Building Consensus to Address Very Young Adolescents’ Sexual and Reproductive Health: A Guide to Planning and Hosting a Technical Consultation

March 2015

Developed by Save the Children of behalf of the Very Young Adolescent Alliance
Acknowledgements:

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Building Consensus to Address Very Young Adolescents’ Sexual and Reproductive Health: A Guide to Planning and Hosting a Technical Consultation

I. Overview: Building Consensus for a Focus on Very Young Adolescents’ Sexual and Reproductive Health

In the last five years there has been growing awareness that very young adolescents (VYAs) aged 10-14 are a neglected and hidden population in terms of sexual and reproductive health (SRH). VYAs are neglected because most adolescent programs focus on older adolescents and their needs and concerns, overlooking VYAs. They are forgotten because little sexual and reproductive health-oriented information is collected on VYAs within health and education programs and in evaluation and research activities; consequently little data exist upon which to guide policy and program development. Yet, in the space of a few years, younger adolescent girls and boys rapidly move through puberty, a profound bodily change that is accompanied by new social and gender role expectations from families and the larger community, at a time when gender roles and attitudes towards fertility and sexuality are beginning to form. An investment in programs is warranted for such a critical life phase that is very different than older adolescents. Consequently, we are beginning to see growing global and national interest and commitment to segment younger from older adolescents in policies, programs, and research and evaluation in order to build a stronger foundation for future SRH within gender-equitable contexts.¹

Over the last five years, VYA Alliance members have hosted seven technical consultations reaching national and global audiences. We have seen the value of building understanding and consensus so VYAs are not overlooked in SRH programming. We have found that while there are almost always small-scale, innovative programs and research occurring in any given country, people and organizations are usually working in isolation of each other. Such consultations bring together organizations and Ministries working on issues related to VYAs, provide a space for discussion, sharing of materials and experiences, and often lead to commitments to work collaboratively on VYA issues.

This document serves as a resource for designing and conducting VYA consultations, based on our experiences organizing such events. Many of the examples are drawn from national consultations held in Uganda and Nigeria in 2013, and regional/global consultations held in Senegal and Ethiopia. We hope that the ideas included in this guide will help you carry out the most strategic and effective consultation possible!

Who are Very Young Adolescents?

For readers with limited experience working with younger adolescents, it is important to be able to articulate what it is like to be 10-14 years old because early in the consultation development process you will need to help others understand why younger adolescents have distinctly different information, service, and social support needs than older adolescents. You and colleagues should take time to talk with younger adolescent girls and boys and adults in their lives to learn about their concerns and hopes. The information, below, will also help you to explain the importance of investing in VYAs and SRH.

UNICEF estimated in 2012 there were 1.2 billion adolescents aged 10-19 in the world, with about half of this group comprised of very young adolescents between the ages of 10-14. VYAs represent a unique sub-group of adolescents undergoing very rapid physical, cognitive and emotional changes that come just before and during puberty. This is the time when girls get their first periods and boys have their first nocturnal emissions, when bodies develop and emotions change frequently, when younger adolescents want to be more independent and begin to see their parents as not perfect. At this developmental stage, also, VYAs are forming gender and sexual identities within a social context that generally requires that VYAs accept new roles, including roles that very often disadvantage girls over boys. Within this social context, then, VYAs are acquiring information, developing attitudes and experimenting with behaviors and relationships that will affect their current and future health and well-being. And this lived knowledge, experience, and social context will lead to (or prevent) high-risk health situations such as early unintended pregnancies, STI infection, and gender-based violence, and inequitable relationships with future partners.

Because they are so young, VYAs still need protection. Parents and other adults in social institutions such as schools have important roles and responsibilities to guide the social development of VYAs and ensure protections from situations leading to adverse personal consequences such as pregnancy or not completing school. Adults can help by setting boundaries and expectations, for example, which support VYAs starting their journey to adulthood to develop and strengthen personal attributes such as commitment to learning, life planning, and having positive values and identity to achieve independence. In the area of SRH, though, while many adults believe they have a role to play, and VYAs want information and advice from trusted adults, most adults are ill-equipped to provide puberty and sexuality-related advice and information. Thus, VYA programs need to equip parents and others with information on puberty, sexuality, the role of gender norms in allowing girls and boys to reach their full potential, as well as communications skills, so these adults can support VYA girls and boys as they navigate rapid developmental and social changes.

Five Reasons to Hold a Consultation on Very Young Adolescent Health

Programmatically, Very Young Adolescents are a hidden population. The term Very Young Adolescent, or VYA, has come into use in recent years by health programmers to delineate the importance of examining the younger 10-14 year old segment of the broader group called adolescents, age 10-19 (WHO). This differentiation is important because programming for younger adolescents has generally been lumped together with 15-18 year olds. Since VYAs are effectively “hidden” within the data; we can learn nothing about their levels of participation or whether ASRH programs are addressing VYA concerns as a unique program sub-segment. The lack of age-disaggregated data has led to governments not giving special attention to younger adolescents through policies or programs. This issue is

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2 United Nations Children’s Fund (UNICEF), Progress for Children A report card on adolescents Number 10, April 2012
3 Igras et al, 2013
perpetuated through continuing low levels of awareness around the need for age and sex segmentation in services, programs and policies. So the challenge is to get decision-makers to consider a focus on VYA.

Programmatically, VYAs are underserved and often ignored, or expected to benefit from programs designed for older adolescents. While recent global conferences have shed light on the health needs of adolescents, the primary focus has been on the needs of adolescents aged 15 years and older; VYAs are rarely considered as a unique subgroup within Adolescent Sexual and Reproductive Health and Rights (ASRHR) programs. Programs are seldom intentionally designed to serve health and developmental needs of VYAs. Although some policies and programs have been shown to reduce risk to VYA in lower and middle income countries (e.g., access to contraceptives without parental consent and at low cost, life skills programs and family therapy)\(^5\), **we really do not know what constitutes effective programming** for VYAs in low and middle income countries, because nascent programs are seldom evaluated, and little to no research has been conducted that could test, validate or help define effective tools and approaches, with potential to be scaled up to achieve population-level impact. Project experiences, lessons learned and particular challenges of VYA-serving programs are generally not widely shared, and therefore, experience-based guidelines for addressing this subgroup do not exist either.\(^5\)

**Country health policies** – essential instruments that guide programming at scale - do not contain explicit provisions targeting the unique needs of VYA and *country government programs most often do not recognize VYAs as a separate group*. Therefore there is no formal coordination at the country or state level to build consensus among policy makers, programmers and academia to articulate the needs of VYA. Consequently, VYA are not highlighted as a priority; there is no budget line specifically for VYA or an agenda for addressing their needs.

Despite the above mentioned obstacles, **NGOs, other civil society groups and governments are doing some great, small scale programming for VYAs.** A small and growing group of organizations and individuals have understood the program gaps that do exist and are working to address them. Likewise, evidence is beginning to be built upon which to develop better program practices and policy responses. What we have learned signals that the investments and behavior change efforts we make with adolescent boys and girls can have far-reaching impacts in adult sexual and reproductive health behaviors.

**Having a consultation on VYA can lead to significant outcomes.** If done strategically, bringing critical stakeholders together to discuss the needs of VYA can begin a ripple effect of building commitment and action to address VYA gaps:

- Catalyzing national and global-level discourse and connections among key actors interested in VYA health and rights has helped reduce silos between education, child health, maternal, newborn and reproductive health, and protection groups.
- Prioritizing a set of interventions can lead national stakeholders to the development of a road map to guide programs and policies and subsequent resource allocation.
- Highlighting compelling evidence or lack of evidence around VYA and the extent of policy and program attention given to this age group has led some program managers to conduct internal evaluations of their adolescent sexual and reproductive health programs, including analyzing service data to understand the extent to which 10-14 year olds are or are not being served.

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\(^6\) Igras, *et al.*, 2013
Raising consciousness of the need to address VYA issues in order to create sustained changes in adolescent health outcomes has led some state and multi-national groups to raise awareness within their organizations to build support for larger, multi-sectorial programming change.

Highlighting national capacity and VYA program gaps have inspired state governments and partner NGOs to conduct capacity assessments upon which to guide new program development.

See the Nigeria consensus statement, below, an outcome of a national VYA consultation, to understand how such meetings can lead to defining a common set of goals across sectors.

**Position Statement**
*From the Nigeria VYA Consultation in 2013*

We need to act on three fronts. We need to broaden opportunities for VYA to develop skills and use them productively. We need to bring them into school, and keep them in school.

We need to help them acquire the capabilities to make good decisions in pursuing those opportunities. We need to create relationships between VYA and their parents.

We need to offer VYA second chances to recover from bad decisions, either by them or by others. We need to build abilities of family members, teachers and other adults, to identify, counsel and refer those with mental health difficulties. We need to provide health services that respond to their needs.

To do this we need a robust research agenda to better understand VYA subgroups, especially around abuse and violence, factors that hinder/help school enrollment and retention, and their access to health services. We will also review programs that serve them, and determine whether they benefit from the national Family Life and HIV Education program.
II. Steps for Conducting a Very Young Adolescent Consultation

Step 1: Determine the Added Value of Organizing a VYA Consultation

You may think that a VYA Consultation sounds like a great idea. But there is some key information you will need in order to confirm your analysis, and get support from your colleagues and partners in order to plan and implement the consultation.

What is the political environment for ASRH programming? Is there political space to focus on VYAs at this point in time? Conduct an informal scan of the environment. Talk with experts and ask their opinions on VYAs, programs and policies – to learn what policies and VYA-serving programs exist and begin to identify gaps and opportunities. Explore the politics and political environment that might influence whether there is support for VYA programming – positively and negatively. If these discussions lead you to believe now is a good time to raise awareness on VYA issues, then you might want to consider gathering additional data.

What policies already exist that benefit VYAs in the areas of health, education, child protection and youth programming? Where are the gaps? First, you will need to review national level policies in Ministries of Health, Education, Youth and other relevant entities to find out what their priority issues are and whether adolescents are specifically mentioned. Even if adolescent and youth policies exist, they may not specifically support the health and well-being of 10-14 year olds. You can obtain much of this information online and then follow up as needed through discussions with organizational representatives. Ask about specifics of each policy and about the degree to which it is being implemented.

Below is a summary analysis of the key policies addressing VYA needs and policy gaps in Nigeria. This program and policy scan was conducted to inform discussions at a national stakeholder meeting.

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<table>
<thead>
<tr>
<th>Name of Policy</th>
<th>Strengths</th>
<th>Gaps</th>
</tr>
</thead>
<tbody>
<tr>
<td>The National Youth Policy</td>
<td>• Provides the overarching framework for addressing young people’s need in Nigeria.                                                                                     • Governed by international agreements and instruments such as the African Youth Charter.</td>
<td>Does not consider VYAs as young people. The policy’s focus is on young people aged 15 – 35.</td>
</tr>
<tr>
<td>National Policy on the Health and Development of Adolescents &amp; Young People</td>
<td>• Covers young people aged 10-24.                                                                                       • Age categorization provides a policy framework for VYAs that are in and out of school.                                                                                                     • Broad in scope and not specific only to SRH.                                                                                     • Has clearly delineated institutional structures as well as their roles and responsibilities for designing programs on adolescent health and development.  • Has a strategic framework with clear strategies for targeting young people in general.</td>
<td>Does not recognize the challenges of programming for the VYA age category. This can easily lead to the assumption that adolescents are a homogenous group.</td>
</tr>
<tr>
<td>The National FLHE Curriculum</td>
<td>• Implemented within the formal education system                                                                                                                        • Provides a platform for reaching VYAs with information that are age appropriate. The content of the curriculum is clearly disaggregated for different age adolescent groups ranging from 10 – 14, 15-17 etc.</td>
<td>Major gap is that it can only be implemented within the formal school settings. The VYA who are out of school are not been catered for</td>
</tr>
<tr>
<td>The National School Health Policy</td>
<td>• School based and essentially health focused.</td>
<td>Can only be implemented within the formal school setting.</td>
</tr>
</tbody>
</table>

*(From: 2013 Inventory and Analysis of Programs and Policies Focusing on Health and Social Wellbeing of Very Young Adolescents in Nigeria.)*

What research and evaluation evidence exists that could guide VYA policy-revisions and programming?  
Second, conduct a search for data that currently exist on adolescents and very young adolescents in the country. Find out if there have been studies about VYAs and about adolescents (since research on adolescents may include 10-14 year olds in studies of 10-19 year olds), and if so, identify any significant findings or results. Remember that it is just as significant to learn that VYA are NOT included in studies as to learn that they ARE; their absence indicates a knowledge information gap.

Which organizations are already focusing on VYAs as a specific population with unique information and service needs? What kinds of programming are they doing? What is the geographic reach? Which organizations focus on a broader range of adolescents and/or youth? Note the extent to which they address VYAs. After you have completed your review of secondary data, reach out directly to organizations that are doing work with adolescents. Interview their staff to gather more information about the programs and services they provide to adolescents. If possible, speak with practitioners who have worked with VYA to get more information on their work.
and issues faced by VYAs. After you have an exhaustive list of known organizations, map your findings to see more clearly coverage and services for adolescents disaggregated by age group and sex.

If you are finding that information is not readily available, or if it is not possible for you to gather this data, consider hiring an expert consultant to conduct a more formalized, in-depth VYA program and policy scan. This would include not only gathering the information but analyzing it as well. This level of documentation could add a high level of credibility and value to the findings.

Whether you conduct the scan yourself or have a consultant do it, findings from the resulting document should catalyze discussion around gaps in programming and research/evaluation. In Nigeria, where the level of ASRH policy and programs is advanced relative to other countries in the region, and participants were a sophisticated and diverse group of adolescent development practitioners, the scan served to provide common ground from which participants could discern needs across sectors and develop strategies.

If you decide that you will hire a consultant to conduct a program and policy scan, you should develop a specific process to follow to ensure the scan is done properly. (In Annex 1 you will find the Terms of Reference for the Program and Policy Scan conducted to Nigeria in preparation for a national VYA consultation.)

**Step 2: Form a Multi-Organizational Planning Committee**

Once you have gathered sufficient information, you should have a good sense of VYA needs and program/policy gaps, and whether the data you gathered justifies your belief that a VYA Consultation would be warranted. A next step would be to create a Consultation Planning Committee of colleagues with similar interests in VYAs, who can help you strategize about what this consultation would achieve, and what it might look like.

Seek out colleagues who have a technical understanding of SRH issues with adolescents, so that you have strong technical leadership. Consider some of the people who provided you earlier data on VYA. Engage people who are connected with organizations who work with VYA. This will help you make sure you are inviting the right people. Consult with VYA Alliance member organizations that may have an office in country. They might have ideas of who should be on the committee.

Once you have established a small committee of four to six people who volunteer their time, set up a series of planning meetings with the goal of focusing and planning a VYA consultation. Be clear what tasks you will be asking members to perform and necessary time commitments. For example, the planning committee will establish the meeting goals

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**Step 1 Lesson Learned: Use a Snowball Approach for Gathering Information**

When information on a subject is not centralized, a good way to get comprehensive information is to use a “snowball approach” to data collection. Start with a list of resource people known to you to be working on VYA issues and programs. As you interview these resource people, ask your informants to give you additional names of people to interview and programs that exist. At some point programs and resource people will start reappearing, indicating you have sufficiently exhausted options for new information.

**Step 2 Lesson Learned: Member Selection Helps Ensure Credibility of the Planning Committee**

Be intentional as you select people to be on the planning committee. Look for people with credibility working on ASRH and/or VYA issues. Include knowledgeable representatives from different government ministries and civil society organizations, as well as older adolescents who can represent views of VYAs.
and objectives, reach out to key stakeholders to ensure their support, draft an agenda, and identify presenters and moderators. Finally ask for confirmation of their participation as a member of the planning committee.

**Step 3: Document your Intent for a VYA Consultation**

Based on what you learned about VYA in your context (in Step one), develop a **concept note** that articulates why it is important to establish a VYA agenda. Have your planning committee review it critically to anticipate concerns of key stakeholders who may be skeptical. Think about the tone you want to set. Words like “together” and “consensus” and “shared” make it clear that the consultation will be designed to promote working together to address identified issues.

**Illustrative Example of VYA Consultation Goal and Objectives Found in a Concept Note**

**Goal:** To establish a multi-sectorial VYA program and research roadmap in (country).

**Objective 1-Build a shared understanding of:**
- the importance of addressing very young adolescents in (country)
- the extent to which very young adolescents are being addressed in programs currently operating in (country)
- what needs to be done to build on this foundation – in terms of programs, research, and program evaluation.

**Objective 2-Identify a working mechanism to:**
- ensure that work in this area can move ahead,
- leverage the human and material resources available within and outside (country)

The concept note should include an **itemized budget**, which can help interested organizations know how they could contribute financially to the meeting. Although some costs will vary by context, the following are important key cost items to include:

- Conference room, including audio visual equipment and breaks
- Meeting supplies: participant materials, etc.
- Cost for note-taker
- Accommodation for out-of-town participants
- Reimbursements for participant travel and meals

After you finalize your concept note, share it with stakeholders and potential donors to gauge their motivation and buy-in for the VYA consultation.

**Step 3 Lesson Learned: Expect Budget Planning with Frequent Revisions**

Be prepared to do contingency budgeting.

Expect that you will need to revise your budget on a regular basis until all the details regarding number of participants, etc., are settled.

**Step 4: Develop an Agenda**
With your planning committee, think through what you envision for a one-day meeting. Even if your consultation is not planned for several months from now, having a draft agenda will be important from the start, so you know how to budget and who to invite. Remember that it can be revisited later but the initial draft should come earlier. (Agendas from VYA Consultations can be found in Annexes 3, 4, and 5.)

Developing your agenda is a creative process that the planning committee can think through, given the goals and objectives set out for the consultation. The agenda will need to be revised several times especially regarding who will be participating and whether the speakers you invite are available to present. Here are some key elements you might wish to consider in your consultation.

1. Set a credible tone early in the consultation by having a key note presentation by a well-known technical expert who can make the case for addressing the needs of VYA globally. This is the moment for statistics, images, and compelling stories to build awareness of VYAs and the importance of addressing this unique group, and the consequences of ignoring them. With passion and conviction, this speaker should provide a convincing rationale for a focus on 10-14 year olds in the country or regional context. The planning committee will have ideas who could best make this presentation.

2. A second presentation could focus on the specific needs of VYAs in the country or region, highlighting studies or evidence about what is already known to be effective in addressing barriers to programs, services, and what the gaps are. In Nigeria, for example, a consultant presented draft results of a program and policy scan. In Uganda, a high-level ministry official provided statistics on national policies as they relate to VYAs.

3. Make sure that VYA voices are present. As adults, it can be very difficult for us to remember what it was like to be a VYA, yet remembering this time in our lives is critically important if adults at such meetings are going to be discussing solutions to VYA issues. In past consultations, we have created spaces in meetings to include VYAs, e.g., having a panel discussion with invited VYAs with parents, youth club leaders, or other adults to talk about their lives or showing videos or photos with quotations of VYAs reflection on their lives.

4. Provide an opportunity for sharing experiences from existing VYA programs. In Uganda, short informative presentations were made by participants to share highlights of projects in country that serve VYA. In Nigeria, this was accomplished using a talk show format, with a facilitator asking questions of each guest regarding their NGO project or ministry activities, success and challenges. The talk show format kept the dialogue moving and entertaining.

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**Step 4 Lesson Learned: An innovative way to ensure VYA voice: “Walking in the Shoes of a VYA”**

A creative way to establish VYA awareness is through a simulation exercise, entitled “Walking in a VYA’s Shoes.” The VYA Alliance organized this simulation for the International Family Planning Conference in 2013. Participants were assigned the role of VYA who were then asked to walk around the room and “seek advice” from different resource people (Auntie, health provider, traditional leader, etc.) in order to get the information or services their character needs.

After completing the exercise, participants discussed how being in the simulation changed the way they viewed the complexity of VYA needs and pressures.
5. Allow for adequate discussion and sharing of experiences. Provide clear instructions for small **group work to discuss issues and possible VYA strategies** that should be addressed through research, advocacy and programming. Have groups report out key points of their discussion to the larger group.

6. In small group or in plenary, review of the list of issues and strategies that were developed to address a range of VYA issues and policy/program gaps, and **prioritize and refine the list**.

7. Optional activity: **practice advocating on VYA issues**. Transforming long explanations into easy- to-articulate sound bites is a key advocacy skill, particularly when advocating on an issue that is not yet well known to decision-makers. In Nigeria, small groups worked together to create their best ‘elevator speech,’ a short, convincing argument they would present if they suddenly found themselves in an elevator with 30 seconds to influence the Minister of Health with one clear message. Developed as a group competition, this was a lively activity that yielded a range of compelling ways to talk about VYAs; and the winning group received a prize.

8. Ensure the meeting concludes with well-defined ‘next steps’ that highlight the consensus built during the consultation. This is not a meeting report! Instead, it should take the form of an **agreement, declaration, proclamation or consensus statement** that articulates the group’s recognition of the issues of VYA and resolve to take action. It could be as simple as a commitment by participants to work together to address specific issues. Many ideas will have surfaced and these will need to be prioritized and organized into a coherent product. Midway through the meeting, review the discussion notes and ideas that were developed and determine whether the elements needed to develop the first draft of such a statement. If not, ensure that additional deliberations are inserted, if not already planned, in the latter part of the meeting. This is important because after the consultation, it will be too late to generate the groups’ ideas that would become part of meeting call-to-action statement.

9. A note about process: As seen above, we have found it important to **use a mix of methodologies**, rather than just traditional Power point sessions, to keep participants’ attention, not only for variety and ‘fun factor,’ but also because people engage and share their ideas in different ways and the intent is to engage as many as possible. Group work may feel unwieldy when you have very large groups, so be aware that facilitators may need to spend more time with each group to keep people focused on the task at hand. The idea of a quiz or talk show is effective in eliciting information in a light, relaxed manner.

10. **Take good meeting notes.** An experienced note taker who can capture all that was said and report in an organized format is important! Do not expect meeting facilitators to have time to do this task. This person should obtain everyone’s email addresses so necessary follow up can occur. This will make the meeting report easier to compile.

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**Step 5: Determine Participants and Presenters**

In this step, your planning committee will develop and refine the **list of participants**. Make an initial “wish list” of potential participants, making sure that you have included representatives from the relevant government ministries, academic institutions, and international and local NGOs who have expertise in working with or on behalf of VYAs in domains such as program planning and implementation, policy and advocacy, and research. Ensure participants have differentiated knowledge. Academic disciplines such as psychology, mental health, sociology, nutrition, and reproductive health including HIV/AIDS usually have a focus on younger adolescents. Ensure participant knowledge
of particularly vulnerable adolescents, such as children with disabilities, orphans and vulnerable children, lesbian, gay, bisexual, transgender and questioning (LGBTQ) adolescents. The planning committee will need to prioritize the list, e.g., discuss whose presence is most critical for decision-making and who might be important contributors to discussions. Then discuss and shorten the list, keeping your budget limits in mind as well.

Develop a clear and detailed invitation letter to participants. Include a brief rationale for a consultation on VYA and, if possible, reference key leaders in-country who support development of more VYA-focused work. Include the purpose, objectives, and expected outcomes of the meeting so participants know what they will be coming to discuss. Be sure to explain that this will not be a series of presentations, but rather a working meeting with clear outcomes. Also state what meeting organizers will provide participants (hotel, per diem, etc.). Finally, give a deadline by when to respond.

With a draft agenda in hand, the planning committee can determine speakers for each session. A back-up presenter is useful to list, in case the first one is unavailable. To help determine ideal presenters, think about what you want each presentation to bring to the consultation: what do you want people to learn, how do you want them to feel, and what do you want them to reflect on? Depending on local protocol, invitations could be made by a hosting Ministry, or organization co-hosting the consultation, etc. Oftentimes, planning committee members can informally approach a potential speaker prior to issuing a formal invitation.

When sending the invitation to each presenter, be specific about the points you would like them to cover and how much time is allotted for them on the agenda. Request presenters to send their presentations to meeting organizers prior to the meeting, so facilitators can make sure presentations are in-line with planned session objectives and to avoid duplication between presenters. This point is important to ensure quality and flow of the sessions.

Step 6: Divide and Conquer Complexities of Meeting Planning!

Meetings require a lot of up-front work in order to be seamlessly implemented on the actual day. Recognize when you will need logistics support, put it into your budget, and use it!

Large meetings require logistics that can be very intricate and demand detailed follow-up. For this reason, often two meeting teams operate in tandem – one focused on the program side, the other on logistics.
A timetable leading up to your VYA consultation will help the meeting delivery team manage the preparation process and ensure critical, logistical steps are not forgotten. First, select a date for the consultation and check with critical stakeholders whether the date is not in conflict with other planned events. Then work backward from that date, thinking through which tasks need to be accomplished by when. Make a list of the tasks from complex to simple. They are all important! It may be useful to put yourself in the position of a participant, thinking about what he/she will need in preparing for the meeting, what he/she will need within one week of the meeting and what materials and assistance they will require once they arrive at the meeting venue. Make a plan with specific tasks such as the following.

### Sample Timetable – Meeting Logistics

<table>
<thead>
<tr>
<th>Activity/Tasks</th>
<th>Team Member Responsible</th>
<th>By When</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In the three months prior to the meeting:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>✓ Develop Top 3 choices for consultation venue (contact hotels and halls, get price quotes) and present to team for final selection</td>
<td>Didier Drogba</td>
<td>May 10</td>
</tr>
<tr>
<td>✓ Revise meeting agenda</td>
<td>George Weah</td>
<td>May 30, June 15</td>
</tr>
<tr>
<td>✓ Finalize list of participants with estimated costs for travel</td>
<td>Roger Milla</td>
<td>June 15</td>
</tr>
<tr>
<td>✓ Get updates on prices for pens, paper, water, folders,</td>
<td>Abede Pele</td>
<td>June 20</td>
</tr>
<tr>
<td>✓ Host planning update meetings</td>
<td>Asamoah Gyan</td>
<td>July 1</td>
</tr>
<tr>
<td>✓ Reserve hotel rooms and conference room</td>
<td>Yaya Toure</td>
<td>July 1</td>
</tr>
<tr>
<td>✓ Finalize list potential speakers</td>
<td>Asamoah Gyan</td>
<td>July 1</td>
</tr>
<tr>
<td>✓ Write invitations to presenters</td>
<td>George Weah</td>
<td>July 1</td>
</tr>
<tr>
<td>✓ Write invitations to participants</td>
<td>George Weah</td>
<td>July 1</td>
</tr>
<tr>
<td><strong>Week before the Consultation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>✓ Contact presenters for their presentations</td>
<td>George Weah</td>
<td>July 10</td>
</tr>
<tr>
<td>✓ Print handouts</td>
<td>Alexandre Song</td>
<td>July 25</td>
</tr>
<tr>
<td>✓ Assemble participant packets</td>
<td>Yaya Toure</td>
<td>July 29</td>
</tr>
<tr>
<td><strong>CONSULTATION DAY!</strong></td>
<td></td>
<td>July 30</td>
</tr>
</tbody>
</table>

Add in as much detail as you need to and review with everyone on the logistics team to make sure all understand their responsibilities and deadlines.

**Step 7: Conduct Your Consultation!**

By this point, you have confirmed the people who will lead the meetings as facilitators. The day prior to the consultation, have one last meeting with facilitators to be clear on roles at different sessions and overall meeting responsibilities. Sharing roles is preferable to having one person moderating the entire meeting. Take a deep breath and get ready for the big day you have been preparing for!

**Step 7 Lesson Learned: Observe your Audience for Clues of VYA Champions**

Be attentive to the audience. Look for people who seem most engaged, as they may later play important roles as VYA champions who will move forward the VYA agenda. You will definitely want to follow up with these people (and others) soon after the meeting and seek their engagement and support.
During the meeting the facilitation team is responsible for timekeeping and following the agenda within established timeframes. By the end of the consultation, make sure that you have all presentations from presenters. At the end of the meeting, make sure to have a de-brief meeting with the other facilitators to review what went well and what went a bit differently than expected, and what you would do next time to improve such a meeting’s facilitation. At this point, divide up ‘next-steps’ tasks, beyond the meeting report.

A critical activity is to review and refine the draft consensus statement or other group position paper that was developed at the meeting (Step 8). Establish responsibilities for drafting and deadlines.

**Step 8: Share Key Findings and Begin Next Steps**

You will, of course, write a meeting report for meeting participants and donors. Equally or more important, though, is a separate document highlighting the major output of the meeting. Whether this consensus document is a declaration or position paper; the latter will serve as a potent dissemination and advocacy tool for use by those who have become engaged in moving forward a VYA agenda.

**What should go into a meeting report?** The consultation report is written for donors and meeting participants and serves to document how the meeting was conducted, who participated, what was discussed, and key meeting outcomes. It will also serve as a valuable record of experience as future VYA activities unfold. The consensus statement should be an attachment, even if still in draft form.

**Drafting and vetting the consensus paper.** Immediately after the consultation has ended, develop the draft consensus statement drawing from key issues that were agreed upon, as well as any specific prioritized activities. *(See box at right for the statement issued at the end of the global consultation in Dakar)*  Meet with your co-facilitators to review and refine the statement. Have it further reviewed by key people who attended the consultation. It is important to do this while important elements are still fresh in everyone’s minds. This statement will be shared widely post-conference as a stand-alone document.

**How will key findings be disseminated?** Your aim is for many stakeholder groups to “own” the findings and be motivated to share what they have learned. Findings will be disseminated through many different channels, depending on different audiences, and will take different forms. You may want talking points for sharing the “news” about this event to

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**‘Dakar Declaration’ Consensus Statement from the 2011 VYA Consultation at the International FP Conference**

The rapid physical, emotional and social changes experienced by very young adolescents (VYAs) shape their future sexual and reproductive health and social development. However, VYAs are rarely addressed as a special group with unique needs.

We believe that programs and policies need to invest in VYAs (10-14 year old girls and boys) to build their resilience, strengthen assets and protective factors, and equip them with knowledge, attitudes, and skills to navigate the challenges and opportunities in the transition from puberty to adulthood.

To achieve this vision, we will advocate for attention to VYAs, support policy development, conduct research, and build the evidence through implementation and evaluation of innovative programs that have scale up potential.
the public through radio interviews, TV or radio talk shows. Power point presentations to policy makers may need to be developed. Encourage different stakeholders, especially national experts, to take the lead in sharing the findings within their professional networks, e.g., universities, civil society groups. At the Nigeria consultation, the National Adolescent Technical Working Group offered to coordinate dissemination of the consensus statement and continue to build momentum on addressing VYA issues. This was an ideal scenario in Nigeria, as the Technical Working Group serves as a multi-disciplinary platform for ASRH activity coordination.

Next steps in building momentum for action post-meeting: Keep up the momentum started in this meeting by continuing your communication with national leaders, whether it is key ministry focal points or a working group on adolescents. If there is no coordinating body or set of people engaged in ASRH, consider establishing such an entity within an existing structure; it will be important to have a national group that can take the lead on implementing some of the ideas expressed in the meeting.

In Uganda, the post-meeting goal for DSW (who co-hosted the country’s first VYA consultation with Save the Children in 2014) is to map how organizations are targeting 10-14 year olds nation-wide. This information will inform Uganda’s ASRH Task Force, an existing structure that will house VYA-focused activities. Consider hosting a follow-on meeting about one year after the initial one; it could allow a check-in with meeting participants on progress that has been made individually and collectively.

Step 8 Lessons Learned: Effective Follow-up after VYA Consultations

- **Be clear on the individual-contextual balance in proposed follow-up actions.** To be forward-thinking, actions to meet needs of VYA should be balanced with actions to address national/regional social contexts and issues that influence VYA health, such as child marriage, children with HIV moving into adolescences. Too often, the reflex reaction is to focus on individuals only rather than also focusing on social and structural factors that affect VYA health outcomes. In finalizing the consensus statement post-consultation, take care to ensure balance in priority actions.

- **Be specific.** In their final report, Uganda listed four key areas for follow up with Ministry of Health and other ministries. The more specific the better. This also facilitates ease of follow up.

- **Continue the dialogue.** Keep participants updated through their preferred method (email, Facebook, webinars, etc.) periodically about VYA activities and new resources. In Nigeria, the six NGOs integrating VYA activities into ASRH programs are sharing accomplishments and challenges with each other on a quarterly basis. They are essentially creating a VYA Community of Practice.

- **Offer technical assistance.** Consultation follow-up may include supporting and encouraging forward movement of those engaged in VYA programming. External support is encouraging to those receiving it and can allow ideas from other organizations and countries to be shared, broadening the NGO experience.

Step 8 Lesson Learned: Develop Dissemination Products Quickly!

Develop short products that can easily be shared, such as a commitment statement, or a two-page brief of the meeting and its outcomes. Do this within one month of the meeting so the information is timely.

And don’t wait for final products to approach champions and engage them in advocacy!
<table>
<thead>
<tr>
<th>Step</th>
<th>Task</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td><strong>Determine the Added Value of Organizing a VYA Consultation</strong>&lt;br&gt;✓ Informally assess whether the political environment is supportive of a focus on VYAs.&lt;br&gt;✓ Conduct a program and policy scan – informally or with a consultant – to identify the extent to which policies and programs specifically address VYAs.&lt;br&gt;✓ Review studies in-country or in the region to understand the VYA knowledge base that exists.&lt;br&gt;✓ Map identified programs that address VYAs as a specific population.</td>
</tr>
<tr>
<td><strong>2</strong></td>
<td><strong>Form a Multi-organizational Planning Committee</strong>&lt;br&gt;✓ Identify a set of individuals that offer credibility and diversity of experience on VYA issues.&lt;br&gt;✓ Engage the planning committee in defining the consultation aims and focus.</td>
</tr>
<tr>
<td><strong>3</strong></td>
<td><strong>Document Your Intent for a VYA Consultation</strong>&lt;br&gt;✓ Develop a concept note outlining the rationale and proposed consultation, with budget.&lt;br&gt;✓ Share with ministries, organizations and donors to generate interest and obtain support.</td>
</tr>
<tr>
<td><strong>4</strong></td>
<td><strong>Develop an Agenda</strong>&lt;br&gt;✓ Draft an agenda that will be intellectually compelling to participants and engage them in a process of thinking through issues, strategic responses, and future commitments.&lt;br&gt;✓ In thinking through the meeting flow, ensure a mix of methodologies, representation of VYA voices, and opportunities for participants to learn and share their experiences.</td>
</tr>
<tr>
<td><strong>5</strong></td>
<td><strong>Determine Participants and Presenters</strong>&lt;br&gt;✓ Develop a participant list that ensures equity in representation along three domains: government, NGO/civil society, and university; international and multilateral organizations and donors; multi-sectorial expertise and perspectives beyond ASRH.&lt;br&gt;✓ Ensure appropriate adolescent participation.&lt;br&gt;✓ Develop a list of speakers and back-up speakers, selected according to agenda themes, and secure their acceptance to participate.</td>
</tr>
<tr>
<td><strong>6</strong></td>
<td><strong>Develop a Timetable of Activities</strong>&lt;br&gt;✓ Consider creating a Meeting Delivery Team comprised of logistical support and program experts, allowing division of meeting preparation tasks.&lt;br&gt;✓ Several months prior to the event, develop and regularly update a timetable of activities that guide meeting preparation in logistics and program domains.</td>
</tr>
<tr>
<td><strong>7</strong></td>
<td><strong>Conduct Your Consultation!</strong>&lt;br&gt;✓ Review presentations prior to the meeting day to ensure presentations are appropriate to their sessions and reduce duplication across presentations.&lt;br&gt;✓ Hold a final planning meeting with facilitators and logistics coordinators the day before the consultation to ensure smooth implementation on the day.&lt;br&gt;✓ Leave the consultation with clear ‘next steps’ on finalizing the consensus statement – who will be involved in drafting, getting feedback from all participants, and finalizing the statement.</td>
</tr>
<tr>
<td><strong>8</strong></td>
<td><strong>Share Key Findings and Begin Next Steps</strong>&lt;br&gt;✓ Develop a communications plan, defining to whom to reach out and materials to share to obtain support for ‘next steps’ in implementing a VYA agenda.&lt;br&gt;✓ Within one month of the consultation develop statements, briefs, etc., to facilitate VYA advocacy while there is meeting momentum.&lt;br&gt;✓ Find a ‘home base’ from which to implement a VYA agenda, e.g., within a ministry or technical working group.</td>
</tr>
</tbody>
</table>
Annex 1: Terms of Reference for a VYA Program and Policy Scan in Nigeria

Development of Program and Policy Scan for Nigeria VYA Consultation
(Excerpted from: Terms of Reference for Consultant for Georgetown University Institute for Reproductive Health, 2012)

Consultant Tasks

1. Review project documents, including the grant proposal, 2012 literature review of VYA research conducted in Nigeria, and presentations and program review reports by IRH and Save the Children to identify possible policy areas to explore and program-related issues to include in the scan.

2. Meet with IRH staff to be oriented to the details of the task at hand, discussing key documents already identified that can guide the consultant.

3. Develop information collection guidelines/parameters to use with a ‘snowball approach’ to information collection. (That is, as each new program and policy is identified, ask an informant what other policies might exist and who else needs to be contacted, until no new policies or programs are identified.)

4. Conduct a subset of interviews (phone or onsite) and collect descriptive policy and program information on innovative projects and programs identified through the scanning process.

5. Conduct an analysis of collected information and write a report that summarizes key policy and program findings, identifies gaps that exist, and proposes recommendations.

6. Possible: Present the findings at a stakeholder meeting to be held in July 2013 in Abuja (date to be determined).

Expected deliverables

- Final report due on 15 June 2013 on key policies and programs that are operating in Nigeria and identified gaps.
- Two to five page summary of the final report for sharing with external audiences
- Policy and program documents and interview notes that were collected, including an annotated listing of key documents.
- Presentation of key findings to share at the stakeholders’ meeting

Estimated time to complete the consultancy: 10 days, spread over six weeks
**Annex 2: Very Young Adolescents and Health – Technical Consultative Meeting**  
**Kampala, 30 October 2013**

**Objectives:**
1. Highlight best practices on Very Young Adolescent health to actors.
2. Build a shared understanding among programmers, policy makers and donors of:
   - The importance of addressing very young adolescents in Uganda
   - The extent to which very young adolescents are being addressed in programs currently operating in Uganda
   - What needs to be done to build on this – in terms of actions and in terms of research
   - Strengths, gaps and opportunities for VYA programming in Uganda
   - Get more actors onboard to understand the VYA as an underserved group and catalyze donors, policy makers and programs / implementers to do more.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session title and description</th>
<th>Proposed Presenter/Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00am</td>
<td>Participants arrive.</td>
<td></td>
</tr>
<tr>
<td>9:00am – 9:30am</td>
<td>Bringing house into order and General Introduction of participants.</td>
<td>Save the Children in Uganda, Keep it Real Manager</td>
</tr>
<tr>
<td>9:30am- 9:45am</td>
<td>Remark by Save Children Country Director</td>
<td>Save the Children Deputy Regional Director for the East African Region</td>
</tr>
<tr>
<td>9:30-9: 50am</td>
<td>Remark by Representative from the MOH &amp; Netherlands Embassy.</td>
<td>-</td>
</tr>
<tr>
<td>10:00-10:10am</td>
<td>Meeting objectives and expected outcome.</td>
<td>Save the Children in Uganda, Keep it Real Manager</td>
</tr>
<tr>
<td>10:10- 10:30am</td>
<td>Coffee Break</td>
<td></td>
</tr>
<tr>
<td>10:30- 11:00am</td>
<td><strong>Why Very Young Adolescent Girls and Boys?</strong> -- Background to the VYA Alliance + Global Findings on VYA.</td>
<td>DSW</td>
</tr>
</tbody>
</table>
| 11:00- 12:00pm | Experience Sharing on VYA Interventions in Uganda. (Best Practices, Lessons & Recommendations)   | IRH – GREAT project  
Naguru Teenage Centre,  
Department of Paediatrics/Adolescent Health Clinic, Mulago  
Straight Talk Foundation  
DSW                                               |
| 12:00 – 1:00pm | Scanning through the National Context in relation to ASRH & VYA                                  | MoH                                               |
| 1:00– 2:00pm  | **LUNCH BREAK**                                                                                  |                                                    |
| 2:00- 3:00pm  | **What could be done for VYA in Uganda?**  
Small groups divided by policy, program areas and service delivery  
What are strengths and gaps in Uganda in each area? What should be prioritized over the next five years? | USAID  
Save the Children in Uganda  
DSW  
3 Small groups facilitated by assigned group facilitators. (Gp1-Policy, Gp 2- Programs and GP 3-Service Delivery) |
| 3:00 – 4:30pm  | **Discussion key take-away points and next steps**  
What would be the key points in a consensus statement from this stakeholder meeting that would define key issues to tackle in moving forward the VYA Health agenda in Uganda?  
Developing a consensus statement and defining next steps | USAID  
Save the Children in Uganda  
DSW                                               |
| 4:30pm        | Meeting close, coffee and departure.                                                              |                                                    |
Annex 3: Agenda from the National VYA Consultation in Nigeria
Furthering Evidence-based Health and Social Wellbeing Programmes for Very Young Adolescents in Nigeria
Technical Consultation, 16 July 2013, Hawthorn Hotel, Abuja

Meeting objectives
1. Build a shared understanding of:
   - the importance of addressing very young adolescents in Nigeria
   - the extent to which very young adolescents are being addressed in programs currently operating in Nigeria
   - what needs to be done to build on this – in terms of actions and in terms of research
2. Identify a working mechanism to ensure that work in this area can move ahead, leveraging the human and material resources available within and outside Nigeria.

Anticipated outputs
- A consensus statement on very young adolescents in Nigeria that takes stock of the current situation and looks ahead
- An agreed-upon working mechanism to operationalize the consensus

AGENDA

<table>
<thead>
<tr>
<th>Time</th>
<th>Session title and description</th>
<th>Presenter/ Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00-9:30</td>
<td>Welcome and introductions</td>
<td>Save the Children</td>
</tr>
<tr>
<td>9:30-10:15</td>
<td>Why Very Young Adolescent Girls and Boys? The case for VYA-specific interventions</td>
<td>WHO, 20 minute presentation with 10 minutes of Q&amp;A to follow</td>
</tr>
<tr>
<td></td>
<td>Presentation making the case for VYA-specific policies, programs, and program research, e.g., describing physical, emotional and developmental changes in early adolescence and successful approaches according to VYA cognitive development.</td>
<td></td>
</tr>
<tr>
<td>10:15-11:00</td>
<td>What do these global findings mean for Nigeria?</td>
<td>Chair of the National Adolescent Technical Working Group</td>
</tr>
<tr>
<td></td>
<td>Presentation of a 2013 draft policy and program scan</td>
<td>5 minutes</td>
</tr>
<tr>
<td></td>
<td>Findings will be shared from an expert report regarding the state of VYA-specific programs and policies and gaps in Nigeria.</td>
<td>UNFPA, 20 min presentation with Q&amp;A to follow</td>
</tr>
<tr>
<td></td>
<td>Current VYA programs: Experiences and implementation challenges</td>
<td>IRH, will moderate a “talk show” with panelists from UNICEF, WHARC, and GHON who will share their program experiences and challenges.</td>
</tr>
<tr>
<td></td>
<td>2-3 VYA interventions and implementation challenges will be presented by different organizations</td>
<td>Open floor for discussion – 10 min</td>
</tr>
<tr>
<td>11:00</td>
<td>BREAK</td>
<td></td>
</tr>
<tr>
<td>11:30-13:00</td>
<td>What could be done to move forward a VYA agenda in Nigeria?</td>
<td>WHO (moderator)</td>
</tr>
<tr>
<td></td>
<td>Small groups divided by policy, program areas. What are strengths in Nigeria in each area? What should be prioritized over the next five years?</td>
<td>6 Small groups -30 min, after 5 min intro</td>
</tr>
<tr>
<td></td>
<td>Discussion key takeaway points and next steps</td>
<td>Using index cards to write ideas</td>
</tr>
<tr>
<td></td>
<td>What would be key points in a consensus statement from this stakeholder meeting that would define key issues to tackle in moving forward the VYA agenda in Nigeria? Developing a consensus statement and defining next steps</td>
<td>Report back – 15 min (5 min per group)</td>
</tr>
<tr>
<td>13:00</td>
<td>LUNCH</td>
<td></td>
</tr>
</tbody>
</table>
Annex 4: Agenda from the Global VYA Consultation at the International Family Planning Conference
Consultation on Very Young Adolescents (VYA)
December 3, 2011, Dakar, Senegal

Goal:
To catalyze a set of actors to work toward furthering evidence-based VYA programming across sectors that will help establish a foundation for VYA’s future sexual and reproductive health and well-being.

Objectives:
- To connect with others interested in sharing ideas and experiences to advance evidence-based programs and policies to meet the special needs of very young adolescents (VYA) in resource poor settings.
- To share available evidence about VYAs, including knowledge gaps and challenges in effective programming.
- To build consensus on an agenda and next steps to address the special needs of VYA.

<table>
<thead>
<tr>
<th>Session 1: Welcome, Introductions, and Making the Case for VYA</th>
<th>9:00-10:15am</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome</td>
<td></td>
</tr>
<tr>
<td>Introductions</td>
<td></td>
</tr>
<tr>
<td>Objectives, agenda</td>
<td></td>
</tr>
<tr>
<td>Logistics</td>
<td></td>
</tr>
<tr>
<td>Why focus on VYA?</td>
<td></td>
</tr>
<tr>
<td>Q&amp;A</td>
<td></td>
</tr>
<tr>
<td>Break</td>
<td>10:15-10:30am</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Session 2: Share VYA program examples</th>
<th>10:30-12:00 pm</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 Roundtable discussions (2 rounds)</td>
<td></td>
</tr>
<tr>
<td>Large group reflection</td>
<td></td>
</tr>
<tr>
<td>Session 3: Develop a shared VYA agenda</td>
<td>12:00-1:00 pm</td>
</tr>
<tr>
<td>Share recommendations from past meetings</td>
<td></td>
</tr>
<tr>
<td>Lunch</td>
<td>1:00-2:00 pm</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Session 3: Develop a shared VYA agenda (continued)</th>
<th>2:00 -3:00 pm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consensus on group mission and activities(3 groups)</td>
<td></td>
</tr>
<tr>
<td>Break</td>
<td>3:00-3:15 pm</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Session 4: Shared agenda and next steps</th>
<th>3:15 - 5:00 pm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report out on mission and activities</td>
<td></td>
</tr>
<tr>
<td>Build consensus on mission and activities</td>
<td></td>
</tr>
<tr>
<td>Develop a draft action with specific next steps</td>
<td></td>
</tr>
<tr>
<td>How will we work together?</td>
<td></td>
</tr>
</tbody>
</table>

Participants are invited to a reception immediately following the meeting. We will depart the hotel on foot together.
Annex 5. “Walk in the shoes of a VYA” activity from the VYA Consultation at the International Family Planning Conference, November 2013, Ethiopia

Navigating the adult world: An Interactive Approach to Understanding the Sexual and Reproductive Health challenges facing Very Young Adolescents*

Organized for the 2013 International Family Planning Conference by the Very Young Adolescent Alliance

* Adapted from ICRW’s 2013 session at the InterAction forum called “Navigating Reproductive Choice: An Interactive Approach to Understanding Barriers to Women’s Reproductive Health”, created by Jennifer McCleary-Sills. Our thanks to Jennifer for allowing us to adapt her creative idea into an interactive session on Very Young Adolescents.

Concept

As participants walk in the room, they will be assigned to play the role of 1 of 4 VYA advice seekers. They will be asked to seek advice from resource people assigned to each table. VYA advice seekers should ask questions and talk to as many people as needed to in order to get the information or services their character needs. They are encouraged to visit as many tables as they can, but can stay as long as they would like to at each table. They will be given a sheet with their character’s name, details about their lives, and a current SRH challenge. The sheet will also contain suggested resource people to seek out in the room, their relationship to these characters, and possible statements they can say to these recourse people to start the conversation. The sex of the participant will not determine which advice seeker they are assigned to. VYA Alliance members will play resource people and will be sitting at tables waiting for VYA characters to come and talk to them, seeking advice. Resource persons should answer questions, provide advice, and be as supportive or judgmental as the character would be in real life. Suggested statements that resource people would say back to the VYA advice seekers will be provided to help get the conversation started. Resource people will have multiple conversations at a time with VYA advice seekers visiting them. Participants will have 40 – 60 minutes to complete their journey through the community talking to resource people. This should allow them enough time to get food and talk to people.

VYA advice seekers to be assigned to participants as they enter the room

<table>
<thead>
<tr>
<th>Character</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mulu</td>
<td>14 year old girl on the verge of an early marriage</td>
</tr>
<tr>
<td>Hiwot</td>
<td>12 year old girl seeking comfort from daily violence at home</td>
</tr>
<tr>
<td>Tigist</td>
<td>13 year old girl who just got her first period</td>
</tr>
<tr>
<td>Abraham</td>
<td>13 year old boy who experiences wet dreams and pressure to have sex</td>
</tr>
</tbody>
</table>

List of Resource People

<table>
<thead>
<tr>
<th>Resource person</th>
<th>Their role in the community</th>
<th>Location</th>
<th>Person responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ribka</td>
<td>Health Extension Worker</td>
<td>At a table</td>
<td>Rebecka (IRH)</td>
</tr>
<tr>
<td>Yeshimebet</td>
<td>Auntie</td>
<td>At a table</td>
<td>Laurette (Plan)</td>
</tr>
<tr>
<td>Bethlehem</td>
<td>Friend (supportive, gives misinformed advice)</td>
<td>At a table</td>
<td>Serkadis (SC)</td>
</tr>
<tr>
<td>Abeba</td>
<td>Older sister</td>
<td>At a table</td>
<td>Nana (IRH)</td>
</tr>
<tr>
<td>Character</td>
<td>Role</td>
<td>Location</td>
<td>Moderator</td>
</tr>
<tr>
<td>-----------------</td>
<td>-------------------------------</td>
<td>-------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Tesfaye</td>
<td>Father (traditionalist, farmer)</td>
<td>At a table</td>
<td>Brad (SC)</td>
</tr>
<tr>
<td>Alene</td>
<td>Older Brother</td>
<td>At a table</td>
<td>Benon (SC)</td>
</tr>
<tr>
<td>Tedbab</td>
<td>Female neighborhood “norm” setter (a community elder)</td>
<td>Roaming the room</td>
<td>Shannon (SC)</td>
</tr>
<tr>
<td>Zerihun</td>
<td>Male neighborhood “norm” setter (a community elder)</td>
<td>Roaming the room</td>
<td>Gratian (IRH)</td>
</tr>
<tr>
<td>Logistical support</td>
<td>Hand out the characters and give a brief explanation to participants when they first come into the room. Collect names and email addresses on the sign in sheet.</td>
<td>At the entrance of the event</td>
<td>Lissa (IRH)</td>
</tr>
<tr>
<td>Panel Moderator</td>
<td>Facilitate the post activity discussion</td>
<td>Front of room</td>
<td>TBD</td>
</tr>
</tbody>
</table>

**Post Activity Moderated Discussion**

After 40 - 60 minutes of seeking advice, participants will be asked to find a seat for a moderated discussion. About 4 resource people will be asked to come to the front of the room and give a few remarks on what they heard at their tables and how navigating SRH issues can be challenging for VYA. We will also open up the discussion with the audience asking their reflections on their experiences as VYA and trying to seek out advice from different people in the community. We will then also ask for people to look at posters from around the room while they enjoy food and drinks to learn more about the work the alliance members are doing with VYA.

**Guide for moderating the discussion:**

1) Mention the VYA Alliance, the organizations involved, and why we have formed this alliance.
2) Ask 4 resource people to take 2 – 3 minutes only to quickly reflect on the most interesting things they were hearing at their table, in terms of VYA’s barriers to seeking accurate and correct information.
3) Open it up to the audience, asking:
   a. What surprised you?
   b. What were the biggest barriers for your character?
   c. What new insights do you have about VYA’s ability to get the information and services they need?
4) Thanks everyone for coming, invite them to continue enjoying food and looking at the VYA alliance members’ posters about their work.
Very Young Adolescent Female Profile 1:
Mulu

- You are 14 years old and a good student – you’re hoping to continue school and become a teacher. You live in a small town on a road towards the capital and have a vision of what life is like outside of the village. You dream of leaving the village one day to continue with school.
- Your parents work hard every day in the fields so there is food to eat every day. You live a simple life, but are happy, playing with the girls in the neighborhood.
- You honor your older brother and take pride in his achievement.
- You recently overheard your father (Tesfaye) talking to a neighbor that he is arranging your marriage.
- You really don’t want to get married and are scared of getting pregnant soon because you have school and the future you are planning.
- You’ve heard about girls who have run away to the capital to escape early marriage where they get jobs and go to night school. But you feel sad thinking of leaving your family.

Your task
Talk to as many community members as possible sitting at tables to get advice. Resource persons have names tags on and play the character of a resource person from whom you might want to seek advice.

As Mulu, what would you say to resource people in your social network and community?

Friend (Bethlehem) and Auntie (Yeshimebet)

“My father wants to marry me off and I am scared. I know he must feel overstretched trying to put provide food for the family and juggling different daily labor and farming. I want to run away from this life. It is not fair!”

Father (Tesfaye)

“I don’t want to get married any time soon. I’m still in school and I want to finish and then go on to college. I have hopes and dreams of becoming a teacher. I don’t want to be the wife of a farmer when I grow up.”

Health Extension Worker (Ribka)

“What will happen to me after I get married? Do you help other young married girls? I don’t want to get pregnant any time soon. I’m scared I will die if a man has sex with me.”

Brother (Alene)

“Brother, I honor and respect you. But I need your help. Is there anything you can do to help me not get married off?”

Abeba (older sister)

“Please help me, I don’t want to get married and don’t know what to do!”
Very Young Adolescent Female Profile 2:

Hiwot

- You are 12 year old girl who is the youngest girl in the extended family of 5 women and a brother all living in your home.
- You spend most of your day working on chores and hardly get to leave home.
- The other women in the home always tell you about how important it is to the family that you work hard, and learn how to be a good mother and wife. They are not nice to you and make you do much of the hard work in the house. They say they have all been through it so now it is your turn.
- Sometimes you get hit in the home. You wish that your brother would comfort you and understand how alone you feel.
- You feel sad most of the time and wonder if other girls your age feel the same way. You are jealous of the girls you see walk by the house each morning on their way to school. You wonder if you will ever be able to return to school or meet a boy and fall in love. You fear being married to an old man.

Your task

Talk to as many community members sitting at each table as possible to get advice. They have names tags on and play the character of a resource person from whom you might want to seek advice.

As Hiwot, what would you say to resource people in your social network and community?

Older Sister (Abeba)

“How did you feel when you were my age? Did you have hopes and dreams? Will I ever be happy?”

Friend (Bethlehem)

“Is my family normal? I am tired of getting hit and no one seems to care about me.”

Auntie (Yeshimebet)

“I am so sad. I never get time to rest, play or have fun. I want to come live with you. I see that your life is different and both of your children go to school. Why can’t my family be like yours? My grandmother says that it is my turn to suffer since they all did too and that it will make me a strong woman. Is that true?”

Brother (Alene)

“Brother, you seem to not even notice that I am sad and crying. I sometimes get hit in the house and you do nothing. Do you not love me?”

Father (Tesfaye)

“Father, what will be in my future? Will I always live in this house and have to do all the work? Does Alene do work for the family? Will you marry me off to some old man?”

Ribka (Health Worker) “I feel sad at home and don’t know what to do.”
Very Young Adolescent Female Profile 3:

Tigist

- You are 13 years old and go to school, which you really enjoy.
- Last week, you got your first menstrual period while you were in school and soiled your skirt.
- No one ever talked to you about your menstrual cycle so you did not understand.
- You realized that your skirt was soiled when you stood up and boys laughed at you, saying: “Red Terror has arrived”. You were so ashamed and embarrassed.
- In the school latrine (which had no doors!), you felt scared when you saw blood in your underwear.

Your task

Talk to as many community members sitting at each table as possible to get advice. They have names tags on and play the character of a resource person from whom you might want to seek advice.

As Tigist, what would you say to resource people in your social network and community?

Health Extension Worker (Ribka)

“I am so ashamed about what happened in school. I never want it to happen again. What should I do? Why do I have pain in my back and stomach? Am I sick?”

Auntie (Yeshimembet)

“Auntie, what is going on with me? Am I dying? Why has no one ever told me about what is going on? What will happen to me now...am I still a child?”

Friend (Bethlehem)

“I’ve heard that once you have your period, if you get too close to boys, you can have a baby. Have you heard this? Do you come to school when you have your period?”

Older Sister (Abeba)

“What does having your period really mean? When did you get your first period? What if father finds out, what will he do?”

Father (Tesfaye)

“Do we have enough money to buy sanitary napkins or cloths so I can go to school, not worry about soiling my clothes so the boys do not make fun of me?”

Alene (Older Brother)

“Do you have any extra money? I need to buy something for school.”
Very Young Adolescent Male Profile 4:
Abraham

- You’re a 13 year old boy.
- Recently, you’ve been having wet dreams but have not told anyone.
- You are starting to get hair on your upper lip and pimples are showing up on your face.
- Your friends are noticing these body changes you are going through and have told you that you need to have sex soon otherwise your pimples will never go away. You don’t know how to respond to their pressure and assume, because of their confidence, that they have had sex already. Frankly, you are not even sure how to have sex but do not want to ask. You consider going to see the movies that they talk about.
- In class, you cannot seem to control your erections and thoughts.

Your task

Talk to as many community members sitting at tables to get advice. They have names tags on and will be playing the character of a resource period from whom you might want to seek advice. Try to talk to as many resource people in the room, seated at each table.

As Abraham, what would you say to resource people in your social network and community?

Health Extension Worker (Ribka)

“I need something to help me stop getting erections in class. Do you have a pill for that? Will my pimples ever go away? My friends say I should have sex to help with that.”

Auntie (Yeshimebet)

“Auntie, do you know anything about how a boy can become a man? Do I have to prove myself? How can I become a man like Uncle Girma?” Auntie, my friends say I am ready for sex? Is this true? How do I know when I’m ready? I don’t want my friends to make fun of me anymore.”

Father (Tesfaye)

“Father, am I a man? What does it mean when you wet your sheets at night? How am I supposed to act now? When do you think I should have sex?”

Brother (Alene)

“Brother, I noticed you have no more pimples. Does that mean you had sex when you were young? Why does my penis keep getting hard in class?”

Abebe (Older sister)

“I’ve been having a hard time concentrating in class because I keep thinking about the how pretty the girls are. Is this normal?”
Resource Person Profile 1:

Ribka

- You are a nurse/counselor at the local health center. You were trained to provide quality services to help women plan their pregnancies, but you don’t have time to provide the quality of care that you’d like to.
- You see 40 clients a day. You barely have time to record notes on each of them. You usually have less than 5 minutes to provide individual counseling.
- You had an NGO training on Youth Friendly Health Services three years ago. The training helped to challenge your initial beliefs that young people should not have sex before marriage. Before you always blamed pregnancy outside of marriage on the girls’ irresponsible choices. You somewhat still feel this way, but at least feel more comfortable talking to adolescents.

As Ribka, what would you say to VYAs who seek your advice on SRH issues?

(To Mulu) “Mulu, many girls come through this health center and have babies. Actually, the younger the girl is, the more she is at risk of having something bad happen to her during pregnancy. But we will take good care of you here. Make sure you come here to give birth.”

(To Tigist) “You are not sick. All girls and women get monthly menstrual periods. It’s a part of growing into a woman. You should use a hot water bottle at night to help you with the pain. Your mother or teacher can tell you what to do so the blood does not soil your clothes.”

(To Abraham) “You should be ashamed coming here to ask me these silly questions. Don’t you see that I am very busy with important things to do? Go talk to your father about these things!”

(In general about sex) “You should not have sex when you are so young and not married. It’s shameful behavior. You will not be respected you, and girls will end up pregnant and alone.”

(In general about sex) “It’s a woman’s duty to give her husband as many children as he wants – but these children should be healthy. Family planning can help you space out your children so that they can be healthy.”
Resource Person Profile 2:

Auntie Yeshimebet

- You are in your mid 20’s, married with two children. Your husband works in town and provides a good income so that the children can attend school.

- You have a basic education, having attended school through grade 6. You can read, write and do sums. You have a small business as a seamstress (instead of only farming).

- Your nieces and nephews often come to you for advice, because they see you have a different life than most of the other aunts and uncles. They can talk to you while you are working on their clothes, so they often confide in you.

- Your elder family members, especially your in-laws, sometimes pressure you to give up your business and have more children to ensure the family line continues. You are lucky to have a husband that supports you and stands up to his family.

As Yeshimebet, what would you say to VYAs who come to you with concerns about SRH?

(To Mulu) “School is important, but so is being a wife and mother. Look at me, I went to school and have my own business, but I also got married when my parents arranged it at the same age you are now. I was lucky to marry your Uncle Girma; he is only a little older than me and wants a better life for our children, so we planned when to have our children. Maybe you will be lucky, too!”

(To Hiwot) “I am sorry that your life is so hard, my dear. But as girls, it is our duty to respect our families and do as we are told. Look at me; I work hard to keep my family healthy, my house clean and my business going. I don’t complain when I am tired or feel sad. It is important to have a positive attitude and keep your sadness to yourself. If you pretend to be happy and do your work without complaint, maybe you won’t get hit.”

(To Tigist) “Silly girl, of course you aren’t dying! We don’t really talk about having a period because it is dirty and taboo. It is just a burden that women have to bear. But it means that you are now a woman and can now have a child. You will have to learn to bear the pain and keep rags with you so that when it happens you can keep your clothes clean. And stay away from boys!”

(To Abraham) “Boys have to do many things to prove they are men, but I am not sure exactly what they are, since I am a woman. I remember when I was little, my older brother took my younger brother somewhere to “prove his manhood”, but I am not sure where they went. They came home laughing, but my younger brother seemed different, and he looked at me differently and didn’t play with me anymore. I suggest you talk to your Uncle Girma.”
Resource Person Profile 3:

Bethlehem, friend (supportive, but gives misinformed advice)

- You are 13 years old and go to school.
- Your family is not wealthy; your father works in town as a laborer, and mother works at home taking care of the younger children and does small farming.
- You have an older sister of 17 that has been married for 2 years, has 1 child and is pregnant with another. You get lots of your information and advice from her.

As Bethlehem, what would you say to VYAs who come to you with concerns about SRH?

(To Mulu) “You are right; it is not fair that we have to be married off to old men and start having babies right away! My sister said it is really disgusting and painful! Maybe we should run away together? I have heard there are lots of jobs that pay well, and you only have to work in the evenings, and they give you lodging for free, so we could attend school during the day. I’m not sure what we would have to do, but it couldn’t be worse than being married off, could it?”

(To Hewot) “No one hits me in my house but they do not care about me. I go to my older sister when I have problems and she helps me with advice. Do you have anyone in your family you can talk too? If not, you can come and talk to my sister.”

(To Tigist) “Do not go near boys. My sister told me the same thing. The best thing to do is pretend you are sick and not go to school. Don’t let your mother and father know that you started having your period. They will not let you go out.”

(To Abraham) “I think you should tell one of the girls in school that you love her. Maybe that is what is happening to you down there.”
Resource Person Profile 4:

Alene, Older Brother

- You are 20 years old and are finishing preparatory school. You hope to attend university, but your family is not wealthy so you have to study hard to get a scholarship.
- You are good at football and popular; you have several close friends with whom you spend your free time and are respected among them.
- You have a girlfriend, but your family doesn’t know this. You hope to marry her, but it is not possible for you to ask for her hand until you have finished university and have established yourself in business.
- You have casual sex with other girls in town by buying gifts for them.

As Alene, what would you say to VYAs who come to you with their concerns about SRH?

(To Mulu) “What are you saying, Mulu? You know that father cannot even afford to pay for me to go to university. How could he not marry you to someone that can afford to support you? He can’t take care of you forever. Besides, I cannot even ask him to let ME marry until I am wealthy enough to support a wife!”

(To Hiwot) “I do love you, but what can I do? You are a girl doing girl’s work, you should mind your elders and not disrespect them. They are just trying to teach you to be a good wife and mother. If you are hit, it is because you deserve it. I have no say in women’s matters.”

(To Abraham) “So my little brother is becoming a man! You should come out with me and my friends; we will take you to the brothel where you can prove yourself. You need to get some experience so that you learn to control your hard-ons. When I first started having them, it was very embarrassing, but once I had sex, it got better.”

(To Tigist) “Tell me more why you need money. Did you ask mother or father for those sanitary pads or cloths? I’m happy to help you. I think you are doing a great job in school. Tell me if boys tease you again.”
Resource Person Profile 5:

Abeba (Older sister)

- You are 19 years old and attend a vocational education program in town.
- You are excited about the opportunity presented by the vocational education program.
- You are the oldest of 5 children. You do a lot of housework and childcare to help raise your younger siblings.

As Abeba, what would you say to VYAs who come to you for advice about SRH?

(To Mulu) “Mulu, getting married is what makes us woman. Stop having such silly thoughts about running away.”

(To Hiwot) “My life was similar to yours when I was young, except I was the first child doing everything myself. You might think you have it bad, but I have done everything for everyone for the last 10 years so you have it easier. I noticed that you get hit more often. Maybe I can help talk to father. I had hopes and dreams when I was young to be a nurse, but I had too many household responsibilities to continue with my education.”

(To Tigist) “Getting your period means you are now a woman. You are experiencing the same as us grown women, which means you can handle grown women’s responsibilities. Don’t let father find out about this...he will plan your marriage.”

(To Abraham) “You are getting so old so quickly. You like girls already. Of course that is normal. You are a boy, right? Men should be strong and have girlfriends. Maybe you need to find one for yourself.”
### Resource Person Profile 6:

**Tesfaye**

- You are 38 years old and have been married for 20 years. You and your wife have 5 children, three daughters – Abeba (19), Mulu (14) and Tigist (13), Hiwot (12) as well as two boys, Alene (20) and Abraham (13).
- You have seasonal income as a truck driver at which time your job often takes you away for long periods away from home. The rest of the year, you are a farmer.
- You hold traditional views, but feel that you are less traditional than your very conservative parents, who think you are too easy on your children and that you should rule your home with an iron fist.
- You feel that your role in the family is to provide for everyone financially and you should be respected for all you do for the family.
- You teach your children by your own actions, thus you feel your children should learn from you by watching your behaviors and character. You don't like to spend too much time talking with the children. You do not feel it is your place to talk with your children about sexual and reproductive health.
- You are already planning the marriage of your 14 year old daughter, Mulu, as finances are getting quite tough in the house and you recently noticed she has been becoming a woman. You fear for her safety if she is not engaged and married soon.

### As Tesfaye, what would you tell VYA’s about SRH issues?

**To Mulu** “Your hopes and dreams are what I say they should be. You will thank me when you are older for finding you a nice husband and sharing in his hopes and dreams”

**To Hiwot** “You are learning how to be a good wife. This is your future. Getting married is an honor. Do you not trust that I will find you a good husband? Alene is now a man, he has no place doing chores in the home. But he has spent many hours in his life out herding the goats and cattle”

**To Tigist** “You are embarrassing me. Where is your honor and respect? You know you should talk to you Auntie about these issues. You know money is tight and I can hardly pay for your school supplies. How would I now pay for another item you need for school?”

**To Abraham** “Um, I’m not sure what to say Abraham. You are turning into a man. If not sure about the wet sheets, does it smell like urine? I’ve been thinking that I should take you to do manly things. One night soon, maybe when you are 15 years old, I will take you out the local place where the men hang out and introduce you to a nice woman...she will help turn you into a real man.”
Resource Persons Profile 7 & 8:

Tedbab and Zerihun (roaming community elders/norm setters)

You are both community elders, about 50 years old. You are well respected in the community because of your age. You have conservative traditional views of how social norms should be adhered to and you are not afraid to let everyone in the community know, even when they do not ask your opinion. You frequently listen in to neighbors’ affairs and share your opinion and traditional views. Your role in this activity is to circulate through the room and listen into the dialogue between the advice seekers and resource people and interject with your traditional view points. You are the community norm setter.

As Tedbab and Zerihun, what would you tell VYAs and resource people when listening into their conversations?

(To Mulu) “You are at the perfect age for marriage. This is the best time to learn how to be a good wife and it will keep you a good girl. Listen to your father. He knows what is best for you.”

(To Hiwot) “This is your duty as a girl. Stop complaining.”

(To Tigist) “Look at Tigist, she is becoming a woman. She is ready for marriage. You must not eat salt or cook food for the family when you are menstruating, or you’ll soil the food and make everyone sick!”

(Tedbab to Abraham) “Shame on you! Do not talk about such vulgarities!”

(Zerihun to Abraham) “Let’s turn this boy into a young man!”

Note: Be creative. Listen into people’s conversations. Interrupt them with your traditionalist thoughts and opinions. Roam the room so you get to all the tables.