

Authors

Alberto Chong
Georgia State University

Marco González Navarro
University of California, Berkeley

Dean Karlan
Northwestern University

Martín Valdivia
Grupo de Análisis para el Desarrollo (GRADE)

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Article



Do Information Technologies Improve Teenagers' Sexual Education? Evidence from a Randomized Evaluation in Colombia

Alberto Chong, Marco Gonzalez-Navarro, Dean Karlan, and Martín Valdivia

Abstract

This study reports results from a randomized evaluation of a mandatory six-month Internet-based sexual education course implemented across public junior high schools in 21 Colombian cities. Six months after finishing the course, the study finds a 0.4 standard deviation improvement in knowledge, a 0.2 standard deviation improvement in attitudes, and a 33 percent increase in the likelihood of reducing teachers for condoms as a result of taking the course. The data provide no evidence of spillovers to control classrooms within treatment schools. However, the analysis provides compelling evidence that treatment effects are enhanced when a larger share of a student's friends also takes the course. The low cost of the online course along with the effectiveness the study documents suggests this technology is a viable alternative for improving sexual education in middle-income countries.

JEL classification: O12, I2, I1

Keywords: information technologies, Internet, sex education, teenagers, field experiment, Colombia

1. Introduction

Providing effective sexual education to teenagers is a pervasive worldwide policy challenge. In many countries, conservative norms lead to restricted sexual education curricula. Deficient sexual education partially explains the high levels of sexually transmitted diseases and teenage pregnancies that are observed in many of the world's developing countries (WHO 2004). Making matters more consequential for youth, in poor countries there is an acute lack of resources, health system capabilities, and best practices to treat sexually transmitted diseases (Fortson 2009).

Alberto Chong (corresponding author) is a professor at Georgia State University (email: achong@gsu.edu) and Universidad del Pacifico (email: achong@up.edu). Marco González-Navarro is an assistant professor at University of California, Berkeley (email: marcon@berkeley.edu). Dean Karlan is a professor at Northwestern University (email: dkarlan@northwestern.edu), and Martín Valdivia is a senior researcher at Grupo de Análisis para el Desarrollo (GRADE)-Poné (email: jvaldiv@grade.org.co). This research would not have been possible without the sustained support of the Profamilia staff in charge of implementing and monitoring the intervention, especially German López and Lyda Díaz. The authors also recognize valuable research assistance from Angella García, César Mesa, Juan Pablo Ocampo, Martín Sánchez, and project leadership by Inés Arango Soriano and Rachel Vothan. All errors and omissions are ours. The authors thank the Inter-American Development Bank for funding. All opinions are those of the authors, and not of the participating organizations or donors. The authors retained full intellectual freedom to report the results throughout the study. The study received Institutional Review Board (IRB) approval from Innovations for Poverty Action (IPA) under protocol 117/09 June-03.

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This study reports results from a randomized evaluation of a mandatory six-month internet-based sexual education course implemented across public junior high schools in 21

Colombian cities. Six months after finishing the course, the study finds a 0.4 standard deviation improvement in knowledge, a 0.2 standard deviation improvement in attitudes, and a 55 percent increase in the likelihood of redeeming vouchers for condoms as a result of taking the course. The data provide no evidence of spillovers to control classrooms within treatment schools. However, the analysis provides compelling evidence that treatment effects are enhanced when a larger share of a student's friends also takes the course. The low cost of the online course along with the effectiveness the study documents suggests this technology is a viable alternative for improving sexual education in middle-income countries.

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