



**LESOTHO COMMITMENT STATEMENT BY THE HONOURABLE MINISTER OF  
EDUCATION AND TRAINING, PROFESSOR NTOI RAPAPA DURING THE  
SUMMIT OF THE FUTURE**

**NEW YORK**

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***Adolescent sexual and reproductive health and rights:  
advancing the agenda for a sustainable future***

Excellencies

Heads of International Organisations

It is an honor and a great privilege to have been invited to represent the Education sector in this high-level Summit which aims to, among others, identify actionable commitments to accelerate progress in addressing adolescents' health and well-being issues, with special focus on their sexual and reproductive health and rights. The education sector plays a pivotal role in advancing all sustainable development goals and improving the global socio-economic landscape through quality, comprehensive, scientifically accurate and relevant learning. Indeed, education has the power to transform the lives of children and young people, and it starts with healthy, happy and safe learners. Evidence shows that children and young people who receive a good quality education are more likely to be healthy, and likewise those who are healthy are better able to learn.

**Excellencies,**

The data on adolescent's sexual and reproductive health and rights is clear. For instance, quite concerning that adolescent birth rate in Lesotho is 95 births per 1,000 girls aged 15-19 years. This rate is more than double the global average of 44. The proportion of teenagers who have begun childbearing rises rapidly with age, from 3% at age 15 to 40% at age 19 (rural teenagers and those in the lowest wealth quintile tend to start childbearing earlier than other teenagers). Also, that HIV prevalence among females is at 23.5% which is almost twice that of males at 13.4% inclusive of young people (*UNAIDS 2023, Lesotho*). These realities compel us to act with a united, multilateral, and multisectoral approach. We must ensure access to vital education and services, while tackling the structural, social, and cultural barriers that too often prevent adolescents from fully exercising their rights—especially their rights to education and to good health. These are not abstract challenges; they are real obstacles that demand our collective commitment and action. We have endorsed commitments, signed treaties, sat on the round tables to deliberate on issues and now, it is time to act. It is time for us to support adolescents and young people to be on the forefront and show us what they want, how they want it done and how we can offer them support and protection, when needed.

**Ladies and gentlemen,**

Adolescents today face unprecedented challenges. Early and unintended pregnancies are driven by multiple factors, including low levels of knowledge about contraception, gender-based violence – often perpetrated by those who should protect them – school related gender-based violence, poverty, poor access to health services, a lack of protection

structures, and young boys who drop out of school due to harmful cultural norms and practices. High indulgence in drugs and alcohol is yet another recently discovered challenge. These factors, alongside mental health struggles, severely undermine educational outcomes

The existing silos within and across government sectors exacerbate the situation. Weak referral systems between schools and health facilities prevent many adolescents from receiving critical health care. As a result, they are often left navigating fragmented systems, causing them to miss out on essential services that could significantly improve their health and well-being and their educational progress. This is a gap we must close, and we have the ability to do so.

### **Your excellencies,**

The good news is that we already know what works to improve adolescent health and well-being. One of the most significant milestones has been the institutionalization of comprehensive sexuality education, providing young people with essential information on sexual and reproductive health. Our gratitude goes to UNESCO's unwavering technical support. However, knowledge alone is not enough. If we create demand but fail to provide an enabling environment for accessing services, we not only jeopardize the future of our adolescents, but also hinder the potential for demographic dividends. Having policies and strategies in place to support the health, well-being, and protection of adolescents is a good starting point. Yet, the real challenge lies in effective implementation. Now is the time to ensure that these policies translate into tangible improvements in adolescent lives. It is also critical that we start early them at an early age by investing in foundational education for health and well-being at primary schools. Providing quality foundational education for health and well-being through a whole-school approach contributes to enhanced education outcomes, child protection and prevention of violence and abuse, improved health and well-being, fostering healthy interpersonal relationships, advancing gender equality, and promoting active civic engagement for sustainable development. In Lesotho, we are in the process of strengthening our primary school curriculum to better address the needs of the country, and we are deliberate about building strong foundations through foundational education for health and well-being.

### **Excellencies, Ladies and Gentlemen,**

There is urgent need to accelerate action on learners' well-being, to invest in our future generation now, to address the structural and cultural drivers of poor adolescent sexual and reproductive health and rights and those barriers towards full access to education and

health. There is pressing drive for us to strengthen partnerships and collaboration and deliver as one to see change, to advance SDGs and to yield positive dividends.

**It is my great honour at this point, on behalf of the Ministry of Education of the Kingdom of Lesotho to commit to:**

1. Strengthen access to and delivery of quality rights-based, scientifically accurate health education including Comprehensive Sexuality Education (CSE) from foundational phase through the school curriculum, teacher pre-service and accredited continuous professional teacher development, in collaboration with teacher training institutions.
2. Augment learner retention and improve school completion rates among adolescent girls by vigorously popularizing and implementing *Prevention and Management of Learner Pregnancy Policy (2024)*, to ensure that rights holders benefit from the policy and that re-enrolment strategies are safeguarded without prejudice.
3. Enhance and scale up learners' access to health services, particularly Sexual and Reproductive Health services by strengthening referral pathways between schools and health facilities. This includes setting up schools as outreach centers for provision of some health services as guided by the *National School Health and Nutrition Policy (2019)*.
4. Strengthen coordination of school health programmes within the Ministry including intersectoral collaboration for harmonization and improved school health management.
5. Expand prevention of school related gender-based violence and bullying through whole school approach and community engagement interventions, in liaison with line- ministries, particularly law enforcement agencies.
6. Invest in psychosocial support at school levels including through strengthened collaboration with social protection agencies.
7. Progressively increase domestic funding towards education for health and well-being while prioritizing development of school health accountability framework and school-based monitoring and supportive supervision for effective and quality delivery of health education and CSE.