and the call to support the most marginalized in conflict and crisis, are not supported by adequate funding and resources. This could be partly due to the need for governments to build back better within their own countries, as well as their shifting funds to new conflicts and emergencies, such as the war in Ukraine. Overall levels of aid spending have also fallen in some high-income countries, with no certainty these will bounce back to pre-COVID levels. Recommendations to address these gaps include:

- Civil society, including youth, must continue to hold donors and their governments to account for their commitments to gender equality in and through education. Commitments should be closely monitored and reported on through easily accessible, up-to-date, and transparent platforms, such as the [Charlevoix Funding Dashboard](#).
- Humanitarian and development actors should advocate for governments to maintain or increase aid spending, with a focus on education in emergencies and protracted crises, in order to meet commitments and speed up progress toward SDG goals.
- G7 countries should limit the use of ODA budget to support refugees within their own borders. They should instead focus ODA on conflict and crisis situations abroad, with other home office budgets supporting refugees within their own countries.

### 8.2.2. GAPS IN THE FEMALE TEACHING WORKFORCE

The Transforming Education Summit call to action acknowledged the need to focus specifically on improving the recruitment and retention of qualified female and male teachers and facilitators. To ensure continuity of learning for crisis-affected children, teacher needs' must be prioritized and their safety and continuous professional development supported. We continue to see a shortage of teachers in crisis settings, especially in areas of displacement. Additionally, while female teachers' presence in education systems is firmly associated with expanded educational opportunities and attainment for girls, the shortage of female teachers grows as one moves through the education system. The small proportion of female teachers at the secondary level is falling in crisis-affected countries, and women are also hugely under-represented in school leadership positions even as evidence shows that female school leaders are better able to support their school community's well-being and actively encourage attendance and retention. This shortage can only be addressed by acknowledging the unique and multiple barriers that women are facing within the education sector and by putting clear strategies and resources in place to address it. This starts with support for women and girls' secondary education. Therefore, recommendations to address these gaps include:

- National governments should support women in completing secondary education so they can attain the qualifications needed to attend teacher training college.
- National governments, in partnership with development actors, should put strategies in place to ensure female teachers' safety both at training centers and within schools. Safeguarding policies must be in place, understood, and adhered to, with their implementation supported by training. There should also be a culture of safeguarding within schools, with zero tolerance for any form of abuse and with all instances of emotional, physical, and sexual abuse reported, prioritized, and responded to. Clear and confidential reporting mechanisms need to be in place and accessible to all, and school leadership must champion wider gender and inclusion training to address harmful norms and power dynamics that lead to GBV.
- School leadership should establish supportive peer networks for female teachers and leaders, including teacher learning circles, to support their continuous professional development. Tools such as INEE's [Teachers in Crisis Contexts Peer Coaching Pack](#) can be used to encourage collaborative activities in order to strengthen these networks and communities of practice.
- Ministries of education, in partnership with civil society, should provide career guidance and mentorship opportunities for female teachers. Strong female leaders can be linked with aspiring leaders to build their confidence and motivation in order to support their progression into, and retention in, positions of responsibility.

In refugee settings, female teachers often hold fewer qualifications than their male counterparts. The number of untrained teachers is high, and the shortage of teachers is due to the numerous barriers women face when teaching in displacement settings, with a lack of support and safety concerns being continually highlighted by the teachers themselves. Alternative routes to teaching for those without the qualifications to attend teacher training need to be considered, as should incentives and initiatives that would make teaching more accessible for women in these settings. Therefore, recommendations for governments, development actors, and civil society include:



- Engage the community in teacher recruitment, which leads to the community supporting the new teachers and ensuring they feel protected and valued
- Improve teacher deployment systems to account for teachers' family responsibilities, disabilities, health needs, and ethnic backgrounds.
- Provide opportunities for continuous professional development that can fit in with other responsibilities that teachers have outside of the classroom and can be delivered during school hours.

### 8.2.3. GAPS LIMITING SUPPORT FOR CHILDREN WITH DISABILITIES

Comprehensive, disaggregated data is essential to design education emergency responses that adequately respond to the needs of girls with varying types and severity of disability. However, international data sets have major gaps, meaning they fail to show the experience of children with disabilities and limit our understanding of the additional challenges and barriers girls face due to a lack of disaggregation. While the Washington Group Questions have made good progress in highlighting the need for detailed disability data across functional areas and levels of severity, this data needs to be collected accurately and consistently, used effectively, and not serve as a substitute for nationally owned and collected data in the long term. Recommendations to fill these gaps include:

- In the long term, national governments should ensure EMISes are updated to include data on children with disabilities, as well as used as the core source of data; questionnaires and data sources need to be designed to accurately identify children with varying types and severity of disability. To not overburden struggling EMISes in the short term, the Washington Group Questions should be more widely used to achieve greater consensus and consistency in disability data across sectors and countries.
- Governments should increase their commitments and resources to enable the collection of disability data in an accurate and respectful way; as such, adequate training and guidance are needed for those designing and using these data collection tools.
- Data collectors should ensure inclusion is considered at all stages of data generation: in designing the data collection tools; ensuring children and people with disabilities can participate in sufficient numbers; and involving people with disabilities in the analysis and dissemination of findings to ensure these findings reflect their experiences.

While evidence shows that girls with disabilities are more likely to experience bullying, sexual harassment, and abuse in crisis- and conflict-affected countries, there is a total lack of nationally representative data on children with disabilities' experiences related to violence. Studies specifically designed to measure violence (including school-related GBV), such as the Violence Against Children Surveys and the Global School-Based Student Health Surveys, do not include any measure of disability. Disability disaggregation is needed to measure violence against girls with disabilities in order to plan how to prevent and respond. While data on adapted infrastructure is slightly more comprehensive, gaps remain, and the data does not give details on whether the adaptations are actually meeting the needs of girls with disabilities.

Even with the limited data available, it is clear that both girls and boys with disabilities are more likely to be out of school than their non-disabled peers. These differences become even greater when severity of functional difficulty is taken into account. Holistic programming that works with schools, communities, and policymakers is beginning to make strides in ensuring education meets children's needs. To address stigma, drop-out, repetition, and abuse, governments and humanitarian and international actors need to ensure the following are in place:

- National inclusive-education policies with clear implementation plans that are financed and resourced
- Teacher training, toolkits, and ongoing support from teaching assistants and specialist education officials
- Close collaboration with families and communities to ensure education meets the needs of their children with disabilities, increasing the likelihood of their support for attendance and learning

#### 8.2.4. GAPS IN PROVIDING CSE CAN WIDEN GENDER INEQUALITIES

The links between SRHR and education are bidirectional: higher levels of education and learning outcomes help realize SRHR, while equipping girls and adolescents with SRHR knowledge can help girls to stay in school and learn and help out-of-school girls to return. Despite these critical links, huge gaps remain in the provision of age-appropriate CSE in crisis contexts, alongside a lack of programs that address ongoing resistance to SRHR education. This resistance, at multiple levels, often limits the focus on gender, power, and rights in favor of a biological approach, which is proven to have far less impact on SRH outcomes.

A number of crisis-affected countries still have no relevant CSE content in their curricula and lack provision at the primary level. Due to the number of over-age learners in crisis settings and the greater number of girls (and children) in school at the primary versus secondary level, it is critical to cover SRHR from an early age. Recommendations to address these gaps include:

- Governments and humanitarian and development actors should support CSE delivery at the primary level, with initiatives in place to ensure that over-age learners are receiving an age-appropriate curriculum.
- Youth and grassroots organizations should help address parental, community, and governmental resistance by highlighting misinformation and providing evidence of impact.
- Governments and humanitarian and development actors should ensure that all countries have relevant CSE curricula that address inequitable power dynamics and harmful gender norms. Advocacy and engagement are needed to continually highlight that a comprehensive focus on SRH and rights education is a critical element in achieving gender equality.

CSE is receiving increasing attention and education's role as a protective factor and social determinant of health in the context of access to information during pandemics and crises is becoming clearer thanks to COVID-19. However, teachers often have limited capacity to deliver comprehensive sexuality curricula. Additionally, teachers' own biases, stereotypes, and confidence and comfort to deliver materials influence how much this content is rights-based, age-appropriate, and inclusive of girls with disabilities. Another gap is in the delivery of universal sexuality education, which includes providing this education to those out of school. Only five of the 44 crisis-affected countries examined have an out-of-school curriculum, yet the most marginalized groups, who continue to lack access to SRHR information and services, are often most at risk of having their SRHR violated. In order to address this:

- Humanitarian actors and grassroots organizations should continue supporting youth-led initiatives to reach out-of-school children with SRHR education. Youth outreach is most successful when it is key to these programs' design and implementation.
- Development actors and civil society should support organizations and networks in widening the reach and depth of SRHR knowledge through online platforms, which have been successful in engaging youth with content that matters to them, increasing its chance of affecting behaviors.
- Development actors should advocate for and fund training for teachers to enable them to deliver a comprehensive sexuality curriculum that addresses the deeply rooted gender inequalities limiting women's control over their own reproductive health.

The gaps and progress highlighted in this report represent both challenges and opportunities for stakeholders to improve the situation around girls' education in crisis-affected countries. For further recommendations on how to address the gaps and challenges highlighted in this report, please refer to the accompanying policy brief, **Closing the Gap 3: Promoting Equity and Inclusion in and through Girls' Education in Crisis**.

# ANNEX 1: CASE STUDIES

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## CASE STUDY 1. EDUCATION IN EMERGENCIES AND COVID-19 IMPACT MITIGATION FOR ROHINGYA REFUGEES AND HOST COMMUNITIES (BANGLADESH)

The August 2017 outbreak of violence in Rakhine State, Myanmar, led to mass forced displacement among minority Rohingya Muslim populations throughout the region. The majority sought refuge in camps established in and around Cox's Bazar, Bangladesh. More than 970,000 Rohingya refugees lived in the camps as of December 2022, with 51% below age 18 (UNHCR, 2023).

The Rohingya are traditionally a gender-segregated community, and women and girls experience severe restrictions to movement that limit their access to services, resources, and livelihood opportunities while heightening their vulnerability to violence. Women living in camps often hold lower educational qualifications and face cultural barriers to accessing paid employment. Research by Plan International (2018) highlighted how girls' limited access to education is exacerbated by a number of factors: a lack of opportunities to learn, few female teachers, language issues, security concerns, care responsibilities and household duties, negative attitudes toward girls, and in particular, limited freedom of movement. COVID-19 further compounded this crisis in access to learning, with more than 6,000 learning spaces closing and more the 325,000 children losing access to learning opportunities (International Rescue Committee, 2020). Some research participants in Plan International (2018) described the barriers they faced:

*"My mother is not allowing me to go. I have to listen to my mother. My mother used to say, 'Girls do not need to study more. They need to perform the household chores.' That is why she does not allow me to go to school."*

—Adolescent girl, aged 12

*"If they allow, we will study. If they make school for us, then we can study. If the teachers are male, we will not study."*

—Adolescent girl, aged 16

### Overview of the project

Plan International Bangladesh delivered the Education in Emergency and COVID-19 Impact Mitigation project, with technical support from Plan International Spain and funded by the Spanish Agency for International Development Cooperation (AECID). The first phase of the project ran from March 2019 to August 2020 and the second phase from February to October 2022. This second phase sought to strengthen access to learning opportunities for crisis-affected refugee children and adolescents, as well as children and adolescents in host communities.

This case study discusses the second phase, which aimed to:

- Expand and strengthen non-formal, inclusive, high-quality, and protective basic education
- Improve the quality of education by strengthening the capabilities of education personnel in pedagogy and child protection
- Deliver WASH mitigation and support measures to counteract the social effects of COVID-19

The project worked with over 10,700 direct beneficiaries, including both refugees and members of the host community. It promoted education for girls both in the camps and the host communities, and 3,800 of the 10,700 total project beneficiaries were children and adolescents from the Rohingya community (1,936 girls and 1,864 boys) who benefited from improved access to education.

### **Delivery: Community mobilization for the recruitment of female Rohingya learning facilitators**

The project created, refurbished, and decorated home-based learning facilities called Shared Learning Spaces and Outreach Tutoring Centers to provide a safe and protective environment for Rohingya girls to access basic education, promoting young women's participation. The centers were staffed by learning facilitators recruited from the Rohingya community who held educational qualifications of at least 10 classes or equivalent; were fluent in Burmese and English; and had knowledge and experience related to community mobilization, facilitation skills, and a positive attitude toward child education and protection.

Recruiting female Rohingya facilitators was particularly challenging due to the cultural and social barriers faced by women. Rohingya women often had limited access to education in Myanmar, meaning few had the educational qualifications required to be learning center facilitators, and there were limitations on freedom of movement around the camps and cultural views on women's role in society and the public sphere. These restrictions were further compounded by the fact that Rohingya people do not have the legal right to work in Bangladesh.

To engage women as facilitators, the community-based learning facilities model was a key element of success. Facilitators themselves made room available in their homes to establish learning spaces within the Rohingya camps. This methodology generated widespread community acceptance around the participation of women, especially young women, as they could become facilitators within their own homes. Plan Bangladesh worked closely with Rohingya community members and religious leaders (imam, mahjee), as well as the host community volunteers, to identify and recruit women into these roles. Ten mentors were also recruited from the host community to support facilitators with delivering classes and lesson content.

In total, 100 learning facilitators – including 26 women – received training and continuing support through a mentor system. Recruiting this many women was a massive achievement, as it had not been possible to recruit any women in the first phase of the project.

When a volunteer was selected to be a facilitator, their training included teaching and learning practice for English, mathematics, social science, and life skills; classroom management; disaster risk management; socio-emotional learning and trauma-sensitive education approaches; and safeguarding and child protection. Facilitators also participated in a monthly refresher training in which they were encouraged to build and develop their skills by developing action plans. The Plan Bangladesh team also provided ongoing support and guidance to facilitators. Facilitators also received economic incentives to cover the basic needs of their families.

In addition to their role in the classroom, facilitators actively participated in community committees representing the learning community to follow up on school attendance and discuss barriers to school attendance as well as any other education issues that might arise.

### **Impact: Challenging gender norms and pathways to employment for facilitators**

Final external evaluation of the project showed it had made a direct difference in the lives of the most vulnerable children and their families in both the host community and the Rohingya community. The evaluation also highlighted how building the capacity of the learning center facilitators enhanced the teaching practices in their facilities; 99% of education facilitators agreed that overall, teaching procedures had significantly improved after the project (Datascope, 2022).

For the facilitators, participation in the project was associated with a range of empowerment outcomes. Through their involvement in learning center management committees, young women facilitators increased women's visibility and participation in the community, challenging existing social norms.

The evaluation also found long-term impacts for the female facilitators themselves, who developed their skills and capacity and moved on to perform similar roles for other organizations (such as an instructor for education interventions). Some facilitators started teaching higher grades due to their accumulated experience, while others began cascading training for new trainees. Other Rohingya girls and adolescents saw these facilitators as role models who were transgressing social norms, which may have helped encourage them to attend and stay in school and become teachers in the future. The presence of female facilitators also had a direct positive effect on improving girls' knowledge about SRH and menstrual management (Datascope, 2022).

The challenge now is ensuring these achievements – in terms of participation, training, and access to the labor market – are maintained in a context where many do not have a settled legal status. Following the priorities of the 2023 Joint Response and switch to the Myanmar Curriculum International, Plan Bangladesh will implement a Female Pre-Service Capacity Development program for Rohingya women to become teachers in the camp context and increase adolescent girls' access and retention, especially in secondary grades. Plan Bangladesh is planning to recruit Rohingya resource instructors to provide onsite support to the Rohingya teachers, build on the coaching and mentoring approach, and provide Burmese language training for teachers to be able to support learners more effectively in the national language of instruction.

## CASE STUDY 2. REFUGEE EDUCATION COUNCIL: VOICES FOR TEACHER SUPPORT AND WELL-BEING IN CRISIS-AFFECTED CONTEXTS

As part of the Government of Canada's Together for Learning campaign, World Vision Canada created the Refugee Education Council in collaboration with the Canadian International Education Policy Working Group in 2021. The [Refugee Education Council](#) brings together young leaders from Latin America, sub-Saharan Africa, the Middle East, and Asia. The 15 members are youth advocates, community leaders, teachers, and parents with vast experience and knowledge related to global refugee education. The members inform Canada's Together for Learning campaign and broader actors in the international education community on best practices, lessons learned, and challenges to providing quality education for refugee and host community children. The council also aims to shape solutions and approaches to address the education needs of refugees, other forcibly displaced people, and host-community children and youth, particularly girls and adolescent girls.

### Voices for refugee education at the highest levels

In its first year, Refugee Education Council members participated in a range of strategic dialogues, events, and trainings; engaged with high commissions; and held a virtual event for World Refugee Day 2021 in which council members called for the inclusion of refugee and displaced learners across social identities and at all levels of decision-making processes.

Council members also played a leading role in the March 2022 [Together for Learning Summit: Engaging Displaced Youth to Transform Education](#), hosted by Canada in collaboration with partner national governments, multilateral organizations, civil society, and other education stakeholders. The resulting [Together for Learning Youth Manifesto](#) calls for donor governments, multilateral organizations and NGOs, private sector partners, and everyday citizens to strengthen global commitments to addressing the growing displacement crisis. In response, the Government of Canada developed the [Together with Youth outcome](#) document and endorsed it alongside country partners, education ministers, and CSO stakeholders.

The Refugee Education Council has a vision for a world where all children have access to quality education and lifelong learning. The vision is underpinned by five core themes: inclusion, mental health and psychosocial support, digital learning, gender equality, and accountability. Action to improve teacher mobility, training, and professional development are central to the manifesto. Some of the key recommendations are:

- Ensure meaningful and equitable inclusion of refugee and displaced youth in global education decision-making at all levels.
- Establish inclusive curricula that teach gender, equality, inclusion, and peace and are inclusive of and responsive to the needs of refugee and displaced youth, especially the most marginalized. This is critical to strengthening the quality of education for all learners.
- Recognize teaching qualifications of refugee educators to enable them to teach learners in the host country.
- Improve the collection of data disaggregated by social identity factors (e.g., gender, sexual orientation, and ethnicity) on refugee and displaced youth experiences to better equip teachers, schools, CSOs, and government partners in responsive, evidence-based decision-making.
- Equip schools with trained counselors, and ensure all educators and staff receive training on how to identify trauma, respond to students' mental health needs, and address prejudices based on country of origin to create a safe learning space for all (Refugee Education Council, 2023).

### Mental health and psychosocial support toward school as a safe space for teachers and students

Underpinning the council's recommendations are the importance of teachers' and students' mental health and the provision of psychosocial support. In addition to staff training on identifying and responding to trauma, the [Refugee Education Council 2022 Report](#) calls for action to ensure that all education programs include mental health and psychosocial support and for concrete steps to destig-

matize mental health by encouraging open, safe, and supportive dialogue that reduces isolation and promotes well-being (Refugee Education Council, 2022).

Christine Mwongera is a Refugee Education Council member and national high school teacher in Kakuma Refugee Camp in Kenya. She joined the council as a platform to talk about refugees' experiences and the challenges faced in school. Within her community, Mwongera has initiated a wide range of activities to support girls' education and make school a safe space for girls, such as a life-skills club that brings in experts to engage in topics of girls' choice, a school kitty to support girls in the school with basic needs, and a notebook in which girls are able to write their problems and concerns and a teacher will write a response to provide support and guidance.

Mwongera told the World Vision Canada report team that she notices how trauma affects students in her classroom:

*"It makes me sad to know that many of my students don't see school as a safe space where no one can harm them. I see how most will sit at the edge of their chairs and panic at the smallest mistake. When I asked why, they told me that it is because they are ready to run. It's something they have done during most of their childhood and early teenage years"*

—Refugee Education Council, 2022

Teachers working in emergency settings frequently lack access to the training needed to provide appropriate support to students. Additionally, incentive teachers are often carrying their own trauma, and all teachers in a camp setting are far from their homes and families. Teachers need to be able to support their own mental health and well-being; for example, access to counseling that would provide the space and time to talk about how they are feeling, their challenges, and any overwhelming feelings. This requires colleagues and workplaces that are understanding and supportive.

Mwongera described the support and training that would help her feel valued as a teacher, as well as the additional workload that providing essential support for students entails. She called for dedicated time, perhaps a dedicated mental wellness day, for teachers to focus on their well-being and access a therapist or counseling:

*"We need to provide more opportunities to grow and have professional development and support. I really crave for an opportunity where I can gain the skills to help the students, where I can develop professionally so that I can help students with psychosocial support and their trauma, where I know if I see a student behave in a particular way, then I am able to be alert, to know that this person will need help. I am working extra hours, but I don't feel valued because my extra needs are not being met"*

—conversation with the Mind the Gap team, 2023

Mwongera calls for actors in education in emergencies to listen to refugees, involve them in policymaking, and vitally, take action; there is no way that we solve the challenges without listening to the people who have lived these experiences. She had some words of encouragement for teachers working in emergency settings and on the power of the profession:

*"I'm proud, of you accepting to go and pass on the skills and knowledge you have. If you help someone to change their life, that is an achievement and it's a very big achievement and you should not give up teaching. If one person ends up being independent, that one independent person is going to help another person and another person and the community; at the end of the day, you will have a confident, educated society because of one teacher. Because of them, there is change; the community will be positively impacted because of them"*

—conversation with the Mind the Gap team, 2023

## CASE STUDY 3. INCLUSIVE EDUCATION FOR CHILDREN WITH DISABILITIES – WEST BANK AND GAZA



Children with and without disabilities actively participating in wall painting inside public schools at Hatem Al Tai school in Khan Younis, Ali Al Agah, 2021

Inclusive education in humanitarian contexts means ensuring that all learners, including children with disabilities, receive the necessary support and accommodations to facilitate access and continuity of education (INEE, 2012). According to the latest available population-level data (from 2017), 1.8 million people in the West Bank and Gaza are children aged 0 to 14 – 38% of the total population (Palestinian Central Bureau of Statistics [PCBS], 2022). In 2020, PCBS estimated 15% of public primary school-aged children (5–17) have disabilities: 17% in the West Bank and 13% in the Gaza Strip (PCBS, 2020).

The number of children with disabilities enrolled in government schools has grown in recent years. However, according to the Palestine Central Bureau for Statistics 46% of children with disabilities aged 6-17 were out of school as of 2017 (PCBS, 2020). Those who are enrolled face a higher risk of dropout due to limited staff capacity to accommodate their needs (PCBS, 2019). Additionally, UNICEF's country report on out-of-school children estimated that 32.5% of 6- to 9-year-old children with disabilities are out of school compared to 0.9% of their peers without disabilities. This report also highlighted significant gender inequalities caused by existing gender norms – 36.6% of 10- to 15-year-old girls with disabilities are out of school compared to 26.3% of boys with disabilities in the same age group (UNICEF, 2018b).



## Development of the Inclusive Education for Palestinian Children with Disabilities project



*Inclusive Play day - Abu Tamam Elementary Girls school - 24.3.2021*

As part of the G7 Charlevoix Initiative, Global Affairs Canada and Humanity & Inclusion Canada developed the Inclusive Education for Palestinian Children with Disabilities project with the aim of improving learning outcomes for children with disabilities, particularly girls. The project had three pillars:

1. Supporting access to inclusive education for out-of-school girls and boys, including those with disabilities, by tackling barriers at the family and community levels.
2. Improving the protection of girls and boys, including those with disabilities, at the school and community levels by strengthening local partners' child protection and safeguarding mechanisms.
3. Developing education stakeholders' capacities to provide sustainable, quality, gender-responsive inclusive education; this pillar also focused on increasing the abilities of parents, teachers, educational staff, and other key community members to recognize, respond to, and critically reflect on their own gender and disability biases.

In response to the COVID-19 pandemic, Humanity & Inclusion in West Bank and Gaza developed an emergency response plan that responded to the educational and protection needs of girls and boys with disabilities, their parents, and teachers. Priorities in the plan included providing educational materials and education support for children and parents in special schools and accessible e-learning platforms to allow children to continue learning.

### **Engagement at multiple levels improved education opportunities for girls with disabilities**

The project supported the enrollment of 168 children with disabilities (83 girls and 85 boys) into a range of educational opportunities and modalities, including formal and non-formal education and remote learning. In this case study, we highlight activities under the third pillar of the project. It worked with 19 education facilities, including three primary special schools, three kindergartens, and 13 mainstream primary schools (nine Ministry of Education and four UNRWA schools) to enhance access to safe, inclusive education.

## Transforming schools and teachers

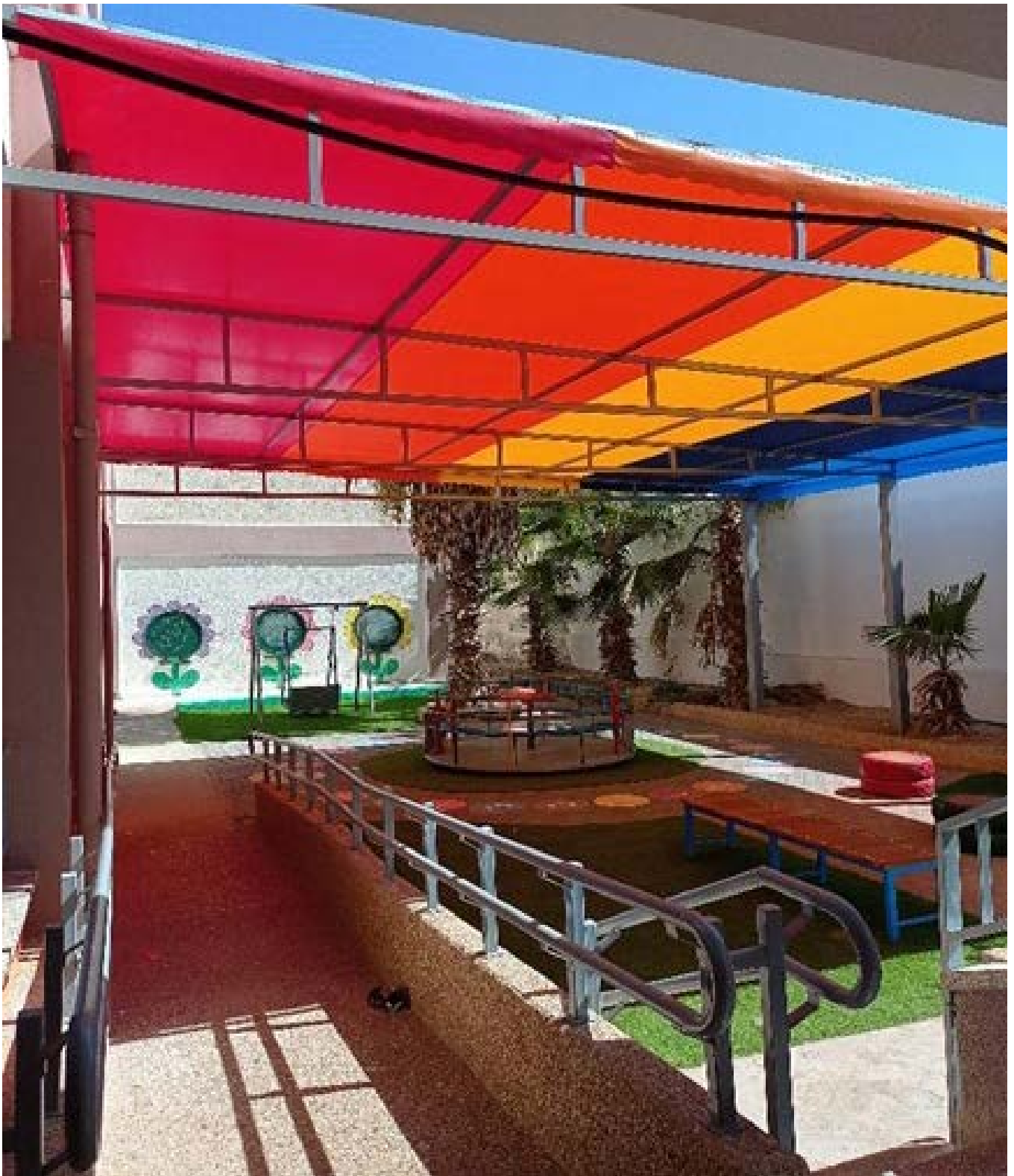


Teachers are working together to develop educational aid using low-cost materials, Gaza, Sharaf Al-Faqawi, HI, 2021

The teachers, school principals, and other staff of targeted schools received comprehensive training to develop an accessible and child-friendly environment: 80% of the 53 teachers in mainstream schools who were trained in Gaza and 89% of teachers in the West Bank indicated improved knowledge and skills on inclusive education and adapted learning strategies for children with disabilities. As a female teacher in a UN school noted:

*From my point of view, I see the resource room [is] made for multiple uses. It is not made for a certain group of children; it is for all the learners. I can even see it as a rest area for a child who may feel exhausted and needs rest (internal project monitoring data, 2021).*

The project also included accessibility interventions in the main facilities of the targeted schools following a school accessibility audit. This included inclusivity renovations to bathroom facilities, corridors, playgrounds, and libraries, as well as the installation of sign panels supported by written texts, sign language, and Braille for the main school facilities. Eleven child-friendly, age-, gender-, and disability-responsive playgrounds were developed in Ministry of Education and UNRWA schools.



School renovation, including inclusive playground, Rafah, Sharaf Al-Faqawi, HI, 2021

Resource rooms were renovated and equipped with interactive learning tools that created a more participatory and interactive education experience. The project promoted resource rooms as accessible to all students in order to decrease stigma, particularly to change parental attitudes toward their children's enrollment in these rooms. As Mrs. Ayida, a special education teacher, commented:

*In the past, I used to receive an objection from parents of children who were identified to attend classes in the resource room, but now things are different and parents are so satisfied with the renovated resource room. The intervention proved to parents that the school is paying a lot of efforts towards improving the education environment for their children" (internal project monitoring data, 2021).*

## Peer and parent role models



One of the awareness-raising sessions implemented at the community level, Wad Rahal village council, West Bank, Nicola Handal, HI, 2020

Throughout the life of the project, Humanity & Inclusion in West Bank and Gaza promoted social norms transformation around gender and disability. “Role model parents” (25 women and six men) were trained on how to conduct both home- and community-based awareness-raising sessions to promote children (including girls) with disabilities’ right to education in their communities. Monitoring of community members’ perceptions indicated that 96% of participants in Gaza and West Bank improved their knowledge and positive attitudes toward gender, disability, and children with disabilities’ right to education (Internal project monitoring data).

In the West Bank, the project used a peer-to-peer support approach to raise awareness. The empowered role model parents implemented 191 peer-to-peer awareness sessions. One peer-to-peer facilitator, 31-year-old Amma, described the impact of the sessions and their importance in challenging norms:

*My experience in leading a peer-to-peer session has been great, as this was the first time to stand in front of the other parents of children with disabilities and provide them with needed emotional support. It has really provided me with an opportunity to test my abilities and increase them (internal project monitoring data, 2022).*

## CASE STUDY 4. ENHANCING QUALITY AND INCLUSIVE EDUCATION (EQIE)



Inclusive Play Days - Gaza - EQIE - NORAD - 27.7.2021

Right To Play has been working in Gaza and the West Bank since 2003 to increase access to quality education and provide psychosocial support for children and youth ages 2 to 18.<sup>57</sup> Right To Play's Enhancing Quality and Inclusive Education (EQIE) project addresses the unmet and intersecting needs of children facing poverty, conflict, and other disruptions to their learning. Girls, particularly girls with disabilities, are disproportionately marginalized in this context. Funded by the Norwegian Agency for Development Cooperation, EQIE supports inclusive and gender-responsive play-based learning approaches to advance children's learning outcomes, life skills development, and holistic well-being at home and at school.<sup>58</sup>

### Project overview

EQIE is a five-year (2020–2024), multi-country project being delivered in Ethiopia, Mali, Mozambique, Tanzania, Lebanon, and oPt. The project integrates global best practices on disability-inclusive education, including a social model of disability. Right To Play's approach to play-based teaching and learning enables more safe, inclusive, and nurturing learning environments for all children regardless of their ability. By taking a whole-of-system approach – investing in the people, resources, structures, and settings – children with disabilities, as well as their developmentally typical peers, have already shown improved learning outcomes in EQIE-supported schools.

<sup>57</sup> Further information about Right To Play's play-based learning approach can be found at <https://righttoplay.ca/en-ca/our-work/>

<sup>58</sup> Further information about EQIE and Taha's experience can be found at <https://righttoplay.ca/en-ca/stories/free-to-be-himself-taha-story/>

## Project design

EQIE was designed to build the capacity of education staff, teachers, parents, and local organizations to give girls and children with disabilities more and better opportunities to learn and stay in school, achieving two key objectives:

1. Improved learning outcomes (including literacy, numeracy, and life skills) for boys and girls at the lower primary level (Grades 1–4) by improving the quality of learning opportunities both inside and outside school, using child-centered, play-based teaching and learning methodologies
2. Increased access and retention of out-of-school girls and children with disabilities by building the capacity of CSO partners to identify out-of-school children and develop follow-up and support systems together with schools and local communities

Right To Play has partnered with a number of local CSOs and OPDs, including the National Society for Rehabilitation (a well-established social work organization), to design and deliver individualized support for girls and children with disabilities. To ensure a thorough understanding of each child's specific circumstances and needs, as well as appropriate and high-quality case handling, the project developed a disability tracking tool. A hybrid case handling/data management tool, this tool captures numerous key voices, including children's own perspectives. By using this tool, children are central to capturing data about themselves and their own experiences.

CSO/DPO staff complete data entry, with input from School Inclusion Committees and quality control by Right To Play. The disability tracking tool includes guidance on how to ask questions in sensitive and child-centered ways and a referral service directory, which means that children and families can be referred to other specialized services for additional support and care. The data is used to develop individualized support plans for children, which National Society for Rehabilitation social workers are able to follow up on.



Inclusive Play Days - Gaza - EQIE - NORAD - 27.7.2021

## Engaging education authorities, schools, and communities to challenge norms and support enrollment

Implementing individualized support plans requires a holistic approach, including engagement with families, the community, school staff, education authorities, and children themselves. Education authorities in UNRWA and the Ministry of Education required reassurance about the use of assistive devices<sup>59</sup> provided by the project, as well as about the ongoing support mechanisms in place, before authorizing re-enrollment due to concerns about limited resources within the education system to ensure inclusion is successful.

EQIE worked with teachers and principals to develop individualized support plans and address principals' concerns about enrolling children with disabilities in their schools. Teachers were trained on play-based learning, inclusion, community engagement, and awareness-raising, including on using play-based approaches for the well-being of children with disabilities.

Children with disabilities and their families receive support from trained National Society for Rehabilitation social workers through frequent home visits, check-in calls, and school visits. This has enabled social workers to closely monitor the integration of children with disabilities by discussing their specific needs, supporting schools in adapting to those needs, and encouraging other students to treat children with disabilities in a fair and inclusive way.



Inclusive Play day - Abu Tamam Elementry Girls school- 24.3.2021

<sup>59</sup> This included medical aids (wheelchairs, crutches, diapers, glasses, hearing aids, medical shoes, and transportation). The Ministry of Education also asked Right To Play to recruit a specialist support teacher, which was achieved in 2021.

Working with communities has reduced the stigma surrounding children with disabilities and has built trust among parents and caregivers that girls with disabilities are safe in schools. Right To Play and the National Society for Rehabilitation have organized at least 15 community sensitization events each year. These “Play Days” have brought together children with disabilities and their parents with their peers to strengthen engagement and interaction in a way that challenges stigma and exclusion. Eman, a girl with disabilities attending a community sensitization event, said:

*“At the beginning of playing, I felt ashamed, and I did not know how to play, but gradually I found myself participating strongly”*

*—internal project monitoring data, 2021*

Eman’s mother noted:

*“I always take my daughter to stimulating games and she stays alone, but for the first time I see her integrated in this way, maybe because the teachers gave me a chance to play with her and help her”*

*—internal project monitoring data, 2021*

### **Impact on enrollment, retention, and learning**

The project is still underway, and early results from work in Palestine demonstrate that EQIE has supported extremely high retention rates of children with disabilities even compared to developmentally typical peers: 149 children with disabilities (76 girls, 73 boys) from a cohort of 152 passed the 2021/2022 academic year (internal project monitoring, 2021). Some of the children enrolled in 2020 as part of EQIE are now reaching the upper grades in school and face higher academic expectations from schools and teachers, requiring the development of new individual education plans for students and continued professional development for teachers to teach higher-level content using play-based and inclusive approaches. EQIE has also tackled stigma and fears of sexual harassment and abuse that made families hesitant to send their daughters to school.

After the project, children with disabilities will continue to be supported by CSOs and enjoy being part of a more inclusive community. Through collaboration and strengthening the skills of the network of CSOs supporting the project delivery, “Play Days” and inclusion activities will continue.



## CASE STUDY 5: “EDUCATION FOR CHANGE”: CSE FOR IN-SCHOOL AND OUT-OF-SCHOOL ADOLESCENTS IN MALI

CARE has worked in Mali since 1975, supporting formal and non-formal education to address barriers to girls' education and empowerment. CARE International began developing and implementing the Patsy Collins Trust Fund Initiative in Mali, Nepal, and Kenya in 2016 to address the lack of SRHR training and support provided to both in-school and out-of-school adolescents. The Mali project, known locally as Janndé Yirriverre (or “Education for Change”), worked with girls and boys aged 11 to 22, although the bulk of the learners were 13 to 17. The broad age range demonstrates the high numbers of over-age learners in lower secondary in conflict-affected Mali.

CARE International selected this age range rather than working with younger, primary school-age children (even though CARE knows the need for SRHR is equally high) due to parental acceptance. There is significant risk involved in teaching and providing SRHR support in conservative settings, where schools may be perceived as promoting inappropriate behavior and violating religious tenets. In Mali, teaching about positive sexual relationships at a young age is completely unacceptable and would put project staff at risk. While there is still resistance to teaching SRHR to adolescents, it is lower risk than teaching younger age groups, and the safety of teachers and program staff can be assured.

This project started working directly with 25,031 in-school and out-of-school adolescents (56% girls) through its friendship circles, as well as by working with the Ministry of Education to develop and integrate SRH modules into the school curriculum across 50 lower secondary schools in the Mopti region. These modules aligned with, but expanded on, the very basic SRH education being provided within the school.

### Developing friendship circles

Generally, adolescents attending school in conflict-affected Mali have very limited knowledge on their SRHR, and girls out of school lack access to even the basics. Thus, the project identified these girls as one of the most marginalized groups in need of support. To reach both in-school and out-of-school adolescents, the Education for Change program set up friendship circles (*amicales*) that brought together youth (mainly aged 13 to 17) in mixed groups to discuss and learn about SRHR issues. To support the learners, teachers from the schools were trained as mentors to facilitate and support discussions within the groups as well as to help guide the delivery of new content in single- or mixed-sex groups depending on the topic.

One of the project outcomes related to building these youth's leadership skills and capabilities, and the friendship circles were designed to have learners become part of the delivery process. They would lead in outreach programs to other out-of-school adolescents and would establish and run these friendship circles outside of the school environment, in the community. Through this outreach, youth were able to share what they were learning, advocate with the wider community on the issues they were learning about (such as GBV), strengthen their leadership skills, and increase the project's reach to those out-of-school.

Trained teachers served as mentors to equip and guide the learners within these friendship circles, which the project augmented with a mobile platform for each friendship circle (see Box A1).

## Box A1. Friendship circles on a mobile platform

In partnership with the mobile phone provider Orange, the 4,029 friendship circles all received a mobile phone linked to a platform that the project used to push information to the 25,000 adolescent group members in areas such as SRHR, suitable services providers in nearby locations, and GBV. This platform both increased awareness and enabled questions to be asked and responded to. In this way, the information provided and discussed in the friendship circles directly responded to participants' areas of interest or areas where clarifications were needed rather than pushing the same content and messages to all friendship circles every week. The benefit of these tailored friendship circles became evident through the groups' ongoing and increasing interactions on the platform, as well as through seeing these circles continue to meet in the community. These meetings continued even when schools were closed due to COVID, security issues, or teacher mentors being unavailable due to strikes. Participants in friendship circles also widely used the information provided to advocate with local authorities, peers, and parents on issues such as early marriage, harassment, and access to SRH services.

*"When I got involved in the [Education for Change] project, I had little knowledge of SRH because I was using traditional medicines as contraceptives, which caused awful effects on me. I was always in trouble with severe stomachaches. I took advantage of SRH information received from the amicale and teachers, to go to the health center, where a specialized woman doctor advised me to use a better contraceptive method, which saved me from infections and relieved the pains I felt before. Today, I am not facing issues anymore, and I am preventing an unwanted pregnancy."*

—Ramata, Bandiagara, aged 17

### Integrating a more comprehensive SRHR curriculum

Prior to the project, schools in Mali were providing basic SRH content looking at the anatomy of the body and the biology of the reproductive cycle. Missing were discussions around adolescents' ability to have a satisfying and safe sex life, their decisions and freedoms around reproduction, and how to maintain SRH through safe, effective, and affordable contraceptives. At the program's baseline, only 28% of the teachers said they were teaching curricular content on SRHR. An even lower proportion (17%) taught about GBV, while only 13% taught content on the right to negotiate sexual rights within a relationship. Education for Change co-developed modules with the Ministry of Education – in consultation with teachers, learners, and parents – to help empower adolescents to make their own choices, understand the risks of sexual activity, and also understand how to mitigate these risks in a consensual relationship. Specific support was also provided around access to services, identifying which services can help individuals in different situations and which services exist in this conflict-affected context (where referrals are often needed because of the sparse supply).

To support the curriculum's roll-out, CARE trained 451 teachers across 50 schools and supported them with ongoing coaching. At the start of the program, there was a real gap in CSE knowledge among all the teachers, as they had never been taught this content or trained on its delivery. There was also real reluctance on the part of teachers to deliver SRH-related content that wasn't "academic." CARE delivered training in stages to avoid information overload among teachers and followed up with coaching support. To reduce resistance to teaching SRH content, Education for Change worked with local education officials in delivering training and coaching, as well as included gender dialogues as part of the teacher training. In parallel, the program also conducted dialogues with community leaders and parents – particularly mothers – on SRHR and gender norms related to girls' knowledge and use of SRHR. The program worked simultaneously with school management committees, student mothers' associations, and savings groups (largely formed by mothers of learners and out-of-school adolescents/children) as platforms for sensitization and dialogue on the importance of SRHR content. To increase its relevance, legitimacy, and sustainability, the project worked with local women's networks to conduct community-level dialogues; this facilitated reflections on the parents' own experiences – particularly those of mothers.

## Box A2: Reaching out-of-school youth

Frequent teacher strikes and school closures due to security, COVID, and disasters affected students' exposure to content and the continued availability of information. Additionally, in-school content rarely reaches out-of-school adolescents, particularly those from severely marginalized households, where most children drop out before reaching lower secondary school. The existence of out-of-school spaces/platforms, such as friendship circles, fills an important gap. These enable broader access to information, ensure continuity of access to SRHR information and dialogues during crises, and most importantly, allow for adolescent-driven and adolescent-owned processes.

### Improved knowledge of, and access to, SRH services

Combined, the in-school and out-of-school interventions increased knowledge around SRHR. This led to changes in attitudes as well as behaviors, with the use of SRH services increasing among the targeted girls from 2% at baseline to 31% at endline. The project didn't extend to service provision, and in this heavily fragmented conflict area, services were often unavailable, of poor quality, or closed. Thus, this increase in service use is particularly substantial given services' quality and responsiveness did not always support confidence in access. The project also demonstrated a correlation between increasing leadership skills and capabilities, which are core to the friendship circle design, with this increased uptake in SRH services. This was assessed through a [Youth Leadership Index](#) score, which looks at adolescents' self-perception of leadership skills (namely voice, vision, organization, decision-making, and self-confidence).

Evaluations also identified changes in attitudes toward GBV, with the tolerance for wife-beating reducing from 57% to 49%.<sup>60</sup> While still high, this was a noticeable reduction over a five-year program in a context where wife-beating has been culturally acceptable. For boys, the decrease was even more notable: from 62% at baseline to 39% by the end of the project.

Overall, SRHR knowledge increased substantially, and adolescents strongly relied on this program as their main source of SRHR information: 18% said the friendship circles were their main source, while 31% reported school CSE was their main source. The mobile platform's use was notably high; among the participants involved in friendship circles, 75% had received messages, as did 49% of all adolescents assessed (in and out of school).

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<sup>60</sup> Girls agreeing that wife-beating was justified in certain circumstances

## CASE STUDY 6. “A SPACE FOR CHANGE”: DELIVERING SRHR IN ZAATARI YOUTH CENTER

UNFPA has integrated CSE into its humanitarian response by delivering informal CSE modules in youth centers and women and girls' safe spaces. One of the places where UNFPA, alongside national partner Questscope for Social Development, is delivering these modules is in the only youth center in Jordan's Zaatari Refugee Camp. Syrian refugees come to this center to engage in sports, arts, music, information and communication technologies, and language education, alongside receiving essential SRH and GBV awareness training with the inclusion of life skills. Over 1,500 youth benefit from this center every year and have been equipped through this life skills and SRH curricula to take control of their SRH and ownership of their own decision-making in this area.

As the only dedicated youth center in the camp, Zaatari Youth Center offers a lifeline for socially distanced and vulnerable young Syrian refugees aged 10 to 30. UNFPA has been supporting this center since 2015. With the exceptionally high rates of child marriage (53% in the camp), teenage pregnancy, and GBV within the camp, UNFPA realized the lack of any SRHR education was a contributing factor and set out to develop modules for provision. UNFPA also saw substantial misinformation being shared with adolescent girls in the camp around menstrual hygiene, leading to stigma around menstruation and girls being deprived of access to adequate, quality health services and products for menstrual hygiene management. The modules would respond to this lack of accurate information.

### Prioritizing cultural sensitivities

As in many of the Arab countries, Jordan does not yet have a CSE curriculum in schools, and very little SRHR education is provided in or out of schools in more informal settings. Thus, there is a huge knowledge – and provision – gap to fill. UNFPA has spent time exploring entry points to provide CSE within Jordan schools and has partnered with the Ministry of Education, but there is significant resistance; attitudes that CSE is unnecessary and fears that it encourages youth to have sex early remain very prevalent. This misinformation needs to be addressed, alongside providing evidence on how sexual and reproductive knowledge can benefit health, safety, and well-being. The 2023 launch of a CSE national committee in Jordan is one of the first steps to enabling CSE to be piloted in public schools. However, progress is slow, and the lack of knowledge among Jordanian youth, as well as Syrian refugees, remains high.

In Jordan, CSE is culturally unacceptable, so introducing these modules to youth educators had to occur very carefully in language that could secure community acceptance. The toolkit developed to support this SRH education was called “I Change,” and the content is discussed in terms of SRH, with a focus on the health aspects or preventing GBV instead of using the term “comprehensive sexuality education.” The main resistance in the camps is from parents of unmarried youth, who do not understand why CSE should be provided to unmarried youth, as sex outside marriage is not acknowledged, and to date, abstinence has been widely preached by families and communities. In addition to adapting the language to address the high levels of misinformation and misunderstanding, UNFPA and partners have been working with parents around their understanding. Syrian outreach volunteers and trained youth educators have delivered awareness-raising sessions for parents, highlighting the need for this education in order to:

- Address the high rates of child marriage
- Enable girls to be in control of, and make decisions around, their reproductive health
- Address menstruation as a taboo topic
- Address high rates of GBV, impacting girls' safety within the camps
- Improve SRH outcomes to enable longer-term opportunities for education and engagement in the formal economy

This community engagement has also been supported through UNFPA's parallel work with the Ministry of Health within health community centers, conducting informative sessions for parents on the SRHR of young people and adolescents and encouraging them to have open dialogues about these changes with their children.

Compared to other places where UNFPA delivers SRHR, camps show an even greater need to build strong connections with the community because of the close relationships and family units found within the camps and the lack of privacy. UNHCR rules allow for one caravan per family, so family units continue to live together and youth go home to their families to discuss what they have been taught. To ensure their support, parents are invited to sessions at the youth center, and it is made very clear what topics and content will be discussed. Gradually, UNFPA started to see very positive feedback from parents. As the mother of one participant from Maan said:

*When I heard my daughter saying she is attending a peer education session on SRHR, I was hesitant and thought the session would open my daughter's eyes, and won't be in line with our values and principles. But when I started to listen to the session with her, it really hit me that no one ever spoke to me about reproductive health. The information was not available, and I learned from my personal experience. At the end of the session, I thanked the facilitator for the efforts in raising awareness in topics we really don't know much about, or we consider it as a taboo (interview with mother of project participant).*

### **Delivery of SRHR content through trained youth educators**

The course delivered within the Zataari Youth Center includes five modules, delivered over five sessions. While the course is not as comprehensive as would be possible within the school curriculum, it manages to include sessions on GBV prevention, life skills, and broader SRH topics (such as family planning, STI prevention, and puberty). Across content, UNFPA has kept the focus on gender equality and addressing gendered abuse and sexual relationships established through unequal power dynamics.

The toolkit for the course was designed specifically for youth – being interactive and using games and videos to share content – through a consultative and participatory approach. UNFPA ensured strong alignment with other content being delivered in the Arab region by collecting all the toolkits available to take the most relevant content and approaches for the adolescents in the camp. Through a number of focus group discussions with organizations working closely with young people, UNFPA better understood these young peoples' needs and developed this modified toolkit. While UNFPA recognized the importance of consulting youth in the design, it also acknowledged that consulting youth alone can be limiting; youth often don't have all the information around their own SRH, which could limit their ability to identify gaps and acknowledge where support is needed. Thus, UNFPA developed the toolkit in close collaboration with organizations working with youth on a day-to-day basis through the Zataari Youth Task Force chaired by UNFPA and the Norwegian Refugee Council.

These SRH sessions are delivered by trained youth educators, as UNFPA has learned that having these sessions delivered by youth, for youth, is far more productive. Youth open up to their peer educators and engage in more confident discussions as trust is built among peers. These youth educators receive trainings every year on the content, and UNFPA is currently working with partners to develop an accreditation course for the 20 current educators and Y-PEER members. These youth educators receive support from nurses who work at the UNFPA-run SRHR clinics to help them answer sensitive questions where content isn't covered in the toolkit.

UNFPA's goal was to train both male and female Syrian youth as youth educators. This was the approach for two years, but there were many occasions when these youth educators were not delivering the SRH information properly. This was understood to be happening because the close-knit community was making Syrian youth feel uncomfortable exploring more sensitive topics with their peers. In response, Jordanian youth were trained and lead as the educators, with greater success; Syrian youth are shadow-training so they can then take on the role of lead trainer with more confidence, higher levels of trust, and a stronger knowledge base in the future.

## Impact on SRHR knowledge and outcomes

Within the camp, many girls who were initially going to become engaged have changed their minds in response to their exposure to this SRHR content. Many have chosen to continue living with their parents in the camp rather than engaging in child marriage,<sup>61</sup> and UNFPA has noticed that higher numbers of youth are requesting referrals for SRH services, and more GBV cases have been reported for referral with the increased knowledge on GBV and referral and support services.

It is highly sensitive and difficult to get accurate information about changes in sexual behavior due to the community silence around sex outside of marriage. Yet youth have started to open up more in conversations and have demonstrated increased confidence to ask questions on more sensitive topics and engage in taboo conversations. This continues to demonstrate the impact these modules and discussions are having within the camp. With a question box put in place during the sessions, youth educators are receiving far more sensitive questions about topics that would not have been approached before this program. This question box has enabled youth to open up about challenges the LGBTQI+ community is facing as well as issues around porn addiction, virginity, and masturbation. According to internal project monitoring data (2022), youth beneficiaries said:

*I love myself more now, because I know how to express myself more, and I start saying no for things that bother me.*

*The thing I liked the most about the sessions is that I learned a lot about my body that I did not know, and I was ashamed to ask Mama about it and I was feeling weird. But now I know that I am not alone and this is normal and it happens to every girl.*

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<sup>61</sup> Child marriage has been found to be high based on adolescents' decision to get married in order to gain their own space away from their parents. There is one caravan per family unit in the camp, and children can only leave when they are married; this has been found to be a leading cause of child marriage in the camp.

# ANNEX 2: GENDER EQUALITY CALL TO ACTION

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## **The call to action on advancing gender equality and girls' and women's empowerment in and through education asks governments to (from Transforming Education Summit, 2022):**

1. Put gender equality at the heart of education sector plans, budgets and policies. Identify gender disparities and their underlying factors from the early years and beyond, and scale up budgets, strategies and commitments that eliminate harmful gender norms in pedagogy, build the institutional and human capacity of education sector staff, focus on the most marginalized, and support learning.
2. Invest in focused interventions that support marginalized girls' access to 12 years of safe and quality education as one of the most cost-effective and impactful social and economic investments possible. Engage boys and men in efforts to challenge gender inequality and gender structures, norms and stereotypes, and address boys' disengagement from education.
3. Ensure gender parity and non-discrimination at all levels and in all subjects, and in teaching, education and ministerial leadership positions. Support women teachers with fair and equal compensation, safe housing, transport and other resources needed to work, including in remote areas. Take targeted measures to break the glass ceiling in educational leadership and administration.
4. Identify and remove gender bias and stereotypes from curricula, teaching and learning materials, and ensure all teachers and learners acquire the knowledge and skills needed to examine, challenge and change harmful gender norms, attitudes and practices, unequal power relations, gender discrimination and wider intersecting inequalities. Pay particular attention to early learning materials, as evidence shows that gender stereotypes and norms are understood and rooted in children as young as two years of age.
5. Transform data systems, and expand innovative and non-traditional data collection, to better generate sex- and age-disaggregated data and understand the intersections between gender and other characteristics such as disability or ethnicity that compound and lead to marginalization, inequality and learning poverty, and use data to take targeted action to leave no one behind.
6. Systematically and meaningfully integrate children and young people in all of their diversity in consultations and decision-making aimed at advancing gender-transformative education, applying targeted measures to ensure the equitable participation of the poorest and most marginalized.<sup>7</sup>
7. Ensure safe, gender-transformative and inclusive learning spaces, with water, sanitation and menstrual hygiene management facilities, measures to prevent and respond to school-related gender-based violence, school meals, comprehensive sexuality education, and education and services for HIV prevention, care and support. Address immediate needs linked to COVID-19, learning poverty and global hunger, and establish mechanisms to address emergencies and protracted crises where vulnerabilities are most pronounced.
8. Support coordinated, cross-sectoral, intersectional and intergenerational collaboration across Ministries, civil society, grassroots youth organizations, teacher unions and other actors working on education, health, nutrition, HIV, gender, protection, youth, employment, economic, social and climate justice, and humanitarian responses to safeguard rights and promote equal educational and career pathways.

# ANNEX 3: WASHINGTON GROUP QUESTIONS

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The Washington Group's major objective is providing basic, necessary information on disability that is comparable globally. Recognizing that disability is a complex and dynamic process that presents considerable challenges for data collection, the Washington Group has developed multiple versions of its tools, which are designed to complement each other. Guidance is available to enable users to match the tool they use with the intended use of the data and data collection method.

## The Washington Group Short Set on Functioning (WG-SS) (Washington Group on Disability Statistics, 2022b)

<b>Vision</b>	[Do/Does] [you/he/she] have difficulty seeing, even if wearing glasses? Would you say ... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all
<b>Hearing</b>	[Do/Does] [you/he/she] have difficulty hearing, even if using hearing aids(s)? Would you say .... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all
<b>Mobility</b>	[Do/Does] [you/he/she] have difficulty walking or climbing steps? Would you say .... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all
<b>Cognition (remembering)</b>	[Do/does] [you/he/she] have difficulty remembering or concentrating? Would you say ... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all
<b>Self-Care</b>	[Do/does] [you/he/she] have difficulty with self-care, such as washing all over or dressing? Would you say .... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all
<b>Communication</b>	Using [your/his/her] usual language [do/does] [you/he/she] have difficulty communicating, for example understanding or being understood? Would you say ... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all



**Washington Group Short Set on Functioning – Enhanced (WG-SS Enhanced)**  
**(Washington Group on Disability Statistics, 2022c)**

<b>Vision</b>	[Do/Does] [you/he/she] have difficulty seeing, even if wearing glasses? Would you say ... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all 7. Refused 9. Don't know
<b>Hearing</b>	[Do/Does] [you/he/she] have difficulty hearing, even if using hearing aids(s)? Would you say ... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all 7. Refused 9. Don't know
<b>Mobility</b>	[Do/Does] [you/he/she] have difficulty walking or climbing steps? Would you say .... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all 7. Refused 9. Don't know
<b>Communication</b>	Using [your/his/her] usual language [do/does] [you/he/she] have difficulty communicating, for example understanding or being understood? Would you say 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all 7. Refused 9. Don't know
<b>Cognition (remembering)</b>	[Do/does] [you/he/she] have difficulty remembering or concentrating? Would you say ... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all 7. Refused 9. Don't know
<b>Self-Care</b>	[Do/does] [you/he/she] have difficulty with self-care, such as washing all over or dressing? Would you say .... 1. No difficulty 2. Some difficulty 3. A lot of difficulty 4. Cannot do at all 7. Refused 9. Don't know

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**Upper Body**

[Do/Does] [you/he/she] have difficulty raising a 2 liter bottle of water or soda from waist to eye level? Would you say ...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

[Do/Does] [you/he/she] have difficulty using [your/his/her] hands and fingers, such as picking up small objects, for example, a button, or pencil, or opening or closing containers or bottles? Would you say ...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

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**Affect  
(anxiety and  
depression)**

Interviewer: If the respondent asked whether they are to answer about their emotional states after taking mood-regulating medication, say: "Please answer according to whatever medication [you were/he was/she was] taking."

How often [do/does] [you/he/she] feel worried, nervous or anxious? Would you say ...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

Thinking about the last time [you/he/she] felt worried, nervous or anxious, how would [you/he/she] describe the level of these feelings? Would [you/he/she] say ...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

How often [do/does] [you/he/she] feel depressed? Would [you/he/she] say ...

1. Daily
2. Weekly
3. Monthly
4. A few times a year
5. Never
7. Refused
9. Don't know

Thinking about the last time [you/he/she] felt depressed, how depressed did [you/he/she] feel? Would you say ...

1. A little
  2. A lot
  3. Somewhere in between a little and a lot
  7. Refused
  9. Don't know
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## **The Washington Group Extended Set on Functioning (WG-ES)** **(Washington Group on Disability Statistics, 2022a)**

### **Vision**

**VIS\_1** [Do/Does] [you/he/she] wear glasses?

1. Yes
2. No
7. Refused
9. Don't know

**VIS\_2** [Do/Does] [you/he/she] have difficulty seeing, [If VIS\_1 = 1: even when wearing [your/his/her] glasses]? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

OPTIONAL Vision questions VIS\_3 and VIS\_4 are optional:

**VIS\_3** [Do/does] [you/he/she] have difficulty clearly seeing someone's face across a room [If VIS\_1 = 1: even when wearing [your/his/her] glasses]? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

**VIS\_4** [Do/does] [you/he/she] have difficulty clearly seeing the picture on a coin [If VIS\_1 = 1: even when wearing [your/his/her] glasses]? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

[Note: Countries may choose to replace "the picture of a coin" with an equivalent item.]

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**Hearing**

**HEAR\_1** [Do/Does] [you/he/she] use a hearing aid?

1. Yes
2. No
7. Refused
9. Don't know

**HEAR\_2** Do/Does [you/he/she] have difficulty hearing, [If HEAR\_1 = 1: even when using a hearing aid(s)]? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

**HEAR\_2** Do/Does [you/he/she] have difficulty hearing, [If HEAR\_1 = 1: even when using a hearing aid(s)]? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

*OPTIONAL Hearing question HEAR\_3 is optional:*

**HEAR\_3** How often [do/does] [you/he/she] use [your/his/her] hearing aid(s)? Would you say...

1. All of the time
2. Some of the time
3. Rarely
4. Never
7. Refused
9. Don't know

**HEAR\_4** [Do/does] [you/he/she] have difficulty hearing what is said in a conversation with one other person in a quiet room [If HEAR\_1 = 1: even when using [your/his/her] hearing aid(s)]? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

**HEAR\_5** [Do/does] [you/he/she] have difficulty hearing what is said in a conversation with one other person in a noisier room [If HEAR\_1 = 1: even when using [your/his/her] hearing aid(s)]? Would you say...

1. No difficulty
  2. Some difficulty
  3. A lot of difficulty
  4. Cannot do at all
  7. Refused
  9. Don't know
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**Mobility**

**MOB\_1** [Do/Does] [you/he/she] have difficulty walking or climbing steps? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

**MOB\_2** [Do/does] [you/he/she] use any equipment or receive help for getting around?

1. Yes
2. No (Skip to MOB\_4.)
7. Refused (Skip to MOB\_4.)
9. Don't know (Skip to MOB\_4.)

**MOB\_3** [Do/does] [you/he/she] use any of the following?

Interviewer: Read the following list and record all affirmative responses:

	1.Yes	2.No	7.Refused	8.Don't know
A Cane or walking stick?				
B Walker or Zimmer frame?				
C Crutches?				
D Wheelchair or scooter?				
E Artificial limb (leg/foot)?				
F Someone's assistance?				
G Other (please specify):				

**MOB\_4** [Do/Does] [you/he/she] have difficulty walking 100 meters on level ground, that would be about the length of one football field or one city block [If MOB\_2 = 1: without the use of [your/his/her] aid]? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all (Skip to MOB\_6.)
7. Refused
9. Don't know

**[Allow national equivalents for 100 metres]**

**MOB\_5** [Do/Does] [you/he/she] have difficulty walking half a km on level ground, that would be the length of five football fields or five city blocks [If MOB\_2 = 1: without the use of [your/his/her] aid]? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

**[NOTE: allow national equivalents for 500 metres]**

**MOB\_6** [Do/Does] [you/he/she] have difficulty walking up or down 12 steps? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

If MOB\_2 = 2, skip to next section.

If MOB\_3 = D "Wheelchair or scooter", skip to next section.

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**Mobility**

**MOB\_7** [Do/Does] [you/he/she] have difficulty walking 100 meters on level ground, that would be about the length of one football field or one city block, when using [your/his/her] aid? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all (Skip MOB\_8.)
7. Refused
9. Don't know

**MOB\_8** [Do/Does] [you/he/she] have difficulty walking half a km on level ground, that would be the length of five football fields or five city blocks, when using [your/his/her] aid? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

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**Communication**

**COM\_1** Using [your/his/her] usual language, [do/does] [you/he/she] have difficulty communicating, for example understanding or being understood? Would you say...

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. Refused
9. Don't know

**COM\_2** [Do/does] [you/he/she] use sign language?

1. Yes
  2. No
  7. Refused
  9. Don't know
-

<b>Cognition (Remembering)</b>	<p><b>COG_1</b> [Do/does] [you/he/she] have difficulty remembering or concentrating? Would you say...</p> <ol style="list-style-type: none"> <li>1. No difficulty</li> <li>2. Some difficulty</li> <li>3. A lot of difficulty</li> <li>4. Cannot do at all</li> <li>7. Refused</li> <li>9. Don't know</li> </ol> <p><b>COG_2</b> [Do/does] [you/he/she] have difficulty remembering, concentrating, or both? Would you say...</p> <ol style="list-style-type: none"> <li>1. Difficulty remembering only</li> <li>2. Difficulty concentrating only (Skip to next section.)</li> <li>3. Difficulty with both remembering and concentrating</li> <li>7. Refused</li> <li>9. Don't know</li> </ol> <p><b>COG_3</b> How often [do/does] [you/he/she] have difficulty remembering? Would you say...</p> <ol style="list-style-type: none"> <li>1. Sometimes</li> <li>2. Often</li> <li>3. All of the time</li> <li>7. Refused</li> <li>9. Don't know</li> </ol> <p><b>COG_4</b> [Do/does] [you/he/she] have difficulty remembering a few things, a lot of things, or almost everything? Would you say...</p> <ol style="list-style-type: none"> <li>1. A few things</li> <li>2. A lot of things</li> <li>3. Almost everything</li> <li>7. Refused</li> <li>9. Don't know</li> </ol>
<b>Self-Care</b>	<p><b>SC_SS</b> [Do/does] [you/he/she] have difficulty with self care, such as washing all over or dressing? Would you say...</p> <ol style="list-style-type: none"> <li>1. No difficulty</li> <li>2. Some difficulty</li> <li>3. A lot of difficulty</li> <li>4. Cannot do at all</li> <li>7. Refused</li> <li>9. Don't know</li> </ol>
<b>Upper Body</b>	<p><b>UB_1</b> [Do/Does] [you/he/she] have difficulty raising a 2 liter bottle of water or soda from waist to eye level? Would you say...</p> <ol style="list-style-type: none"> <li>1. No difficulty</li> <li>2. Some difficulty</li> <li>3. A lot of difficulty</li> <li>4. Cannot do at all</li> <li>7. Refused</li> <li>9. Don't know</li> </ol> <p><b>UB_2</b> [Do/Does] [you/he/she] have difficulty using [your/his/her] hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles? Would you say</p> <ol style="list-style-type: none"> <li>1. No difficulty</li> <li>2. Some difficulty</li> <li>3. A lot of difficulty</li> <li>4. Cannot do at all</li> <li>7. Refused</li> <li>9. Don't know</li> </ol>

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**Affect (Anxiety and Depression)**

Proxy respondents may be omitted from this section, at country's discretion.

*Interviewer: If respondent asks whether they are to answer about their emotional states after taking mood-regulating medications, say: "Please answer according to whatever medication [you were/he was/she was] taking."*

**ANX\_1** How often [do/does] [you/he/she] feel worried, nervous or anxious? Would you say... [Read response categories]

1. Daily
2. Weekly
3. Monthly
4. A few times a year
5. Never
7. Refused
9. Don't know

**ANX\_2** [Do/Does] [you/he/she] take medication for these feelings?

1. Yes
2. No (If "Never" to ANX\_1 and "No" to ANX\_2, skip to DEP\_1.)
7. Refused
9. Don't know

**ANX\_3** Thinking about the last time [you/he/she] felt worried, nervous or anxious, how would [you/he/she] describe the level of these feelings? Would [you/he/she] say...

1. A little
2. A lot
3. Somewhere in between a little and a lot
7. Refused
9. Don't know

**DEP\_1** How often [do/does] [you/he/she] feel depressed? Would [you/he/she] say...

1. Daily
2. Weekly
3. Monthly
4. A few times a year
5. Never
7. Refused
9. Don't know

**DEP\_2** [Do/Does] [you/he/she] take medication for depression?

1. Yes
2. No (If "Never" to DEP\_1 and "No" to DEP\_2, skip to next section.)
7. Refused
9. Don't know

**DEP\_3** Thinking about the last time [you/he/she] felt depressed, how depressed did [you/he/she] feel? Would you say...

1. A little
  2. A lot
  3. Somewhere in between a little and a lot
  7. Refused
  9. Don't know
-



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**Pain**

Proxy respondents may be omitted from this section, at country's discretion.

Interviewer: *If respondent asks whether they are to answer about their pain when taking their medications, say: "Please answer according to whatever medication [you were/he was/she was] taking."*

**PAIN\_1** In the past 3 months, how often did [you/he/she] have pain? Would you say...

1. Never (If "Never" to PAIN\_1, skip to next section.)
2. Some days
3. Most days
4. Every day
7. Refused
9. Don't know

**PAIN\_2** Thinking about the last time [you/he/she] had pain, how much pain did [you/he/she] have? Would you say...

1. A little
  2. A lot
  3. Somewhere in between a little and a lot
  7. Refused
  9. Don't know
- 

**Fatigue**

Proxy respondents may be omitted from this section, at country's discretion.

**TIRED\_1** In the past 3 months, how often did [you/he/she] feel very tired or exhausted? Would you say...

1. Never (If "Never" to TIRED\_1, skip to next section.)
2. Some days
3. Most days
4. Every day
7. Refused
9. Don't know

**TIRED\_2** Thinking about the last time [you/he/she] felt very tired or exhausted, how long did it last? Would you say...

1. Some of the day
2. Most of the day
3. All of the day
7. Refused
9. Don't know

**TIRED\_3** Thinking about the last time [you/he/she] felt this way, how would you describe the level of tiredness? Would you say...

1. A little
  2. A lot
  3. Somewhere in between a little and a lot
  7. Refused
  9. Don't know
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