

Sexuality Education in the WHO European Region

ESTONIA



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Status of sexuality education

Estonia was the first country of the former Soviet Union to officially introduce school-based sexuality education. Since then the sexuality-education programme has gradually been extended and implemented in all schools. It is comprehensive in character and mandatory in all schools. The Estonian programme is often presented as a model by international (UN) organisations like UNESCO and the WHO.





Laws and policies

In 1996, sexuality education was included, by law, as a subject in the new curriculum for primary schools. The curriculum has since been adapted twice, in 2002 and 2011. Currently, there are two national curricula: one for primary schools and one for upper secondary schools. The Ministry of Education and Research is officially responsible for the curriculum, but local authorities are responsible for the delivery of education.

Implementation of sexuality education

Sexuality education in primary school (nine grades; ages 7–16) is a part of the subject (programme) of personal, social and health education (PSHE, previously human studies). During the entire programme, almost all relevant issues concerning sexuality and health are dealt with in detail in an age-appropriate manner. Furthermore, there is a strong emphasis on attitudes and development of behavioural skills.

The National Curriculum for Upper Secondary Schools formulates the objectives as well as the compulsory or optional subjects that contain sexuality education for grades 10–12 (ages 16–19). Sexuality-education elements are also included in the subject of biology.

Sexuality education in Estonia was evaluated extensively, particularly as part of a UNESCO study (2011)¹ concerning its cost and cost-effectiveness. The evaluation showed that, in combination with the provision of youth-friendly sexual and reproductive health services throughout the country, the programme has had a sizeable impact on the improvement of young people's sexual and reproductive health.

Training of teachers on sexuality education

Approximately half of the teachers involved in teaching of sexuality education participated in postgraduate sexuality-education courses. During the period 2005–2010, there were many one-day courses, based on the sexuality-education teacher-training manual. The manual and short courses were initiated and financed by the National Institute for Health Development. In addition, there have been one-day courses on gender stereotypes as well as separate two-day courses for Russian-language teachers. Currently, there are also one-day courses on dating, violence and healthy relationships. In previous years, PSHE was included in the university training of teachers at the universities of Tartu and Tallinn.

The National Institute of Health Development, teacher organisations, the Estonian Sexual Health Association (ESHA, IPPF member association) and Tartu University have developed various guidelines and educational materials for teachers and learners². These educational materials reflect the comprehensive character of sexuality education and participatory learning approaches.

Sexuality education outside the formal school setting

The ESHA organises out-of-school activities through its network of youth-friendly clinics and its website. The Medical Students Association and the LGBT³ Association are also active in providing information on sexuality outside the school system, mainly through their respective websites and peer education programmes. The National Institute of Health Development and the ESHA periodically organise public awareness-raising campaigns. Underserved young people are also addressed via special projects.



Challenges

There is some resistance to sexuality education. Whilst most schools provide evidence-informed quality sexuality education, some religious schools refuse to provide comprehensive sexuality education and prefer the abstinence-only approach. Survey data indicate that Russian-speaking women received less sexuality education, and that Russian-speaking schools found sexuality education topics 'more difficult'.

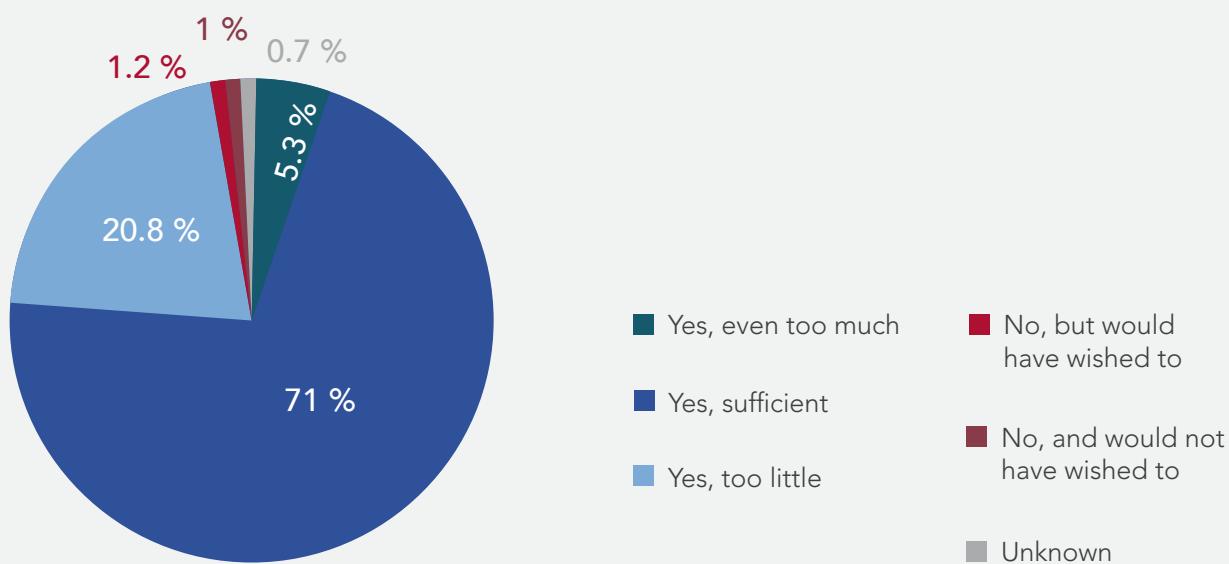
In 2014, it was found that almost all young people had been exposed to sexuality education in school.

Data

→ Sexually transmitted infections

In 2015, 1351 cases of chlamydia were registered in Estonia⁵, among them 824 cases among persons under 25 years.⁶ Of these cases, 493 were diagnosed in youth-friendly sexual and reproductive health clinics. There were also 121 registered cases of gonorrhoea⁵, including 64 cases among persons under 25 years.⁶

Assessment of exposure to sexuality education: young women^{*4}



* Percentage of young women aged 16–17 years exposed to school-based sexuality education and their opinion of it.

→ This survey also found that 50.6 % of 16 – 17-year-old girls and 79.3 % of 18 – 24-year-old women were sexually experienced: 16.5 % of the younger ones and 15.8 % of the older ones had not used any method of contraception.

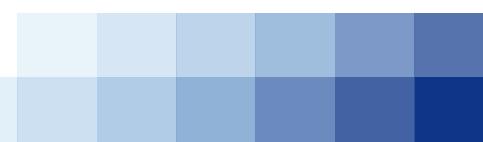


Country facts

Estonia

Total population ⁷	1 313 000
Population aged 15–19 years (% of 15–19-year-olds in total population) ⁷	60 000 (4.6 %)
Government expenditure on education (% of GDP) ⁸	4.7
Youth unemployment rate (% of labour force aged 15–24 years) ⁹	11.3
Gender Inequality Index rating ¹⁰	0.131
Births per 1 000 women aged 15–19 years ¹¹	12
% of 15-year-olds who have had sexual intercourse ¹²	boys: 20 % girls: 21 %
Average age of mother at birth of first child ¹³	26.5

For references go to last page



References / Definitions

- 1 Kivela J., Ketting E., Baltussen R.: School-based sexuality education programmes: A cost and cost-effectiveness analysis in six countries. Paris: UNESCO 2011. (Available at <http://unesdoc.unesco.org/images/0021/002116/211604e.pdf>, accessed 21 November 2017).
- 2 **Learner:** a child or young person who is enrolled or attends classes in school, including primary (basic/elementary), secondary (middle) and high school.
- 3 LGBT: lesbian, gay, bisexual and transgender.
- 4 Estonian Women's Health 2014. Lippus H, Lanpeere M, Part K et al. Tartu: 2015.
- 5 Nakkushaiguste esinemine, immunoprofilaktika ja järel-evalve tulemused Eestis 2015. Aastal [Infectious diseases, vaccination and follow-up in Estonia in 2015]. Terviseamet [Health Board]: 2015 (http://www.terviseamet.ee/fileadmin/dok/Nakkushaigused/statistika/2015/Epid_ylevaade_2015.pdf: p. 76 chlamydia cases and p. 74 gonorrhoea cases).
- 6 Data request (15 March 2017), Terviseamet [Health Board].
- 7 Population by age, sex and urban/rural residence, 2016 [online database]. New York: United Nations Statistics Division; 2017 (<http://data.un.org/Data.aspx?d=POP&f=tableCode%3A22>, accessed 25 March 2017).
- 8 Human development report 2016: human development for everyone. New York: United Nations Development Programme; 2016 (<http://hdr.undp.org/en/2016-report>, accessed 25 March 2017).
- Government expenditure on education:** current, capital and transfer spending on education, expressed as a percentage of GDP. Range in the region is approx. 2.0–8.5.
- 9 Human development data, 2015 [online database]. New York: United Nations Development Programme; 2017 (<http://hdr.undp.org/en/data#>, accessed 25 March 2017).
- Youth unemployment rate:** percentage of the labour force population aged 15–24 years that is not in paid employment or self-employed, but is available for work and has taken steps to seek paid employment or self-employment.
- 10 Human development report 2016: human development for everyone. New York: United Nations Development Programme; 2016 (<http://hdr.undp.org/en/2016-report>, accessed 25 March 2017).
- Gender Inequality Index:** a composite measure reflecting inequality in achievement between women and men in three dimensions: reproductive health, empowerment and the labour market. It varies between zero (when women and men fare equally) and one (when men or women fare poorly compared with the other in all dimensions).
- 11 Adolescent fertility rate (births per 1 000 women ages 15–19). Washington (DC): World Bank; 2016 (<http://data.worldbank.org/indicator/SP.ADO.TFRT>, accessed 25 March 2017).
- 12 Growing up unequal: gender and socioeconomic differences in young people's health and well-being. HBSC 2016 study report (2013/2014 survey). Copenhagen: WHO Regional Office for Europe; 2016 (<http://www.euro.who.int/en/publications/abstracts/growing-up-unequal.-hbsc-2016-study-20132014-survey>, accessed 25 March 2017).
- 13 Women in the EU gave birth to their first child at almost 29 years of age on average. Luxembourg: Eurostat; 2015 [2013 data] (<http://ec.europa.eu/eurostat/documents/2995521/6829228/3-13052015-CP-EN.pdf/7e9007fb-3ca9-445f-96eb-fd75d6792965>, accessed 25 March 2017).