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’s 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’s 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’s 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:

1. Program Implementation
2. Abstract

This paper was developed to help guide CARE’s leadership model for girls in Power Within. It provides a literature review of the evidence base and a synthesis of key findings to inform and guide leadership development initiatives. It is designed for girls aged 10-14 and can be adapted for use with younger or older girls.

The challenges for young people making the transition to adulthood are greater today than ever before. Globalization, economic change, and political instability have all contributed to this trend. This toolkit offers guidance for organizations on how to support young people in making this transition.

Puberty Research: Twice weekly IFA supplementation is comparable to daily IFA in terms of beneficial effects on cognition in young adolescent girls.

Resources:
- A book created to teach girls ages 10-14 about puberty, and especially menstruation. Bilingual.
- Logic might have it, then, that a lot of effort in these arenas is being made to reach these adolescent girls, to help...programmes must be designed with them as the target audience. This toolkit will help you do that.

Tobacco smoking is a growing public health problem in the developing world. The health hazards of smoking are well known, and efforts to reduce smoking among young people are critical. This toolkit offers guidance on how to address this issue.

The global burden of diabetes and other non-communicable diseases is rising dramatically worldwide and is causing a profound health transition. Cancer prevention is not receiving the attention it deserves, especially in low- and middle-income countries undergoing socio-economic transition.

Conclusions:
- Diet regulates blood pressure by influencing the autonomic activity as early as pre-adolescent age group. Increased stress test in non-vegetarians may act as a predisposing factor for the future development of cardiovascular disorders.
- Although the programme was targeted at older adolescents, a small group of younger adolescents was reached during the pilot—showing potential for adaptation for younger adolescents.

Abstract:
- This guide outlines the problems experienced by menstruating schoolgirls in low-income countries. Although its focus is on menstrual hygiene management, the main message is that any efforts to provide education and materials to young girls are likely to be met with great interest and acceptance.

Part 3:
- Results:
  - A gender analysis was conducted to illuminate the key elements of friendships highlighted by early adolescent girls and...within each site. Gender norms influenced choice of friends as well as the type and place of shared activities.

Because of the high adolescent anemia rates, SHIP began a dynamic school-based program. The Adolescent Anemia Prevention Program has reached 100,000 adolescents in 5 governorates in Upper Egypt (Aswan, Beni Suef, Fayoum, Luxor, and Qena) participate.

15 years after its first democratic election, South Africa is in the midst of a profound health transition that is less expected in developing countries. This toolkit offers guidance on how to implement integrated care interventions for chronic infectious and non-communicable diseases.

Cancer-causing infections are a focus of the campaign as an estimated 20% of all cancers in developing countries and 6% in developed countries are caused by infections. This toolkit offers guidance on how to address this issue and prevent cancer.

Subjects:
- Discussions, in-depth interviews, and field notes from observations, researchers collected information from 48...in-depth interviews, and field notes from observations, researchers collected information from 48...