Very Young Adolescent (VYA) Sexual and Reproductive Health Resource Library

**Toolkit Purpose.** This toolkit is for program managers, educators, health workers, advocates, researchers and policy makers committed to making a difference in the lives of very young adolescents (girls and boys between the ages of 10-14). The toolkit offers resources which address the unique developmental, cognitive, and social opportunities and challenges facing this age group. It provides links to examples of successful programs, research results, curricula, advocacy materials and other resources useful for working with VYAs.

**What is the challenge?** There are about 1.2 billion adolescents in the world today, and 50% of them (around 600 million) are between 10-14 years old. So far, this age group?sometimes referred to as very young adolescents (VYA)?has been overlooked in most sexual and reproductive health programs and policies, which are often directed at older adolescents. Also, little comprehensive data exists for VYAs. Yet, this group faces unique challenges: they are beginning puberty, seeking information, developing attitudes, and experimenting with behaviors that will affect their current and future well-being. This life stage lays the foundation for young people to establish healthy behaviors and relationships, and avoid coerced or unwanted sex, which can lead to early pregnancy, HIV, sexually transmitted infections, and intimate partner violence.

**This is when interventions are most needed.** Early adolescence marks the beginning of a transition from child to adult, setting the stage for future sexual and reproductive health and solidifying gender norms and attitudes. Interventions with VYAs can lay the foundations for lifelong healthy relationships, behaviors and practices. Although VYAs are beginning to form close relationships with their peers, they still need their family and community to establish boundaries, provide a sense of belonging, and support learning and skills development. But while caring adults seek to protect VYAs, many are ill-prepared to provide this support. VYA programs can equip adults with information on the issues girls and boys face during puberty, and provide the communication skills required to guide children safely through these transitional years.

**Solutions involve everyone.** Join with the VYA Alliance to support policies and programs that prioritize VYAs. This is an imperative step in our quest to achieve a healthy future for the world?s next generation.

**VYA ALLIANCE SNAPSHOT**
OUR PURPOSE

The VYA Alliance started as a consortium of members—Deutsche Stiftung Weltbevoelkerung (DSW), Institute for Reproductive Health at Georgetown University (IRH), Plan International USA, and Save the Children—who, since 2010, have been working together to catalyze action to meet the needs of very young adolescents (VYA) globally through their work and in a Community of Practice (CoP).

This K4Health VYA resource library was created by Save the Children and IRH on behalf of the VYA Alliance. As of 2015, the VYA Alliance has shifted over to the Very Young Adolescent Task Team under the 5-year, USAID-funded Passages Project. The Passages project is about transforming social norms for adolescent and youth sexual and reproductive health, with VYA as a key population.

OUR GOALS

- Raise awareness of the importance of investing in VYAs.
- Develop and test innovative programs.
- Make program practices, tools, and guidelines widely accessible.

OUR EXPERIENCE

**DSW (Deutsche Stiftung Weltbevoelkerung)** is an international development and advocacy organization. Our focus is on achieving universal access to sexual and reproductive health and rights (SRHR), which is fundamental to improving health and fighting poverty. DSW’s Youth-to-Youth Initiative and the Youth Adolescents Program guide communities to advocate for VYAs with governments and other stakeholders in Uganda, Tanzania, Kenya and Ethiopia. DSW, in close partnership with Bayer HealthCare Pharmaceuticals, implemented the Young Adolescents Project (YAP) between 2009 and 2012 in three districts in Uganda. The aim of the project was to remove social and structural barriers faced by VYAs in accessing age appropriate SRHR information and services. Currently YAP program 2013-2015 is running in the Coastal region of Kenya in Kilifi County.

**Georgetown University’s Institute for Reproductive Health (IRH)** has been committed to generating and applying evidence to programming and advocacy for VYAs since we developed the My Changing Body puberty curriculum in 2005. Research-to-practice initiatives include formative research, program development and impact evaluation, as well as national and regional technical consultations with a focus on fertility awareness, body literacy and gender. Current intervention studies include the Gender Roles, Equality and Transformation (GREAT) Project (Uganda), the CycleSmart menstrual management kit (Nepal, Burkina Faso), and GrowUp Smart and Twelve Plus (Rwanda). Research initiatives include a study with the Search Institute to assess whether developmental assets are significantly associated with SRH among VYAs, and ongoing technical input into the JHU/WHO Global Early Adolescent study.

**Plan International USA** is part of a global organization founded in 1937 that works with communities worldwide to end the cycle of poverty for children. Plan International's activities are centered on a Child-Centered Community Development (CCCD) approach, which is rights-
based, holistic, gender-sensitive, and inclusive. Plan's specific impact areas that affect VYAs include SRH/HIV, child protection, child participation, education, and gender and social inclusion. In 2012, the Centre for Development and Population Activities (CEDPA) became part of Plan International USA. CEDPA's Better Life Options and Opportunities Model using the Choose a Future! Curriculum has proven effective in building the internal and external assets that VYAs need to make a healthy transition to adulthood in Latin America, Asia and Africa.

**Save the Children** is a global leader in VYA health with programs in 10 countries. SC?is innovative tools and programs build a life-long foundation for gender equality and SRH in early adolescence in order to improve broader maternal and newborn health outcomes. SC?is VYA programs encompass gender and sexuality education, puberty education and menstrual hygiene management, parent engagement, and access to age- and life stage-responsive health services. Current projects include the VYA Gender Norms Package including Choices, Voices, and Promises (now scaling up in seven countries; helps VYAs form positive gender norms at individual, household, and community levels), and the Gender Roles, Equality and Transformations (GREAT) Project in Uganda. Save?is previous work with this age group includes Protecting Futures (puberty education for girls to improve school attendance) and the Malawi Girls? Education Project (promoted girls? education by ensuring protection, psychosocial support and female role models).

**General Resources**

Welcome!

The general resources section is a compilation of resources relating to adolescent sexual and reproductive health (ASRH); during times of crisis, the impacts of educating adolescents on reproductive health, the steps needed to create programs within communities resistant to teaching reproductive health, and what kind of information should be taught in reproductive health programs for VYA.
This section contains general resources separated by the following areas:

### General & Advocacy
- Program Implementation
- Research

### Nutritional Health
- Reaching Very Young Adolescents (VYAs): Advancing Program, Research and Evaluation Practices
- Nutrition in Adolescence: Issues and Challenges for the Health Sector
- Building Consensus to Address Very Young Adolescents? Sexual and Reproductive Health: A Guide to Planning and Hosting a Technical Consultation
- Fertility among children and adolescents from 10-14 years: tendencies and sociodemographic characterization of the children and the parents of these children. Part of the Birth Registry statistics (1990-2016)
- GREAT Flipbooks
- Status Report Adolescents and Young People in Sub-Saharan Africa
- Evaluation of Berhane Hewan A Pilot Program To Promote Education & Delay Marriage in Rural Ethiopia
- From research, to program design, to implementation: Programming for rural girls in Ethiopia
- Social Determinants of Sexual and Reproductive Health: Informing Future Research and Programme Implementation
- Examining the Association between Parental Smoking and Adolescent Age of Smoking Initiation in Africa

### Curriculum Development
- This paper was developed to help guide CARE?s leadership model for girls in Power Within. It provides a literature review on the unique needs of girls at puberty and the importance of leadership development.
- Younger girls are particularly vulnerable to being married to men who are significantly older or men who have multiple partners. Girls whose parents have a low status and lack of power, increasing the likelihood that she will experience violence and health risks, including HIV.

### Health Education
- Abstract: One of the factors that influences HIV risk behavior among early adolescents is their HIV/AIDS knowledge. The objectives of this study were to determine the extent to which early adolescent girls and boys knew about HIV and the HIV/AIDS epidemic. The results showed that girls and boys were more informed about the disease than boys, and that girls were more likely to believe that they were at risk for infection. The study also showed that girls were more likely to have been infected by age 15, and that they were more likely to have had multiple sexual partners than boys.

### Social Determinants
- Diet regulates blood pressure by influencing the autonomic activity as early as pre adolescent age group. Increased dietary intake of sodium and decreased intake of potassium may act as a predisposing factor for the future development of cardiovascular disorders.
- Curricular-based approaches use written, strategically designed and sequenced lesson plans featuring instruction, practice, and evaluation. This method provides an opportunity to advance much-needed programs working with this developmentally-pivotal yet often neglected age group.
- The relatively low HIV prevalence region of South Asia faces a dilemma - child poverty is endemic, populations are large and diverse, and resources are limited. Many children affected by HIV/AIDS are in need of care and support from their families.

### Advocacy
- Maternal mortality and morbidity represent persistent challenges in most countries, particularly in the developing world. This is especially true for girls and young women. This paper presents findings from a study of adolescent reproductive health care in Mexico.
- In boys and girls, respectively, prevalence (95% CI) was 30% (26-34)/21% (18-25) for smoking, 49% (45-54)/48% (43-52) for drinking, and 22% (19-25)/20% (17-23) for drug use. The expected frequencies of combination categories demonstrated clustering of these risk behaviors in students (P < 0.001).

### Prevention Strategies
- This section includes resources on anemia prevention for VYA, it is divided into three sections:
- The aim of this study was to evaluate the prevalence and risk factors of anemia among adolescents in Denizli where Mediterranean cuisine (fresh fruit and vegetables) is adopted.
- Between 2000 and 2004, FHI India supported the development of one of the few indigenously developed Life Skills Education programs in the country. The program was designed to empower girls and young women with the knowledge and skills they need to make informed decisions about their health and well-being.
- Recent findings show that the Oteka Radio Drama is a 50-episode story that is aired on local radio stations in the project area. It tells the story of two girls, one Muslim and one Catholic, who overcome the challenges of growing up in a Joint Family system where girls are often valued less than boys.
- A gender analysis was conducted to illuminate the key elements of friendships highlighted by early adolescent girls and boys. This analysis showed that boys were more likely to have friends who were the same sex and who shared similar interests, while girls were more likely to have friends who were the opposite sex and who shared similar interests.
- Tackling child marriage is a daunting but possible task, requiring political will and proactive multi-faceted strategies. This paper presents findings from a study of child marriage in India and discusses potential strategies for prevention.

### In-depth Study
- In the United States, most girls are unprepared for puberty and have largely negative experiences of this transition. This study examined the experiences of girls with different levels of biological maturity.

### Curricula Development
- This manual is designed to guide program managers and young leaders through the essential elements of sexual and reproductive health education. It includes lesson plans and activities that are designed to be self-directed and team-oriented.

### Conclusion
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### USAID Support
- In support of the USAID Dreams Initiative, this section provides resources for addressing the unique needs of girls and young women in the context of adolescence.