Improving the Sexual and Reproductive Health and Rights of Young Adolescents

The Young Adolescents Project (YAP) in Uganda
“I can stand with confidence amidst groups of people, share my views, and make consultations without any fear. I wasn’t able to do that before the Young Adolescents Project started its activities in my school.”

Peter Wasswa is a young adolescent at St. Joseph’s Primary School Nabbingo. He is 14 years old and currently in primary seven. He has been with the youth club since 2009 serving as a peer educator and currently as a club leader.
**Background**

“It takes a whole village to raise a child”, is from an old African proverb meaning that child upbringing is a communal responsibility. The period of early adolescence, between the ages of ten and 14, marks a critical time of development for young people. It is a period of dramatic physical, hormonal, cognitive, and social change, which culminates in the formation of one’s own identity. Young adolescents acquire information, develop attitudes, and experiment with behaviours that will affect their present and future life. This age group presents a narrow window of opportunity for interventions that focus on developing positive gender attitudes, strong self-esteem, decision-making and communication skills, as well as fostering respect for others.

During adolescence it is a particular challenge to provide young adolescents with comprehensive sexual and reproductive health and rights (SRHR) information in culturally, socially, and politically acceptable ways. Perceptions among adult gatekeepers (parents, teachers, community and religious leaders, politicians, local and central governments, etc.) about the type of information and skills which are age-appropriate and necessary for young people aged ten to 14 years often vary greatly; it is a common belief that boys and girls under the age of 15 are “too young” to need SRHR information and services. Therefore, programmes that reach out to young adolescents must also address and, if necessary, transform the social and physical environment in order to be successful. Without a conducive environment and with minimal support from their social surroundings, young adolescents will not be able to utilise the knowledge and skills acquired from an SRHR programme. Placed within the Ugandan context, where 48 per cent of the country population is younger than 15 years of age ¹, it is crucial that they receive comprehensive sexuality education, as well as attention and support from adults to allow them to develop positive attitudes and behaviours related to sexuality and reproductive health.

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“I and so many parents in my community used to send their children to their relatives so that they could be talked to on issues of growing up, sex and sexuality. But with the sexuality education we received from the project, we learnt to appreciate the benefit of making our children our friends by talking and sharing with them about sexuality. This has also helped to reduce cases of children being sexually abused by relatives.”

Mr. Luswata Deogratias is a parent of three boys and two girls. He is a farmer and lives in Nabbo village.
The Young Adolescents Project in Uganda

Between 2009 and 2012, DSW in partnership with Bayer HealthCare Pharmaceuticals implemented the “Young Adolescents Project” (YAP). The aim of the project was to remove barriers faced by young adolescents in accessing age appropriate SRHR information and services. Another crucial aspect of the project was to create a social environment which enabled effective communication between young adolescents and key adults, particularly parents and teachers.

The project focused on four key objectives:

**Increasing SRHR knowledge among young adolescents in primary schools**  
DSW established in-school youth clubs in ten primary schools across three districts (Masindi, Tororo, and Wakiso) and supported them with training in club management skills, SRHR topics, and peer education. A comprehensive set of training and information materials for SRHR education has been developed.

**Ensuring the support of parents, teachers and community leaders for young adolescents’ SRHR**  
The project benefited from close engagement with school administrations, and the district education and health departments. Parenting workshops strengthened interaction between parents and young adolescents. Additionally, teachers were guided on providing youth-friendly SRHR education and supported with passing on their knowledge to other teachers.

**Creating a supportive environment where young adolescents have access to correct information and services**  
Health workers were trained to become trustworthy contacts and provide effective treatment to young adolescents. In addition to establishing youth-friendly corners in their health centres, health workers also provided health services in schools.

**Sharing project results and recommendations**  
Great emphasis was placed on documenting project successes and lessons learned. A toolkit, which summarises its approaches and experiences, has been developed to encourage and assist others in implementing similar projects.²

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² How to Reach Young Adolescents. A toolkit for educating 10–14 year olds on sexual and reproductive health: www.dsw-online.org/yap-toolkit.
“I am happy that pupils no longer fear us, are able to consult us at any time in case of a problem, and that cases of teachers harassing pupils and pupils harassing teachers no longer happen. Pupils have been empowered with life skills to protect themselves from risky situations and behaviours. The component of peer to peer education is wonderful as children always believe in their fellow peers.”

Mr. Vincent Kagimu is a teacher at St. Joseph’s Primary School Nabbingo where he has worked for over ten years. He is the Director of Studies at the school.
With outstanding successes achieved, the project has exceeded expectations and gained wide acceptance among local district authorities and other key stakeholders. Young adolescents’ knowledge of SRHR, HIV & AIDS, children’s rights and responsibilities have improved significantly during the project period. However, one of the most significant outcomes from the YAP was the reported improvement in communication between parents and their children, and between pupils and teachers. This is likely to lead to lasting sustainable change, not just in the homes, but in the community. Activities targeting parents have also made them more aware of the factors in homes, schools and within the community that make young adolescents susceptible to SRHR problems. Those that have been reached by the YAP are now committed to addressing these issues.

All schools involved the pupils, teachers, parents, and head teachers in addressing the issue of sexual harassment of pupils and identifying solutions. Furthermore, dropout rates, especially among girls, decreased over the life of the project. This positive development is mainly attributed to the continuous support by parents and the community for providing adequate basic needs for young adolescents, such as providing sanitary pads to female pupils. Recognising this good practice, district officials are now committed to continuing project activities in their districts and also replicating it in other communities.

The project also led to the empowerment of stakeholders with the skills and knowledge needed to continue the project once it was phased out at the end of 2012.
“Before the project, many girls did not perform well in class, and would not attend classes when in their menstrual period. But with the project introduction of giving sanitary pads, the construction of the girls changing room and training of peer educators, girls no longer absent themselves, perform even better than boys and they have registered no school drop out.”

Susan Babiiha is the head teacher for Walyoba primary school. The school has over 400 young adolescents and only 15 teachers.
Notable project successes include:

- The YAP has reached more than 7,100 pupils and 1,900 parents.
- In 2011, more than 90 per cent of young adolescents had comprehensive knowledge of HIV & AIDS – compared to less than 25 per cent at the beginning of the project.
- Seven schools reported a significant decrease in the female dropout rate. While in 2008 a total of 118 female pupils had dropped out of the respective schools, only 29 female drop-outs were documented in 2011.
- The role of teachers in creating awareness and passing on knowledge about HIV & AIDS has increased. In 2011, more than 90 per cent of the pupils named teachers in the classroom as one of their information sources.
- Communication on SRHR and relevant topics among parents and their children has been improved. In 2011, more than 72 per cent of pupils had heard about HIV & AIDS from their parents.
- Teachers confirmed that their SRHR knowledge and skills has increased significantly, and that their roles and responsibilities towards young adolescents have also been strengthened. By the end of the school third term in 2012, 137 teachers had integrated SRHR in class lessons.
- By 2012, 17 health workers were trained in the provision of youth-friendly health services and encouraged to establish youth-friendly corners in their health centres.
- 120 parent counsellors were trained in 2012 in order to strengthen linkages between target groups and to improve parent-to-child-dialogue.
- In 2012, all schools developed sustainability plans, which are going to be implemented as of January 2013.
- District officials in the project regions expressed their will to integrate some of the recommended activities into the district development plans 2013.

The integrated and multi-layered project approach that DSW has developed in cooperation with Bayer HealthCare Pharmaceuticals has proven to be very successful. The key objective relating to the improvement of the sexual and reproductive health of young adolescents in Uganda has been achieved, and sustainable structures have been built that involve different levels of stakeholders.
“The schools have registered reduced school dropout rates, and a reduction in teenage pregnancies, early marriages, and many other forms of sexual harassment compared to the schools where the project has not reached. Parents have a positive attitude towards their children’s education and are now responding to their duties and responsibilities. Teachers have been equipped with friendly methods of passing on information to adolescents through the trainings conducted during the project.”

Mr. Aroda J. Robinson is the Tororo District Inspector of Schools. As the head of the District Inspectorate, he works with four other inspectors. The District has over 249 primary schools.
Developing a Sustainable Approach

The Young Adolescents Project was based on seven strategies that address the issue of sustainability at different levels:

- Taking into consideration the specific needs and vulnerability of young adolescents, it was not sufficient to address this age group alone as final beneficiaries but to holistically integrate the project into existing local structures through the inclusion of an extended target group. Primary school settings therefore offered the most appropriate starting point which also resulted in the integration of district officials, teachers, parents, guardians, and health workers.

- Key target groups were involved in all activities and planning steps of the project. Each played an active and participatory role in the design and implementation of activities at different levels.

- In order to respond appropriately, the project employed a flexible and needs-based approach. Project activities were adapted and modified according to the needs of the beneficiaries and the target groups throughout the entire implementation period.

- In order to put into practice the knowledge and skills received through comprehensive sex education, young people also needed the respective back-up and encouragement from those around them. Therefore the project also created a conducive social environment for young adolescents’ positive behaviour change. For example, through parent-to-child-communication workshops, parents and their children improved communication skills regarding sensitive topics, such as sexual and reproductive health.

- DSW put great emphasis on strengthening teachers’ skills, capacities and knowledge regarding sexual and reproductive health and youth-friendly education methods. Moreover, in order to ensure the continuity of knowledge and skills transfer beyond the project implementation period, teachers have been provided with Trainer of Trainers courses to pass on SRHR knowledge and skills to their colleagues and young adolescents.

- Peers are one of the most important sources for SRHR information and knowledge among young people. In comprehensive SRHR trainings, young people were empowered to become peer educators and agents of change. The creation of in-school youth clubs allowed for a confidential and open platform for young peer educators to share their knowledge with other peers.

- Last but not least, a crucial sustainability strategy was to document lessons learnt and to share good practices with various stakeholders throughout the entire project duration. This allowed project stakeholders to reflect upon the successes, challenges and respective solutions of the project’s implementation.

Based on these key strategies towards sustainability, the YAP has been well established in Uganda and is now owned by its key target groups. The proverb “It takes a whole village to raise a child”, has been given a new significance with the success of this project. The adoption of the YAP by all stakeholders proves that positive change is always possible.
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