

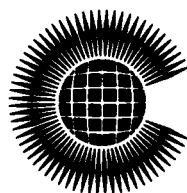
ACT ON HEALTH

A YOUTH HANDBOOK



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Commonwealth Youth Programme

COMMONWEALTH SECRETARIAT

CREDITS

Commonwealth Secretariat
Marlborough House, Pall Mall,
London SW1Y 5HX, United Kingdom
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Compiled by Leanne Miller in consultation with:

Youth to Youth, Barbados
Up Rising Youths, British Virgin Islands
Youth Front Against Drugs and Alcohol, Gambia
Mei Ham Youth Centre, Hong Kong
Single Mother's Welfare Group, Kenya
Rangatahi Speak, New Zealand
Scouts Association, Uganda
Mtendere Lifestyle Project, Zambia
Twatasha AIDS Project, Zambia

ISBN

0-85092-421-9

Design and production

edit

20 Colebrooke Row,
London N1 8AP, United Kingdom
Telephone: 0171 704 0377
Facsimile: 0171 704 1370

FOREWORD



Many of the attitudes and behaviours that impact on health in later life are acquired during adolescence and early adulthood. At this age, young men and women quite rightly want to develop their own attitudes independently of older people. The sharing of information among young people themselves is therefore particularly important.

This handbook has been developed by young women and men for young people who want to promote positive attitudes to health issues among their peers. By providing a framework to develop these resources, we hope that we will help you to produce messages that have the most impact and relevance to your own lives and those around you; reflecting your own culture, language, values and concerns. We hope that you will find this handbook a useful tool to ACT ON HEALTH.

Eleni Stamiris
Director
Women and Youth
Affairs Division
Commonwealth Secretariat

Desmond O'Byrne
Chief
Health Education and
Health Promotion Unit
World Health Organisation

THE COMMONWEALTH YOUTH PROGRAMME

The Commonwealth Youth Programme (CYP) works towards a society where young women and men are empowered to develop their potential, creativity and skills as productive and dynamic members of their societies and to participate fully at every level of decision-making and development, both individually and collectively, promoting Commonwealth values of international co-operation. CYP:

- supports the efforts of member governments in the formulation of policies and development programmes which effectively address the issues and concerns of young women and men;
- assists member governments in establishing and strengthening youth ministries and independent youth networks to support policy and programme development based on the active participation of both young men and women;
- supports the efforts of youth NGOs and collaborates with international organisations in the promotion of youth development activities;
- enables young women and men to participate effectively in the planning and decision-making processes of their own countries and in regional and international fora;
- supports and recognises initiatives by young women and men for their own social and economic development and for the development of their communities;
- produces training materials on issues that are important to young people in Commonwealth countries;
- promotes greater awareness among young people of the role of the Commonwealth in international relations.

CYP operates through four regional centres to address issues that are of particular concern to young people in the Africa, Asia, Caribbean and South Pacific regions as well as those that are common to all Commonwealth countries. The Programme is coordinated through the head office in London.

ADDRESSES

Women and Youth Affairs Division Commonwealth Secretariat

Marlborough House, Pall Mall,
London, SW1Y 5HX, United Kingdom
Telephone: 171 839 3411
Facsimile: 171 930 1647

CYP Africa Centre

PO Box 30190,
Lusaka, Zambia
Telephone: 260 1 252733
Facsimile: 260 1 253698

CYP Asia Centre

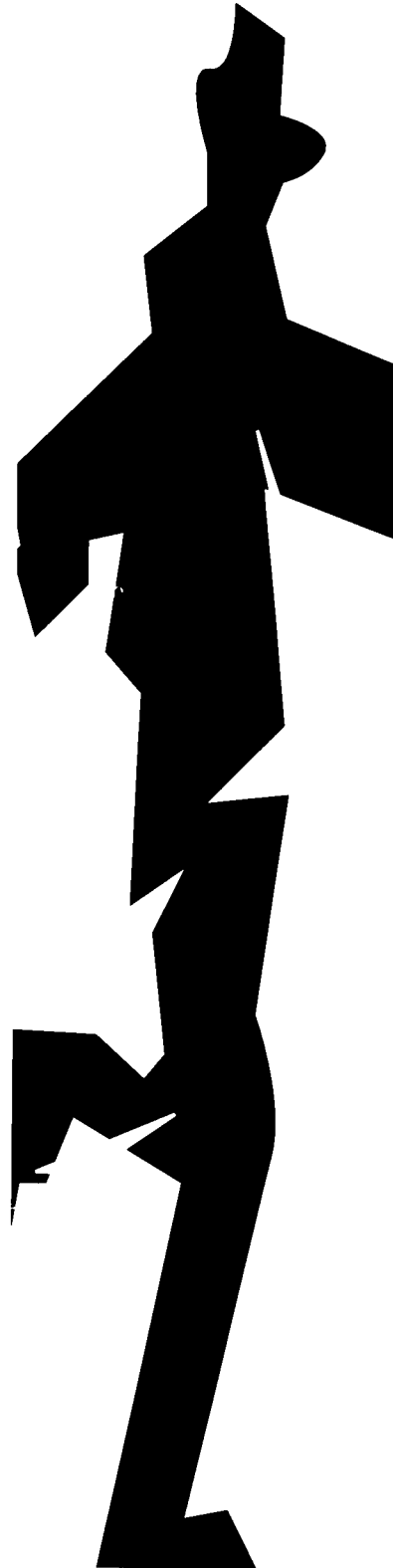
PO Box 78,
Chandigarh, India
Telephone: 91 172 541482
Facsimile: 91 172 545426

CYP Caribbean Centre

PO Box 101063,
Georgetown, Guyana
Telephone: 592 2 68565
Facsimile: 592 2 68371

CYP South Pacific Centre

PO Box 1681,
Honiara, Solomon Islands
Telephone: 677 39229
Facsimile: 677 39230



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INTRODUCTION



Young people must play a key role in the development of any health education resources that are aimed at us. By being involved in meeting our information needs, we help to ensure that the messages and materials are appropriate and relevant. As a result, any resources produced are more likely to have an impact on our peers' behaviour.

Working through the ideas in this manual will help the reader to create and present messages to other young people which will:

- inform them;
- challenge them;
- encourage them to ask questions and seek additional information;
- stimulate them to discuss the relevance of these issues to their lives;
- help them choose healthy and non-risky behaviours.

These ideas and principles were developed following consultation with a range of young people around the Commonwealth. A number of groups also tested the ideas in the manual and provided feedback, which we have incorporated into this manual.

The manual is divided into four sections. Section 1 discusses the background issues related to young people addressing youth health. Section 2 covers general principles which should guide the development of any resources. Section 3 provides the framework or plan for how to go about producing messages and resources. Finally, Section 4 discusses ways for evaluating our work, and for getting support and resources for what we are doing. It also lists some useful contacts. At the end there is an evaluation form for you to use to give us feedback on the manual.

SECTION I

WHY ACT ON HEALTH?



CHANGING LIVES OF YOUNG PEOPLE TODAY

Young people under 30 years of age make up more than half of the world's population. Many young people live in very different social settings to those which our parents and other elders experienced at a similar age. Those settings have been significantly influenced by changes in:

- communication systems – for example radio, television and broader circulation of newspapers and magazines;
- travel possibilities – for example better roads, cars, trucks and air links;
- educational opportunities – for example better schools with trained teachers and a greater chance of spending longer in the educational system;
- better diets and disease control that increase life expectancy.

These changes affected our lives in a number of significant ways. We may:

- be more independent of traditional authority and cultural patterns than our parents and elders were;
- have a cash income from a waged job;
- live in cities away from our ancestral town or village;
- be more focused on ourselves or our nuclear family, rather than the extended traditional family or community;
- have a different view to our parents and elders on the role of young people.

Experimentation and change are a normal process in this stage of our lives as our situations and commitments change. Some changes are a matter of choice, while others are forced on us by society. Many of us are still affected by having to leave school or home early.

WHY FOCUS ON YOUTH HEALTH ISSUES?

As young people, we are an important resource in our countries. Our health and well being help determine the current and future vitality of our communities and countries. But all too often our potential is under-realised and under-used.

Adolescence and early adulthood are usually a time to experience rapid transitions in our physical, spiritual, mental, social and sexual development. Since many of the factors that can harm our health later in life are often developed during adolescence, it is also a time to develop attitudes and behaviours that will stop us developing bad habits, such as smoking and substance abuse. During adolescence we can put these into practice independently from older people. In doing this we can enhance our ability to have a productive life and to make a meaningful contribution to the communities in which we live.

We need to be given every opportunity to develop to our fullest potential, to become active members of our communities and to make choices about how we live our lives. We need to seek out opportunities which can provide a supportive environment for us to achieve this, through experiential learning, observation and so on.

THE KEY YOUTH HEALTH ISSUES

As young people we are often one of the healthiest groups in our communities because we are not as vulnerable to diseases as the very young or the very old. However, despite our better health, we are often not as well-informed on health issues, or as healthy, as we should and could be. We are generally less concerned with long term damage to our health and we are more willing and more likely to take risks.

This manual focuses on health and education related to three major categories of concern for young people:

Sexual behaviour and reproductive health

This includes issues related to pregnancy, reproductive processes, contraception, sexually transmitted diseases and HIV/AIDS.

Alcohol and other drugs

Young people may be exposed to alcohol, tobacco, marijuana, cocaine, heroin and solvents. We may risk problems related to the use of these substances, such as alcohol-related violence, respiratory problems related to smoking, and HIV/AIDS from injecting drugs.

Lifestyle risks

Changes in the life situations of many young people mean a greater risk of injury in transport-related accidents, exposure to poor health and safety conditions at work, less nourishing diets, more stress-related illnesses, inadequate rest and sleep, and lack of exercise.

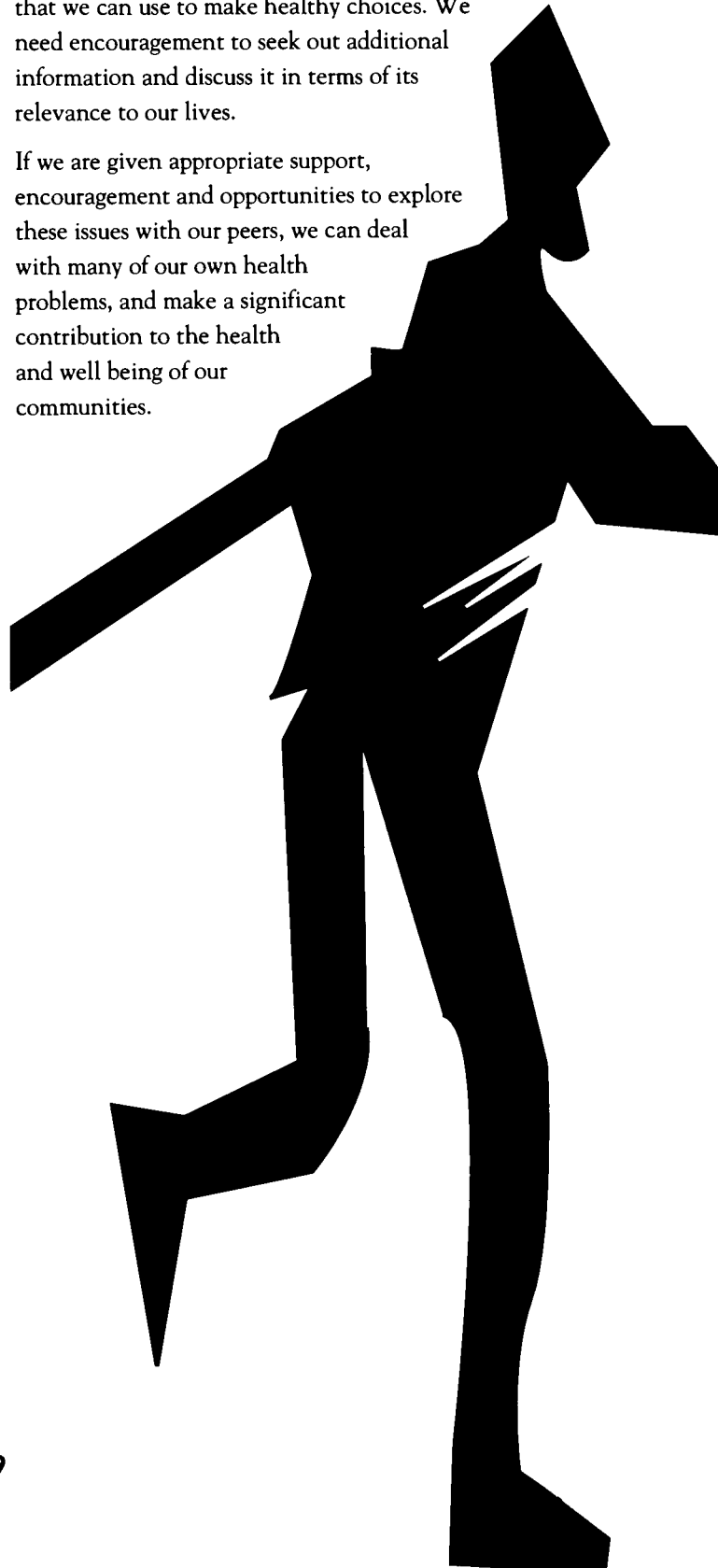
BARRIERS AND OPPORTUNITIES

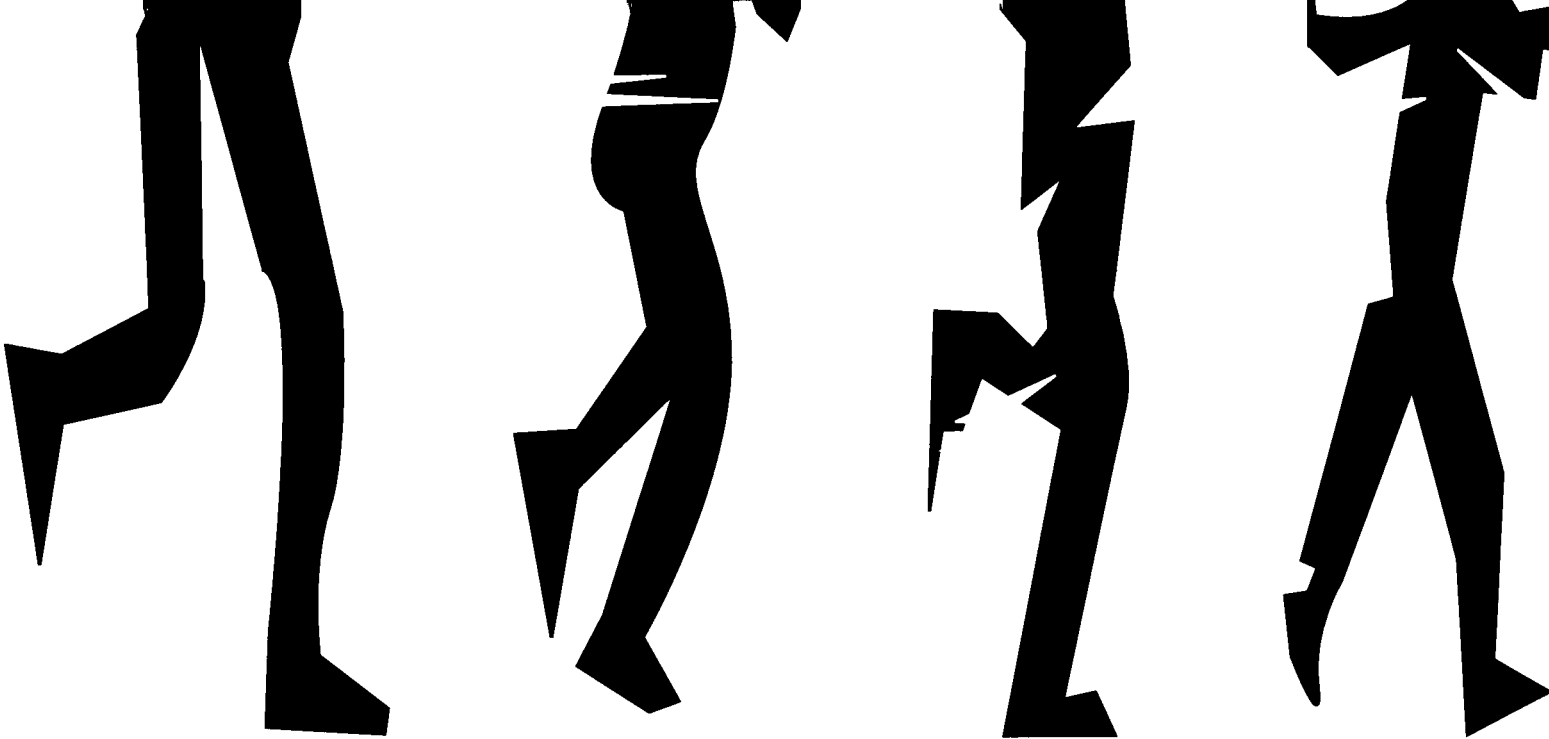
Many of the health problems we face as young people are related to our attitudes and behaviours, and are in principle preventable. Education and information are powerful weapons against the factors that restrict our healthy development.

It is important to remember that young people at this time in our lives are experimenting, taking risks and developing our own personality and identity, based on our own judgements rather than those of our parents, families and teachers, who have previously played important roles in shaping our lives. Risk-taking behaviour is a normal and healthy part of our development, and should not be seen as deviant.

As young people, we need to acquire knowledge that we can use to make healthy choices. We need encouragement to seek out additional information and discuss it in terms of its relevance to our lives.

If we are given appropriate support, encouragement and opportunities to explore these issues with our peers, we can deal with many of our own health problems, and make a significant contribution to the health and well being of our communities.





RELATIONSHIPS WITH PARENTS AND ELDERS

Unfortunately many of the health issues that are of most concern to us are ones which we find difficult to share with parents and other elders – either because of the sensitive nature of the concern, or because of their lack of knowledge or awareness.

It may be uncomfortable for our parents and communities to recognise the existence of sex outside marriage, same-sex relationships and drug use. Their failure to do so, and to take appropriate steps, however, puts our culture and community at great risk and works against the continuing health of that community and its young people.

This resistance to open discussion has often meant that we get misleading or unhelpful advice. It is essential to promote an open and safe environment in which to discuss these issues fully, without fear of recrimination and with respect for young people's chosen patterns of behaviour.

To do this, we need to try to communicate with older people who are willing to understand and support us. This may be done by inviting older people, village elders and senior youth leaders to youth gatherings and giving them the facts about the health issues that concern us. By discussing these issues with them we may be able to create supportive partnerships to promote youth health issues.

ROLE OF YOUNG PEOPLE

To ensure that the health needs and priorities of young people are comprehensively and sensitively addressed, young people must play a central role in developing any initiatives that are aimed at us. Identifying our information needs ensures relevance and contributes to our personal knowledge, skills and development.

We have a unique understanding of the context into which any messages about our health needs and problems must be placed, we understand the views and opinions of other young people, and we understand the behaviours that put us at risk. We need to be linked with other young people to share our experiences and ideas and to ensure that programmes developed to target these issues have direct relevance to our needs and aspirations.

SECTION 2

CREATING AND

MAINTAINING

EFFECTIVE ACTION

(general principles)



PRINCIPLES AND RELATED ACTIONS

Our challenge is to present messages about health issues to other young people which will:

- inform them;
- challenge them;
- encourage them to ask questions and seek additional information;
- stimulate them to discuss the relevance of these issues to their lives;
- help them choose healthy and non-risky behaviours.

The following general principles are designed to help the reader develop information and educational materials to convey key messages in a way that will have maximum impact and relevance to young people's lives.

The principles document an approach to developing health education materials that reflects the language, style, concerns and values of young people around the Commonwealth.

PRINCIPLE 1: YOUNG PEOPLE AS AN ACTION FORCE

Young people are an action force, not a target group. Because we have a unique understanding of the health issues affecting us, we must be involved in all aspects of the design and development of initiatives that are aimed at us.

We have the necessary insights and particular skills to make a significant contribution to promoting our own mental, physical and spiritual health.

We are realistic about the problems we are facing.

We can be role models to other young people to give them clear messages about their health.

We have the initiative, energy and ideas, and can organise ourselves to take action.

We understand the behaviours of young people which put us at risk and we recognise what will motivate us to change.

We understand the styles and trends that need to be reflected in any programmes directed at us.

Since young people are often those most affected by health issues, such as HIV/AIDS, drug use and unwanted pregnancies, we have a vested interest in doing something to protect ourselves, our friends and our families.

As peers, we can be among the most powerful influences on other young people.

Principles in action

Positive and living squads (PALS) Zambia

This group is based in Lusaka and has been in existence since 1992. It involves young people who are HIV positive and have decided to use their sero-status to help themselves and others to live with hope.

The network was established by young people in recognition both that we are often those most vulnerable and most affected by HIV/AIDS, and of the need for co-ordinated effort in support of HIV/AIDS programmes for youth. The PALS network concentrates on projects that generate income for its members, and on education, psychological support and human rights issues.

Although being HIV positive may be stigmatising, the group found that it brought them together. Since its inception, PALS has helped reduce the stigma of being HIV positive in Zambia. The network has allowed the young people involved to formulate strategies, and implement, monitor and evaluate their own programmes to ensure success.

Thinking about your situation

What are some ways you can think of to draw together groups of young people who may be interested in tackling particular youth health issues in your community?

issue	young people who may be interested/involved	strategies for involving them
Examples		
unwanted teenage pregnancies	young single mothers who have unintentionally become pregnant	form a support group of these young mothers and plan education talks to young men and women in schools about the problems of being a young mother
smoking	young people involved in local sporting activities	get the young people in a sports team to promote the benefits of not smoking and having a healthy, sporting lifestyle.

Now you add two examples of what might be appropriate in your local community...

issue	young people who may be interested/involved	strategies for involving them
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PRINCIPLE 2: SPECIAL PERSPECTIVE ON OUR HEALTH

As young people we have an informed perspective on our own health needs.

We are less vulnerable to the diseases that affect the very young and the very old. Our health problems are often a result of exploratory and experimental behaviours, which are a part of normal human development like sex.

As we do not generally have a history of health-damaging habits, such as smoking and other substance use, our health problems are largely related to our behaviour and the situations in which we find ourselves.

At a time when young people are experimenting, we need to be given information and advice about how to minimise the risks to ourselves rather than be told simply not to do it, as this may often have the reverse effect.

We often experiment with sex and drugs at a time of strain with parents and elders. This can make it difficult to discuss these behaviours. It is important to develop materials which address sensitive issues, such as sexual behaviour and alcohol and other drug use, while respecting cultural traditions.

Many of the problems we face are exaggerated by our lack of experience in the wider world. Sometimes our impulsive sexual behaviour and non-use of contraceptives is complicated by our use of alcohol and other drugs.

Principles in action

Young people's views on a particular issue may differ from that of their elders or parents. It is important to understand how both groups may view an issue or problem differently.

issue	the adult view	young people's view
HIV/AIDS	a moral problem	a practical prevention problem
	a fear to be used to stop unacceptable behaviour	a threat to fun
	brought on by the immoral behaviours of today's youth	unfair, as our parents didn't experience it
alcohol	an everyday substance	helps relaxation and excitement
	something they have learned to handle	important part of social scene
	a phase they went through	proves adult status
sex	something young people (particularly their own children) should delay as long as possible	experiencing new desires and feelings

Thinking about your situation

Think of some other issues that young people in your community may view differently from their parents and elders. Make a list of these, and write down what the parents'/elders' view might be and what the young people's view might be.

issue	the adult view	young people's view
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PRINCIPLE 3: COMMUNICATE EFFECTIVELY

It is important to communicate messages to young people in a style and language that is attractive and accessible to us. This is more likely to capture our attention, interest and motivate us, and so convey the message effectively.

Using the language that young people use often means using words that older people find difficult to accept. However, to address health problems realistically it is important to communicate effectively.

Using young people's language will help to us to relate to the message better, rather than dismiss it as dull, boring and patronising.

Language is always changing and it's important to keep updating our messages. The language we use should be persuasive and involving rather than directing and commanding.

Adults sometimes use language that is offensive to young people, by calling us delinquents, and so on. These words should be avoided.

Young people often use language popular among ourselves, but adjust when we go home. This can make it difficult for adults to understand what is important to us.

Principles in action

These are two different ways of presenting information that may be particularly appealing to young people.

Cartoon



Rap song by Anthony Bonea (Trinidad)

Take heed to the message
cause there is something that you missed
choices are made and
they involve risk

Understand I'm not preaching
but there is something you lacked
it's knowledge, information
and this is a fact

Yo wisdom is granted
to each boy and girl
the truth is realising that we are the world

We're the parents of tomorrow
put your life on track
always keep going forward
and never turn back

You got the power inside
so don't be affected
ignore the peer pressure
and never feel rejected

You are young in the body
and also young in the mind
use it positively
and don't waste time

There are ups and downs
there are rights and wrong
you keep on climbing
and never come down

To all the girls and boys
who are listening and willing
do things with your life
that makes the world worth living

Thinking about your situation

Make a list of some of the words young people in your community often use. What do they mean? Think about how you might incorporate them into the messages you are developing.

To start you off here is a list of Bajun words used by young people in Barbados. Write the equivalent word that young people in your community would use. Then add other words that tend to be used by young people in your community.

Bajun word	meaning	your word
bad	good	
pushing volts	looks good (woman)	
rude boy	looks good (man)	
vexx	angry	
sick	good	
rough	good	
massive	popular	
don	guy who has it all	

PRINCIPLE 4: BE RELEVANT AND CULTURALLY APPROPRIATE

The content of messages needs to be relevant to us as young people, as well as being factually correct and culturally appropriate.

Young people don't like being told what to do, so the way messages are phrased is very important for us. We must avoid ordering other young people around.

The information in our messages must be accurate so that we are able to make informed choices about our health behaviours. Exaggerating the risks is likely to be counterproductive to what we are trying to achieve.

Base the message on what we know to be important to us as young people. For example, we are very often concerned about our appearance and grooming; a message that smoking will make our breath smell bad is more likely to have an impact than telling us that we will die of lung cancer in 30 years time.

As a result of our exposure to a number of influences (including education, mass media and travel), our

perspective on culture may be different from an adult's perspective. So while it is desirable to preserve our cultures and communities, it is also important to recognise that they are changing. Health programmes relevant to us should reflect those changes.

Young people are more likely to take in messages that are presented in a humorous and colourful style. Comic strips and cartoons are especially popular. This cartoon shows one approach to preventing the spread of HIV/AIDS.



Thinking about your situation

Think about what is important to young people in your community. Use this information to form the basis of the messages you are conveying to them. The following list came from a group of young people in the Gambia.

What is important to young people in:

the Gambia	in your community
friendship	
popularity	
employment	
being recognised in society	
money	
being liked and accepted	
self confidence	
attractiveness	
having a goal in life	

PRINCIPLE 5: COMMUNICATE MESSAGES IN APPROPRIATE WAYS

The ways of communicating with young people should be particularly relevant and appealing to us. These may be different from those that appeal to the general population.

For example, we are less likely to read pamphlets. More effective ways to communicate with young people include: t-shirts, comics, magazines, posters, television, key rings, badges, stickers, youth oriented radio programmes, youth gatherings, music, drama, dance, gossip and informal discussion.

In communities where literacy levels are low it is important for us to find ways to communicate messages that don't rely on young people being able to read. Mass media has a powerful influence on our attitudes and behaviours. It may be possible to use this influence in a dynamic and interactive way to promote health issues with other young people.

In developing countries, mass media is often confined to reaching people who live in urban areas. Therefore it is important to look for ways to reach rural young people.

Traditional ways of communicating information that have been part of our cultures for a long time – such as drama, puppets, dance festivals, parades, poetry, storytelling and songs – can be very effective. These can be presented in markets, at bus stops, in school halls, and so on.

Each mode of communication is suited to different messages and to different target groups. Each has its own advantages and disadvantages according to what it is to be used for.

We need to select methods that are simple, easily available and suitable for communicating messages that meet the local needs of young people.



Principles in action

This table shows some different modes of communication and the advantages and disadvantages of each. Think about the modes that would be particularly relevant to young people in your community. Think about what their advantages and disadvantages might be.

Television

advantages

appeals to young people
colourful/flexible
influential/credible
mass audience

disadvantages

expensive
not accessible by everyone
restricted message

Theatre

advantages

appeals to young people
long life
colourful
visual

disadvantages

limited message
can be expensive

Magazine

advantages

long life
detailed information
colourful
low cost
authoritative

disadvantages

not very appealing to
young people
effort to absorb
literacy may be a problem

Poster

advantages

low cost
colourful
visual
appeals to young people

disadvantages

limited message
low impact

Radio

advantages

low cost
appeals to young people
local and friendly
easily absorbed

disadvantages

limited reach
non-visual

T-shirt

advantages

appeals to young people
mass audience
can have a detailed message
entertaining
sociable
popular

disadvantages

limited reach

Thinking about your situation

There are many ways of presenting your messages to young people that might be effective in capturing their attention. Here are some examples from groups of young people around the Commonwealth. Add two examples that might be effective in your community.

In Hong Kong, a group of young people developed a card game which conveyed messages about AIDS transmission and prevention to young people who played the game.

In the British Virgin Islands, young people who had written AIDS prevention messages approached a local disc jockey and asked him to read out the messages in between playing his records.

In Kenya, a group of young people wrote and performed songs and poems about premarital sex, and the dangers of drinking alcohol.

In Zambia, a group of young people conducted role plays with other young people to raise awareness about the use of alcohol and other drugs.

Your examples



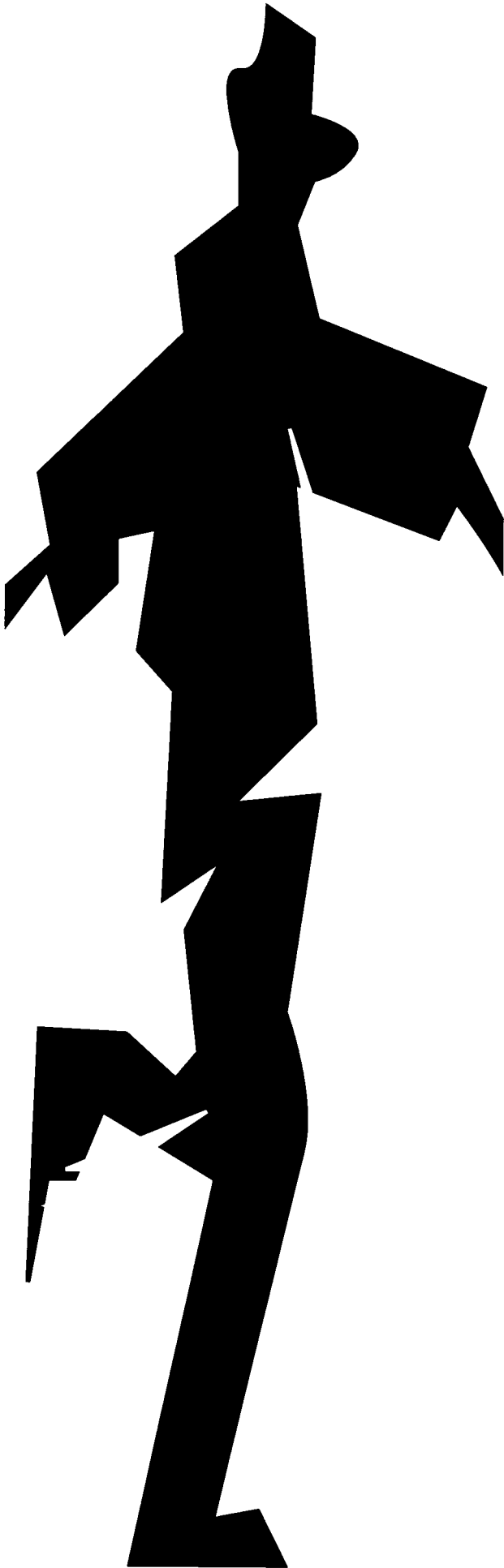
SECTION 3

PUTTING IT ALL

INTO PRACTICE



DEVELOPING OUR MATERIALS



The material which follows is designed to help us take action to put the principles outlined in Section 2 into practice. As a guide on how to use this material, an example is shown using the problem of unwanted pregnancies. There is also a space to fill in our own example as we work through the material.

Flow chart of the process:

This section guides us through the following steps from identifying the problem or issue to be tackled to choosing the time and place to deliver our message. Section 4 will then help us to evaluate our activities.

identify problem/issue to be tackled

identify the target

understand the target

identify the required result

establish the main thought

choose the time and place

pre-test the material

IDENTIFYING THE PROBLEM/ISSUE TO BE TACKLED

This information enables us to identify exactly the problem we are trying to address.

Where are we now?	Unwanted pregnancies	Your example
What is the incidence of the problem?	There is growing concern about the widespread occurrence of unwanted pregnancies in young women.	
What is the level of knowledge and understanding of the problem? (Complete ignorance, partial or confused?)	These are frequently terminated by clandestine abortions.	
What are current attitudes towards the problem? (Scared, indifferent or mild concern.)	Young women may be able to conceive a child without being physically or emotionally ready.	
What are the current behaviour patterns? (There may be several issues to tackle here.)	<p>Childbearing in adolescence involves considerable health risks.</p> <p>Young people's premarital sexual encounters are generally unplanned and sporadic.</p> <p>Young women themselves are fairly worried about the problem, as a pregnancy that is not terminated usually means the end of their education and other opportunities for social advancement.</p> <p>In some cases young women are ostracised by their families when they get pregnant, as having sex and children outside of marriage is unacceptable in their culture. This can lead to depression, and in some cases suicide.</p>	

IDENTIFYING THE TARGET

This section helps us identify who it is we are trying to reach with our message.

Who are we talking to?	Unwanted pregnancies	Your example
Is there a part of the youth population which is particularly at risk?	Young women aged 15 to 19 years who are having unprotected and unplanned sex.	
Are there sub-sections, or is the target similar in knowledge, attitudes and beliefs?	Young men who need to be made aware of their role and responsibility.	

UNDERSTANDING THE TARGET

This section helps us to understand the target group better, not just to identify them.

What do we know about them and the problem/issue that will help us?	Unwanted pregnancies	Your example
How much information do they already have?	Impulsive sexual behaviour and the non-use of contraceptives is often exacerbated by the use of alcohol and other drugs.	
Are they concerned?		
Are sources of help available to them?	Since adolescent sexuality is a taboo subject in many societies, it is difficult for young men and women to ask questions about the risks involved in unprotected sexual activity.	
Is there any data available?		
Do we know about any key influences?	Young people often have an idealised view of sexual relations and feel that using contraceptives is not very romantic.	
	Young men often resist the use of condoms because they feel that they are not manly.	
	Young people can be fairly knowledgeable about the facts related to sexual behaviour, but they just don't plan ahead.	
	Contraceptives are fairly expensive and often difficult to obtain. In some cases there are laws which prevent young people having access to contraceptive advice and family planning services.	



THE RESULT

This section helps us to identify exactly what we want the target group to do as a direct result of our campaign. It should be detailed, concrete and specific.

What do we want them to do?	Unwanted pregnancies	Your example
What is the single, clear objective we want to achieve with the target?	The key task is to get young women and men to understand that unprotected sex can frequently result in pregnancy and that they must always plan ahead so that they can prevent this by using contraceptives.	
Is it to increase knowledge of the facts?		
Is it to create a feeling of personal risk?	This accepts that they are unlikely to stop having sex and that contraceptives offer the best protection against unwanted pregnancies.	
Is it to increase knowledge about safe sex?		
Is it to help them to identify available sources of help?	Another task is to get young women and men to take some responsibility in their roles in unplanned pregnancies and not to resist the use of condoms.	

THE MAIN THOUGHT

This section helps you to identify exactly how you are going to achieve your objective. Again, it should be concrete and specific.

How can we encourage them to do that?

Unwanted pregnancies

Your example

What is the best way to achieve the end result?

By pointing out to them that having unprotected sex is likely to result in pregnancy by promoting the use of contraceptives.

Is it by raising awareness of the problem?

By encouraging young men and women to plan ahead, even if they don't think they will be getting into a risky situation.

Is it by communicating the facts?

Is it by telling the story of someone who has the problem?

By identifying sources of advice and information on family planning and contraception.

Is it by dramatising the dangers of the problem?

In doing this we must recognise that the cost of contraceptives is a major barrier to their use.



CHOOSING THE TIME AND THE PLACE

Getting the message in the right place to be seen and heard by young people will greatly enhance its impact. This section helps to determine where and when the message will be best received by the target group.

What is the most appropriate medium to reach the target group?

Unwanted pregnancies

Your example

Key factors that need to be taken into consideration include:

- how discrete or broad the target group is;
- how complex/detailed the message is;
- whether the message is too sensitive to expose to the general public;
- whether there is a medium particularly relevant to the target group;
- whether the message is best suited to a formal or informal environment, for example, through school education or a message printed on a T-shirt;
- what resources are available.

As the group is broad, an approach will be made to the local radio to run a series of announcements at times known to be popular with young men and women.

A network of young women will also be set up to sell subsidised condoms to their friends and other young women and men.

A poster will be made to be displayed on the back of toilet doors in schools and bars. They will also be displayed at bus stands, village notice boards and other places where young women and men congregate.

A condom carry case will be designed and promoted with the expectation that they will become a fashionable item.

PRE-TESTING

If we have followed all the steps outlined in the previous sections we should be fairly confident that our material will be relevant and meaningful to our target group.

However, it is still advisable to pre-test our material to determine how suitable it is to our target group, and to check that we haven't overlooked any details that might affect the final execution of our strategy.

There are two main groups of people from whom we can get feedback on our materials:

- young people who are part of the target group – they can give us valuable feedback on the language used, the general presentation of the material, the style, colour, how easy the message is to grasp, and so on;
- experts/specialists – they may have particular expertise in the subject area, and can tell us whether the information in our material is accurate and up to date.

For example, before they actually perform their work in front of their target audience, the Twatasha Community Theatre Group in Zambia take their performance to people who may have more specialised knowledge on the subject. These people will then critique their performance and offer advice and alterations. The group invites young people to comment on whether the style of language, dress and conduct are commonly used in their community, and also asks whether there are any common jokes or sayings that can be incorporated into their performance to give it more local relevance.

A FINAL CHECKLIST

Have we clearly identified our target group?

Have we specified exactly what the target group is expected to do?

Is this realistic in view of their current attitudes, knowledge and behaviour?

Have we clearly indicated how the target group will achieve the desired result?

Have we identified what some of the major barriers to them achieving this might be?

Have we indicated what the most suitable modes of communication will be to the target group, given the nature of the message and the resource constraints?

Ideally, the answers to all these questions should be 'yes'.

SECTION 4

TESTING AND

EVALUATING

OUR WORK



WHY EVALUATE?

This is an important part of any project or initiative, as it is our opportunity to examine the effectiveness of our strategy. Testing and evaluating our work ensures that our material does not miss the mark, and is not wasteful or risky. This is important because we do not want to alienate the intended audience or stir up opposition.

Furthermore, careful pre-testing and research of our materials can give solid evidence to present to policy makers and opinion leaders showing that the approach we have taken is sound and not overly controversial. In some cases it will provide us with information to compare with once our project has started.

There are three main reasons for evaluating our work:

To help us plan:

to tell us whether or not the message is reaching the right people at the right time, and if we are achieving what we set out to do. It can also tell us whether and how our strategy should be modified, and what we should do next if our current objectives have been reached. In an area of constant change, it is important to monitor the suitability of the material we are using, as what worked well last year may not be suitable this year.

To learn from our experience:

to evaluate what we have been doing and how well we have been doing it is a rich source of learning for individuals and groups, and helps us to understand new things about the area we are working in and what we are trying to achieve. It also helps us to diagnose the strengths and weaknesses of our work. It helps us to know if we have used our time and resources as well as we could, and if we haven't, what changes we can make.

To meet reporting requirements:

this is important if we have received funding from any outside source, or if we wish to convince policy-makers or opinion leaders about the value of the approach we have taken.

WHAT TO EVALUATE?

In relation to the material/message we have produced:

- was the message seen and heard? Did it communicate the right message?
- what effect did the message have on the attitudes and behaviours of the young people we were trying to reach?
- did the young people do anything as a result of being exposed to our message/material?

In relation to the project overall:

- what were we trying to do?
- what did we do?
- what happened?
- what was successful and what didn't work?
- what do we do next?

HOW TO EVALUATE?

There are three main levels of evaluation:

- process evaluation (what went on) – measures the activities of the strategy, and who it is reaching;
- impact evaluation (what it did) – measures the short term effects of the strategy – whether the group understood the message, how relevant the message was to them, and so on;
- outcome evaluation (what happened as a result) – measures the long term effects of the strategy, and whether we have succeeded in getting the target group to change as a result of our strategy.

We can evaluate our strategy using a variety of methods. We don't necessarily have to undertake a three-month research project! We could make use of any of the following in our evaluation:

- questionnaires handed out to people targeted by our material or project, which asks them for feedback on various aspects of the material or project;
- interviews with individuals or groups who were involved in planning and conducting the strategy, and also those who were targeted by the strategy;
- a review of the strategy – overall comments on the success of each part of the strategy;
- statistics – to provide hard evidence to back up your review;
- focus groups, using selected members of the target group, to discuss various aspects of the material or the issues our material addressed.



RESOURCING AND EXTENDING OUR WORK

Developing effective materials and projects will be limited by the resources available for the task. (And by our imagination!) Resources include human resources (such as knowledge, skills and labour), material resources (such as equipment, paper and postage) and time available.

Some ideas for extending our resources and networks include:

- working with talented local people, for example musicians and composers, who may be prepared to help promote a positive and healthy image to other young people through their work;
- developing networks with similar organisations who are working towards the same goals, so that we can share resources and ideas;
- lobbying to get increased public support for our work, particularly from influential people;
- starting small, gaining some practical experience, and then building upon successes;
- timing activities to coincide with other programmes or already existing programmes that are compatible to our message;
- asking local business to donate specific materials that may be needed, for example, paper and paint;
- looking for the community to provide space free of charge in which to perform drama or puppet theatre, for example, workers associations, church halls, and schools;
- approaching local universities or institutions to help with evaluating the project or activity;
- asking local art schools or colleges to allow their students to help with the project as part of their course of study.

USEFUL CONTACTS

Health Promotion Unit
UNICEF HQ,
UNICEF House, 3 UN Plaza,
New York NY 10017
Telephone: 212 326 7000
Facsimile: 212 326 7336

Adolescent Health Unit
World Health Organisation,
CH1211, Geneva 27, Switzerland,
Telephone: 41 22 791 3361
Facsimile: 41 22 791 4189

Health Education and Health Promotion Unit
World Health Organisation,
CH1211, Geneva 27, Switzerland,
Telephone: 41 22 791 2111
Facsimile: 41 22 791 0746



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2 What do you regard as being the strengths of this publication?

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ISBN 0-85092-421-9