



Achieving Gender Equality through Interventions among Very Young Adolescents: What Have We Learned?

June 27th, 2023 Webinar



Population, Family and Reproductive Health



GEAS: Who We Are & Our Goals

The GEAS is a global network of research and program partners with a goal to build knowledge, advocate and intervene to promote gender equality and positive health over the life course.

The Global Early Adolescent Study (GEAS) has two primary aims:

- To understand how gender as a social system informs health and wellbeing across adolescent years and how this process unfolds in different socio-cultural contexts.
- *To test how gender transformative interventions in early adolescence contribute to improving adolescent health and well being*

Why Focus on Gender Equality in VYA?

Gender equality is a core global goal by 2030



Early adolescence is a critical window for gender norm formation and gender norm transformative interventions



Gender based violence increases in this age group



Limited understanding on how adolescents perceive gender rules, how they change across time; and the impact that interventions may have on influencing gender attitudes and beliefs

Journal of Adolescent Health: Research Supplement



Key assumption: While more is known about the impact of gender stereotypes and norms on health over the lifecourse, far less is known about how best to intervene in early adolescence to foster equitable gender norms for improving SRH outcomes.

Key questions:

1. What outcomes are more likely to be impacted by gender transformative interventions?
 - a. Does this vary by site, population, and program?
2. What implementation factors matter most?
 - a. How might these vary by site?
3. What are the key learnings and best practices that have relevance for other gender transformative interventions?

Growing Up GREAT!

Gender-transformative sexual and reproductive health programming for very young adolescents in DRC

Tuesday, June 27, 2023

Jennifer Gayles

Senior Advisor for ASRH, Save the Children



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Passages



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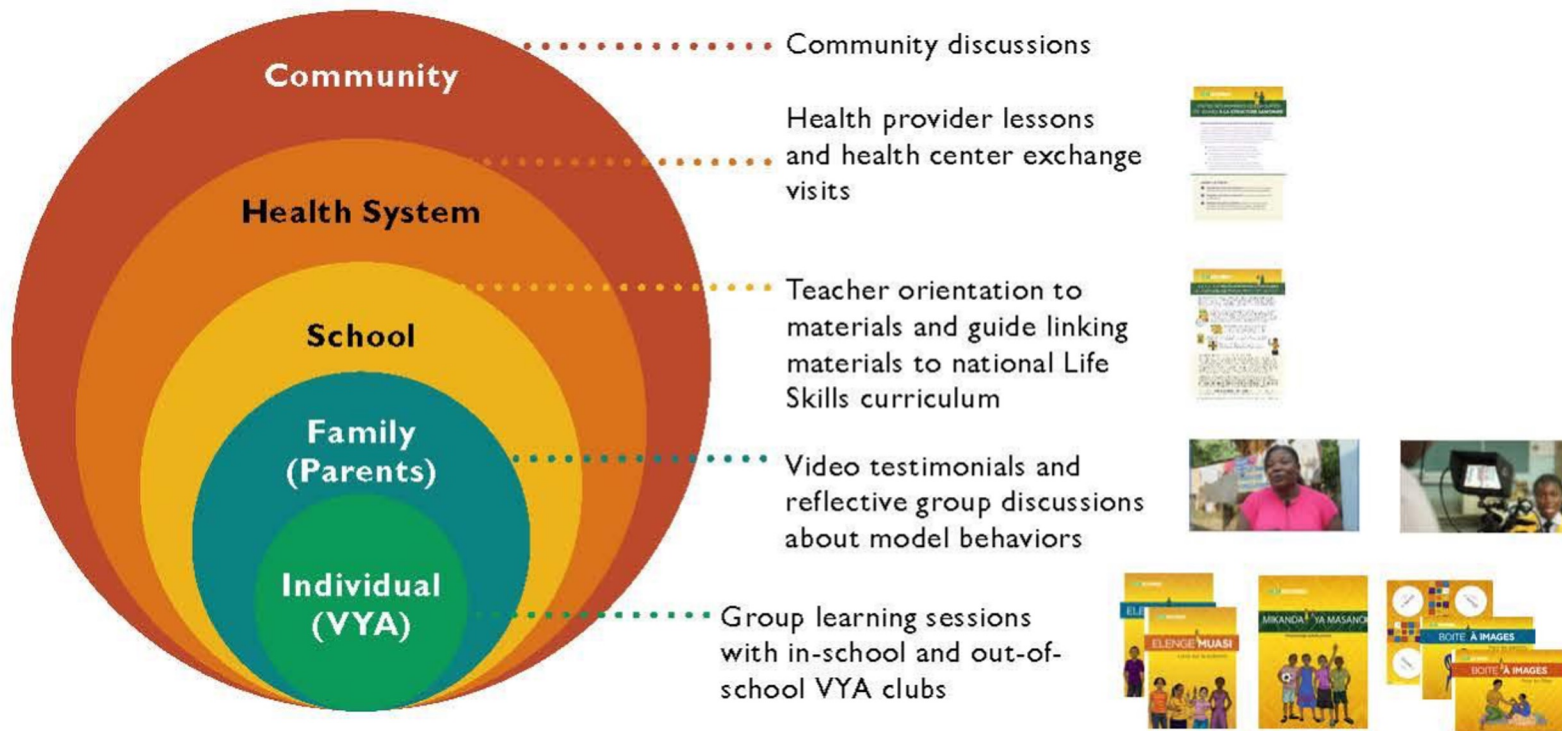


What is Growing Up GREAT?

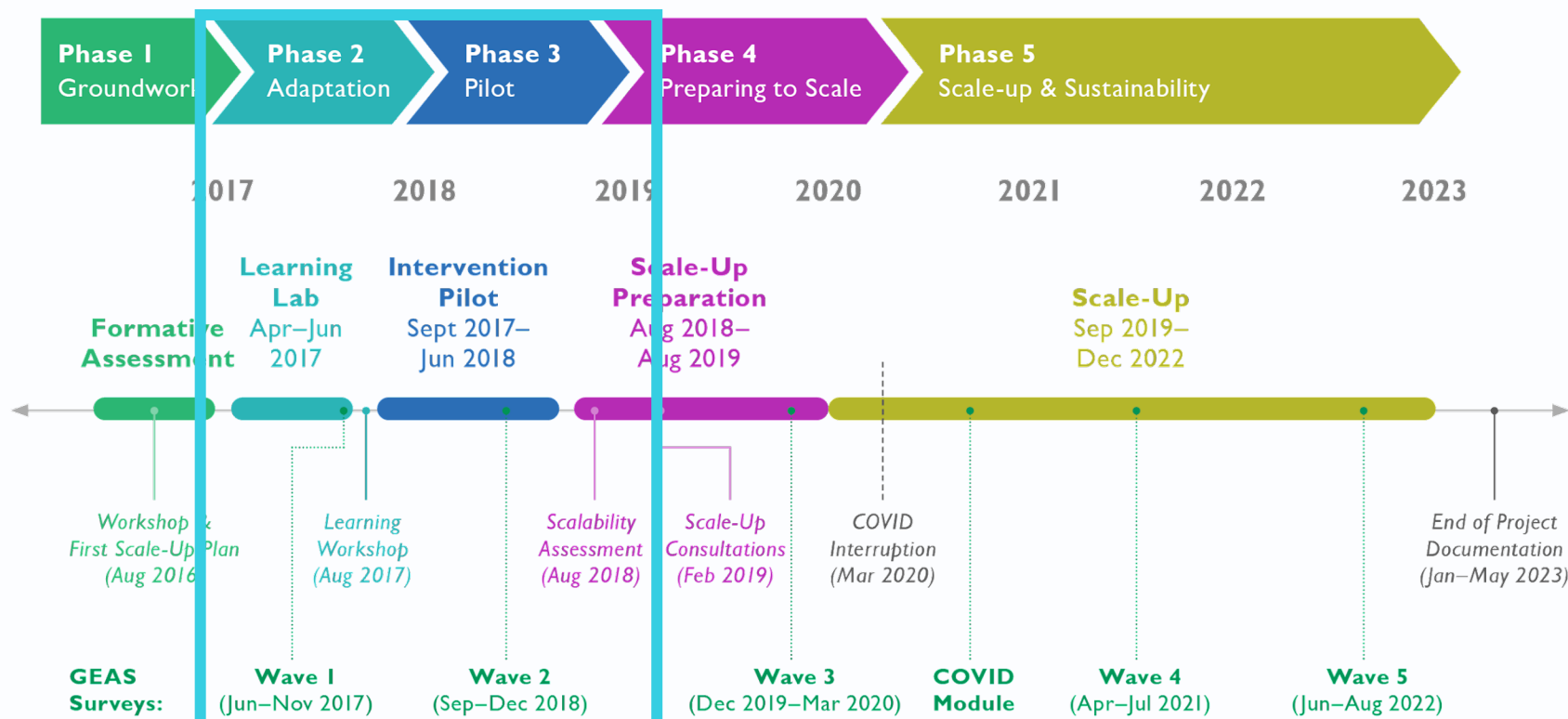


A multilevel gender-transformative SRH program in Kinshasa, DRC for 10- to 14-year-old girls and boys (VYAs) + their families, teachers, health providers and communities

Growing Up GREAT's Multilevel Intervention



Growing Up GREAT! Project Life Cycle



Assessing Growing Up GREAT!'s Impact

Global Early Adolescent Study (GEAS)



Longitudinal Quasi-experimental Design

Intervention and Control Arms, divided by IS/OOS

Wave 1 (2017)

n=2,842 VYA

Wave 2 (2018)

n=2,519 VYA



Difference in Difference analysis

Assesses differences between the intervention and control groups while accounting for baseline differences

Qualitative Evaluation



Implementation Research

- Rapid study on school and health linkage components
- Responsive feedback approach

Youth-led Evaluation

GEAS Evaluation Results



Increased
SRH
Knowledge



Increased
Agency &
Assets




Increased
Gender-
Equitable
Attitudes &
Norms



Increased
Gender-
Equitable
Behaviors




SRH Knowledge

 SRH KNOWLEDGE	EFFECT OF INTERVENTION RELATIVE TO CONTROL GROUP	
	IN-SCHOOL	OUT-OF-SCHOOL
PREGNANCY KNOWLEDGE INDEX	✓ MEAN SCORE DIFFERENCE 0.44 (0.15, 0.73)**	X
HIV KNOWLEDGE	✓ MEAN SCORE DIFFERENCE 0.17 (0.04, 0.30)*	X
WHERE TO GET CONDOMS	X	✓✓ OR=2.03 (1.37, 3.01)*** (ESPECIALLY GIRLS)
WHERE TO GET INFORMATION ABOUT MENSTRUATION (ASKED OF <u>MENARCHAL</u> GIRLS)	✓ OR=2.10 (1.34, 3.29)**	✓✓ OR=4.18 (1.95, 9.00)*** (ESPECIALLY GIRLS <12 YEARS)
WHERE TO GET CONTRACEPTION (ASKED OF GIRLS ONLY)	X	✓ OR=2.66 (1.31, 5.42)**




Asset & Agency

 CONNECTEDNESS, COMFORT AND COMMUNICATION	EFFECT OF INTERVENTION RELATIVE TO CONTROL GROUP	
	IN-SCHOOL	OUT-OF-SCHOOL
CAREGIVER CONNECTEDNESS	✓ MEAN SCORE DIFFERENCE 0.09 (0.00, 0.18)*	✓ MEAN SCORE DIFFERENCE 0.22 (0.07, 0.38)**
COMFORT WITH PUBERTAL DEVELOPMENT	X	X
BODY SATISFACTION INDEX	X	✓ (GIRLS ONLY) MEAN SCORE DIFFERENCE 2.79 (1.43, 5.42)*
COMMUNICATION ON... BODY CHANGES	X	X
COMMUNICATION ON... SEXUAL RELATIONSHIPS	X	✓ 2.03 (1.11, 3.69)* (ESPECIALLY GIRLS)
COMMUNICATION ON... PREGNANCY	X	X
COMMUNICATION ON... CONTRACEPTION	X	✓ (FOR <12Y/O ONLY) OR=14.12 (2.64, 75.46)**




Gender-equitable Attitudes & Norms




 GENDER ATTITUDES, ROLES & TRAITS	EFFECT OF INTERVENTION RELATIVE TO CONTROL GROUP	
	IN-SCHOOL	OUT-OF-SCHOOL
SEXUAL DOUBLE STANDARD	X	X
GENDER-STEREOTYPICAL ROLES	X	X
GENDER-STEREOTYPICAL TRAITS	X	X
GENDER EQUALITY IN HOUSEHOLD CHORES	✓✓ OR=1.95 (1.49, 2.56)***	✓✓ 3.46 (2.21, 5.43)*** (ESPECIALLY FOR GIRLS)
DECREASED ACCEPTANCE OF GENDER-BASED DISCRIMINATION	✓	X



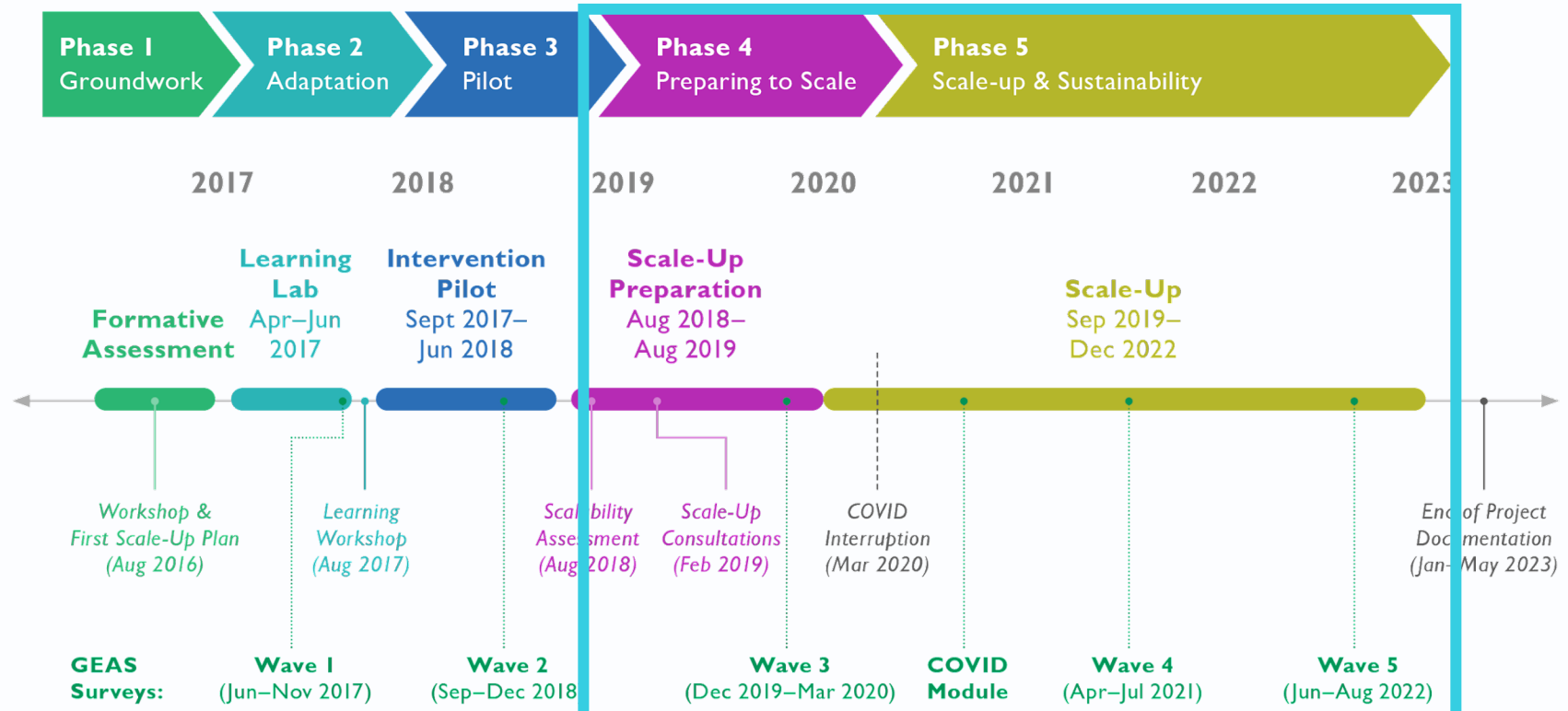
Gender-equitable Behaviors

 GENDER-EQUITABLE AND NON-VIOLENT BEHAVIORS	EFFECT OF INTERVENTION RELATIVE TO CONTROL GROUP	
	IN-SCHOOL	OUT-OF-SCHOOL
BROTHER HELPED (FROM SISTERS' PERSPECTIVE)	X	X
HELPED SISTER (FROM BROTHERS' PERSPECTIVE)	X	✓ OR 2.50 (1.15, 5.46)*
EXPERIENCED TEASING AND VERBAL BULLYING	X	✓ OR=0.61 (0.42, 0.90)*
EXPERIENCED PHYSICAL VIOLENCE	X	X
PERPETRATED VERBAL OF PHYSICAL VIOLENCE	X	X

Qualitative Research Findings

-  Challenging school environment: overcrowding, limited teacher and space availability, extracurricular activities on weekends
-  Limited duration/intensity of training > lack of facilitator and teacher confidence and skills. VYA peer facilitators in particular struggled to provide consistent, quality facilitation
-  Notable shift in knowledge and practice of gender equitable allocation of time and resources in the household, as well as increased positive parent-child communication

Growing Up GREAT! Project Life Cycle



Growing Up GREAT Scale & Sustainability



MOE

Clubs for in-school
VYAs

Integration into
classroom-based
Family Life Education



MOH

Family and community
activities
(community cadres)

Health exchange visits
(facility-based providers)

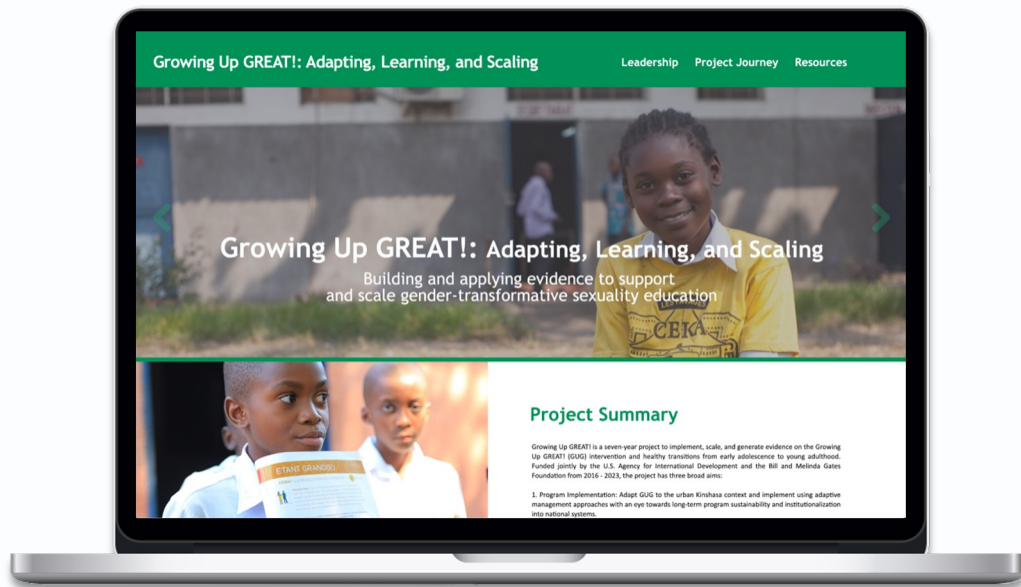


MSA

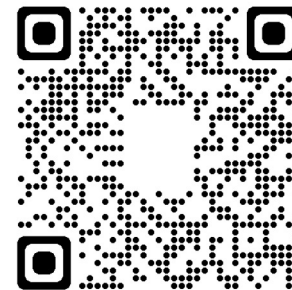
Clubs for out-of-school
VYAs

Integration into
classroom-based
remedial education

GUG Legacy Site



Learn more at
GrowingUpGreat.org





Thank you!

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Global Early
Adolescent Study



SETARA Comprehensive Sexuality Education program for very young adolescents in Indonesia

Key findings on implementation and impact

Presented by:

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Ifta Choiriyah - Center for Reproductive Health
Universitas Gadjah Mada



Setara (Semangat Dunia Remaja)



- **2 year CSE intervention** for standards 7 & 8 junior high school (12-15 yr)
- Developed with stakeholders by Rutgers Indonesia in 2017, **following UNESCO international technical guidance on sexuality education**
- Goal: to support adolescents to understand the cognitive, emotional, physical and social aspects of sexuality in an age- and developmentally appropriate way, feel more comfortable with puberty and increase their self confidence. **In the long term help to reduce SGBV/IPV and prevent unwanted pregnancies and early marriage.**
- Following ITGSE: include **reflection on gender and power** (5x more effective)
- Currently implemented in **6 districts and reaches 4183 students.**
- GoI commitment to **train 3060 CSE teachers by 2024** as a part of MoH and MoEC MoU

Evaluation of Setara

Effect study: use of GEAS survey to measure impact of Setara

- Involving 18 public schools (9 intervention and 9 control groups) in 3 locations: Bandar Lampung (Sumatra), Semarang (Central Java), Denpasar (Bali)
- Adolescent respondents: Round I: 4.504 Round II: 3.827 Round III: 3.735 children

Implementation research: measuring the program's conformity to its original design using process measures such as program fidelity, adaptations, completeness/dose received, the level of acceptability and support across stakeholder groups, and contextual factors that influence implementation.



Materials	ST 7 (Chapters 1-5)	ST 7 (Chapters 6-8)	ST 8 (Chapters 1-8)	ST 8 (Chapters 9-15)
Sites				
Bandar Lampung	In class	Online	Online/not delivered	Online/not delivered
Semarang	In class	In class	In class	Online
Denpasar	In class	Not delivered	Online	Online

Summary Findings

Outcome variable	All	Girl	Boy
Healthy competencies			
Knowledge about pregnancy (cont)			
Knowledge about HIV (cont)			
SRH communication during past year (cat)			
Gender Stereotypical Traits (cont)			
Gender Stereotypical Roles perceptions (cont)	*		
Sexual Double Standard perceptions (cont)			
Agree with gender-atypical teasing (cat)	*		
Women who carry condoms on they are easy (cat)			

❓ **Increase** knowledge on pregnancy prevention, discussion about body changes, pregnancy, contraception and sexual relationship.

❓ **Lower** support on stereotypical gender trait and roles, sexual double standard (girls only), teasing for gender atypical behavior (girl only) and perceive that women who carry condoms are easy.

*Note: Green highlight indicating CSE effect, *significant gender interaction*

Summary Findings

Outcome variable	All	Girl	Boy
Personal sense of wellbeing			
Body satisfaction (cat)			
Feelings of guilt related to sexuality (cont)			
Comfort with pubertal development (cat)			
Self-efficacy to prevent pregnancy (cat)			
Self-efficacy to say “no” (cat)			
Self-efficacy to communicate romantic feelings (cat)	*		
Normal to be curious about love and sex (cat)			
Violence and substance abuse			
Ever been teased (cat)			
Ever used tobacco (cat)			
Felt unsafe at school (cat)			

? **Increase** perceive of courage to communicate romantic feeling (boys only), obtain information about pregnancy prevention, and looking normal to curiosity for love and sex

? **Lower** tobacco consumption, experience being teased, and feel unsafe at school.

*Note: Green highlight indicating CSE effect, *significant gender interaction*

Key Results



- Despite COVID hampering delivery of sessions, we see **promising results**, especially on **competencies** (knowledge, skills, and attitudes)
- The finding indicates that rights based CSE approaches can **build assets** for healthy adolescent development for young adolescents. The wave 3 evaluation findings indicate that the effects **persist** even after it has ended. This suggests that the intervention lays a strong foundation, emphasizing **the importance of starting it early**.
- But **effect** appears to be **highly contextualized**:
 - Many differences between the locations in **implementation quality** and nr of sessions delivered, often related to degree of political and community support for the intervention, teacher skills and values, and integration in the school curriculum, and school closure during Covid-19
 - Variation in quality and dose align with difference in significant effect across sites: The site with the **highest dose** (80%) **and highest quality** had the **best results**, site with lowest dose (35%) and quality the least results
 - But **socio-cultural context** also seems to matter: best results on gender equal attitudes in Denpasar (Hindu) compared to Semarang and BL (Islamic).
- Effects were **mostly significant among girls** across all sites and fewer for boys.
 - Boy's lower motivation and involvement during sessions
 - Setara gender content focusing on girls' empowerment and less attention to alternative positive norms masculinity
 - Setara teachers (all female) viewed girls as 'more serious'
 - Norm that RH issues are 'for women'

What is our next step?



- Collaborating with UGM and BKKBN (National Family Planning Agency) to address ASRHR and promote effective communication between parents and their children.
- Implementing WSA (Whole School Approach) to evaluate the impact of CSE. In-school teacher training for delivering effective CSE. Out-of-school parent training to enhance communication skills.
- Revitalizing BKKBN's BKR Program (Adolescent Family Development), where BKR's cadre, teachers and parents become the community facilitators.
- Engaging Adolescents In and Out of School. In-school engagement during CSE lessons to foster awareness and understanding. Out-of-school engagement through activities organized by the Village Children Forum. Activities include campaigns, discussions, decision-making processes, and child marriage prevention mechanisms.

Thank you

Resources



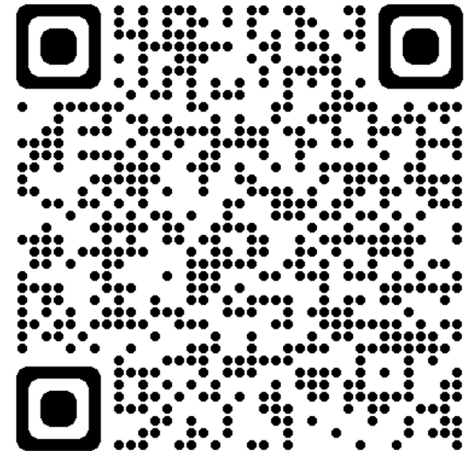
<https://rutgers.id/program/explore4action/>

<https://pkr.fk.ugm.ac.id>

<https://www.rutgers.international/programmes/explore4action/explore4action-resources>

[Indonesia — Global Early Adolescent Study \(geastudy.org\)](http://Indonesia — Global Early Adolescent Study (geastudy.org))

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Gender transformative intervention effects are program, content, and population dependent

Between interventions

- Greater effects of SETARA on improving gender normative perceptions and SRH communication
- Greater effects of GUG on SRH knowledge

SETARA-specific: greater effects in Semarang then in Denpasar or Lampung

- Cultural taboos caused some facilitator discomfort with material
- Inconsistent implementation in Denpasar and Lampung

GUG-specific: greater effects among out of school adolescents and girls

- Facilitators gear SRH lessons more towards girls
- Some limitations from governments on what content could be delivered

Intervention effects on gender normative perceptions

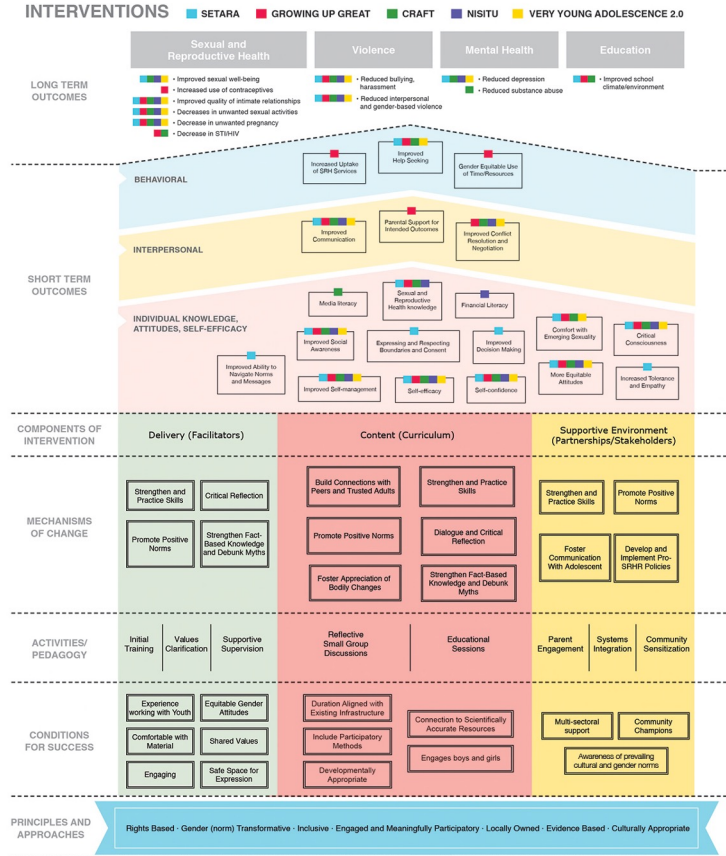
	GUG!	Setara		
	Kinshasa	Lampung	Denpasar	Semarang
Sexual double standard				Girls
Gender stereotypical traits	IS+Boys	Girls	Girls	Girls
Gender stereotypical roles		Boys	All	Girls
OK to tease boys acting like girls				
OK to tease girls acting like boys	OOS Boys			
Sharing of household chores	All			

- **effect on selected population (according to sex, age or school status)*

Intervention effects on SRH attitudes, communication & knowledge

	GUG!	Setara		
	Kinshasa	Lampung	Denpasar	Semarang
Women who carry condoms are easy				Girls
Girl's responsibility to prevent pregnancy		Boys		
Communication about puberty				All
Communication about pregnancy	IS			Boys
Communication about contraception	OOS Girls	Boys		Boys
Communication about sexual relations	OOS Girls			
Pregnancy knowledge	IS Girls	Boys		
HIV knowledge	IS Girls			All
Knows where to get a contraception	OOS Girls			

Theory of Change



INTERVENTIONS

■ SETARA

■ GROWING UP GREAT

■ CRAFT

■ NISITU

■ VERY YOUNG ADOLESCENCE 2.0

Sexual and Reproductive Health

Violence

Mental Health

Education

LONG TERM OUTCOMES

- Improved sexual well-being
- Increased use of contraceptives
- Improved quality of intimate relationships
- Decreases in unwanted sexual activities
- Decrease in unwanted pregnancy
- Decrease in STI/HIV

- Reduced bullying, harassment
- Reduced interpersonal and gender-based violence

- Reduced depression
- Reduced substance abuse

- Improved school climate/environment

BEHAVIORAL

Increased Uptake of SRH Services

Improved Help Seeking

Gender Equitable Use of Time/Resources

INTERPERSONAL

Improved Communication

Parental Support for Intended Outcomes

Improved Conflict Resolution and Negotiation

SHORT TERM OUTCOMES

INDIVIDUAL KNOWLEDGE, ATTITUDES, SELF-EFFICACY

Media literacy

Sexual and Reproductive Health knowledge

Financial Literacy

Improved Ability to Navigate Norms and Messages

Improved Social Awareness

Expressing and Respecting Boundaries and Consent

Improved Decision Making

Comfort with Emerging Sexuality

Critical Consciousness

Improved Self-management

Self-efficacy

Self-confidence

More Equitable Attitudes

Increased Tolerance and Empathy

COMPONENTS OF INTERVENTION

Delivery (Facilitators)

Content (Curriculum)

Supportive Environment (Partnerships/Stakeholders)

MECHANISMS OF CHANGE

Strengthen and Practice Skills

Critical Reflection

Build Connections with Peers and Trusted Adults

Strengthen and Practice Skills

Strengthen and Practice Skills

Promote Positive Norms

Promote Positive Norms

Strengthen Fact-Based Knowledge and Debunk Myths

Promote Positive Norms

Dialogue and Critical Reflection

Foster Communication With Adolescent

Develop and Implement Pro-SRHR Policies

Foster Appreciation of Bodily Changes

Strengthen Fact-Based Knowledge and Debunk Myths

ACTIVITIES/ PEDAGOGY

Initial Training

Values Clarification

Supportive Supervision

Reflective Small Group Discussions

Educational Sessions

Parent Engagement

Systems Integration

Community Sensitization



CONDITIONS
FOR SUCCESS

Experience
working with Youth

Equitable Gender
Attitudes

Comfortable with
Material

Shared Values

Engaging

Safe Space for
Expression

Duration Aligned with
Existing Infrastructure

Include Participatory
Methods

Developmentally
Appropriate

Connection to Scientifically
Accurate Resources

Engages boys and girls

Multi-sectoral
support

Community
Champions

Awareness of prevailing
cultural and gender norms

PRINCIPLES AND
APPROACHES

Rights Based · Gender (norm) Transformative · Inclusive · Engaged and Meaningfully Participatory · Locally Owned · Evidence Based · Culturally Appropriate

Conditions of Success that influenced SETARA and Growing Up Great

- **Delivery/Facilitators:**
 - Teachers were challenged to deliver certain topics
- **Content:**
 - In Indonesia, only $\frac{1}{3}$ of the curriculum was implemented in 2 out of the 3 sites due to COVID-19; Government refusal to allow certain content be delivered (i.e., contraceptive methods)
 - Difficult to structure curriculum content within school day
- **Supportive Environment:**
 - Interventions still primarily focus on adolescents; other key change agents need to be better and more intensively integrated in the design and implementation of gender transformative interventions, including parents, religious leaders, and other policy makers (where applicable)

Key Messages

Intervention effects on normative gender perceptions differed by program

- Review found that the more accessible the message is and the more engaged a person is with the messaging, the stronger the attitude that is formed (Stewart et al, 2021)

Girls benefitted the most

- Need to consider and accommodate differences in how boys and girls learn and respond
- Studies show that while girls respond better to education-based interventions, boys respond better when community mobilization is incorporated

Challenges in implementation influenced success

- In addition to understanding whether an intervention works, we need to understand how well it was implemented

Interventions still primarily focus on adolescents

- Other key socialization agents (parents and teachers) need to be better integrated



Thank You



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