

Meaningful Youth Engagement

The NURHI 2 Experience



Executive Summary

This document shares the NURHI 2 experience in meaningfully engaging young people throughout the project life cycle (research, project design, implementation, monitoring and evaluation) to layer on their unique life planning needs. These includes engaging young people during formative research and strategy design, providing them with meaningful roles as well as mentorship. This youth led, driven and focused integrated interventions, address current challenges facing young people's access to family planning by increasing demand for reproductive health knowledge and services among young people ages 15 - 24 years in Kaduna, Lagos, and Oyo States. It is a guide for the government at all levels and other stakeholders to ensure seamless meaningful youth engagement.

Introduction

In Nigeria, young people between the ages of 10 – 24 constitute about 32.1% of the total population. This number represents the largest group of people in the country and is a number that is at an all-time high of more than 60 million.

This is a motivated and connected generation that wants to and has the ability do more to contribute to the strength of their families, communities and society. They want to be in a position to offer modern and ground-breaking solutions, energetically leading collective growth and stimulating positive change. However, youth voices are often not included in dialogue or decision making, even when the topic of

concern is about youth issues. This may be due to perceptions of inexperience or immaturity or simply not the way the system has been run in the past. Though the value of youth voice has been recognized more recently, there are few examples of meaningful inclusion or guides for how to include that voice that work. This document seeks to demonstrate why youth voice is important and how to include it.

Nigeria Population of Adolescents and Youth

AGE GROUP	2006	Proportion	2010	Proportion	2016	Proportion
10-14	16,135,950	0.11	18,339,362	0.11	22,221,265	0.11
15-19	14,899,419	0.11	16,933,979	0.11	20,518,404	0.11
20-24	13,435,079	0.10	15,269,679	0.10	18,501,820	0.10
TOTAL	44,470,448	0.32	50,543,021	0.32	61,241,489	0.32

Source: National Population Commission and National Bureau of Statistics Estimates

Context

Why youth engagement is important

Meaningful engagement of young people is central to the common vision of achieving the outcomes and targets of the Sustainable Development Goals (SDGs), FP2020 goals, and the Global Strategy for Womens', Childrens' and Adolescents' Health. As a result, the world is moving beyond the recognition and identification of young people solely as beneficiaries and towards engaging them as equal and valuable partners in projects, research, programs and initiatives that are led, co-led, and centered around young people, whereby they are equal partners in decision making with other stakeholders, or young people are consulted and meaningfully engaged in the execution of initiatives led by other stakeholders.

The period of transition from childhood to adulthood requires special attention and protection. Adolescents and young people go through different maturity stages and this could affect their emotional, physical and mental abilities. It is during this period also that their knowledge and rights to health, productivity and life are developed. It is important that for these rights to be fulfilled and that focused investments and opportunities are created for these group of persons by families, communities, government, and other stakeholders so that they can have a strong foundation for all aspects of their life, including their reproductive health plans and actions.

Results from the National Demographic and Health Survey (NDHS) 2013 Report indicate that 27.9% of all girls, ages 15-19, living in urban areas had ever had sex, while 13.9% were still sexually active. As a result, an estimated 23% of young women aged 15-19 years have begun childbearing, of which 17% have had their first child and 5% are pregnant with their first child. The rates of teenage pregnancy are higher for the northern geopolitical zones. In addition, a sizeable youth population between the ages of 15-19 who reside in urban areas are out of school: 25.8% of boys and 33.8% of girls. ^[1]

[1] <https://www.unfpa.org/data/adolescent-youth/NG>

What is meaningful youth engagement?

Meaningful youth engagement is “an inclusive, intentional, mutually-respectful partnership between adolescents, youth, and adults whereby power is shared, respective contributions are valued, and young people’s ideas, perspectives, skills, and strengths are integrated into the design and delivery of programs, strategies, policies, funding mechanisms, and organizations that affect their lives and their communities, countries, and world.” *Global Consensus Statement Meaningful Adolescent & Youth Engagement, 2018*



Youth Engagement in Oyo State, Nigeria

Where young persons are engaged meaningfully, sharing of responsibilities between adults and the young persons are done, their ideas and views are respected, deliberately programmed and budgeted for, programs become more effective in meeting it required goal. It is important that youth-focused programs must have a clear picture of what their youth engagement strategy will look like, the responsibilities and purpose of the youth engagement and the expected outcome. This strategy must be developed by youths with appropriate support by adults.

Nigerian Urban Reproductive Health Initiative (NURHI 2) and Young People

In 2017, an impact analysis was carried out to determine the effect of NURHI’s intervention on adolescents and youth in its implementation cities between the year 2009 and 2014. Result showed that NURHI’s first phase of interventions had a positive result and created a slight shift in awareness and use of family planning methods among young people, even though it was not designed specifically for them. NURHI 2 sought to build on this base of programming and evidence to deliberately program for youth in the second phase.

NURHI 2 integrated adolescents and youth program for ages 15 -24 years, into its project design, known as Life Planning for Adolescents and Youth (LPAY). The broad objective of LPAY is to deliberately and innovatively integrate adolescents and youth programs into its strategic approaches in order to address current barriers to young persons access to reproductive health information and services including family planning, respond to their unique life planning needs and thereby increase demand for reproductive health knowledge and services in Kaduna, Lagos and Oyo states.

Figure 1: Integration Structure of LPAY into existing NURHI 2 Program



So, how did NURHI 2 LPAY meaningfully engage young persons

NURHI2’s LPAY ensures that Adolescent and Youth Reproductive Health (AYRH) programs/activities are designed and implemented by young people, for young people. The team engages in extensive and intensive consultation with adolescents and youth in all stages of the program - from the formative research, design and implementation, to research, monitoring and evaluation processes.

Below are the ways that the project meaningfully engaged young persons.

1. Youth Engagement from the Beginning

Aim: Develop an LPAY strategy to deeply understand the needs of youth and jointly determine objectives, strategies and messaging.

a. Formative research:

To better understand the current situation of adolescents and youth sexual reproductive health, NURHI 2 carried out a literature review, reviewed existing data and conducted secondary analysis. The project also used an innovative Net-mapping approach which is social network analysis that uses participatory interviews and mapping to help people understand, visualize, discuss, and improve situations in which many different actors (government, religious/community leaders, family and friends, media, celebrities and the private sector etc.) influence outcomes. Informal focus group discussions were held during the net-mapping sessions to ascertain activities that appeal to the various cadres of young people and their primary influencers in the implementing states as well as current supporters and funders of such activities. The program also engaged in study tours to youth-focused/youth-led organizations to determine the level of knowledge and work done. At the center of these qualitative researches were young people themselves.

During the formative research, young people chose the name “life planning” as opposed to “family planning” because, according to them, they are planning not just a family, but their entire lives and that reproductive health decisions are life decisions made every day.

b. LPAY Strategy Design

The LPAY strategy design was driven and led by young people. This was a key step in knowing what young people want and how they want their messages designed. Data from the formative research was used to understand the policy environment on Adolescent and Youth Sexual Reproductive Health (AYSRH). The process included a five-day Human Centered Design - informed workshop that aimed to bring together perceptions, insights around youth needs and appropriate ways to resolve issues surrounding young people. Participants included young people and youth led/focused organization/networks from intervention States and relevant government ministries, department and agencies (Federal Ministries of Health, Education Women Affairs & Social Development, Youth and Sport, and National Youth Service Corps).

The youth-led strategy builds on current local and global best practices in youth programming which include high levels of youth participation and decision-making within the process.

2. Engagement with Relevant Stakeholders

Aim: Understand the policy environment for AYSRH and create a supportive environment for meaningful participation of Adolescents and Youth in their health and well-being by ensuring that their needs and views are fully considered in all life planning issues by launching a Life Planning Ambassadors program.

a. State and Federal Ministries of Health

Strategic engagement meetings were held with the Federal Ministry of Health, Department of Family Health, which is responsible for overseeing adolescents and young person's health in Nigeria. At the State level, LPAY engaged with the State Ministry of Health as well as the State Primary Health Care Development Agency - Adolescent Health Desk Officer (AHDO) who serves as the interface between the LPAY program and the government. Through this partnership, the team supported the state government to engage vibrant, young people as life planning ambassadors (young people [male and female] between 15 and 35 years) residing in the intervention states and who are able to speak boldly on the priorities of young people in the state. Thirty Life Planning Ambassadors per state will to shine the spotlight on the unique life planning needs of young people and bridge the gap between the state and their peers.

b. Youth Focused Social Networks

NURHI 2 partnered with social networks as a platform to reach both in- and out-of-school young persons through the associations they belong to. Working with these networks helped to reach young people with correct information on reproductive health, providing referral to youth-friendly RH services and promoting social networks skills. Examples of such networks include: Student Associations, National Youth Service Corps, Community Groups, Youth Groups, International Youth Alliance on Family Planning (IYAFFP), African Youth and Adolescent Network on Population and Development (AfriYAN), Society for Adolescents and Young Persons in Nigeria (SAYPIN), among others.

3. Increase Demand for AYSRH Information and Services including Life Planning Skills Engagement with Relevant Stakeholders

Aim: Use of communication to increase adequate and accurate knowledge of contraceptive use, promote sexual responsibility and life planning among young people and trigger discussions about young people at both the household and community levels.

a. Framing Social Behavior Change (SBC) materials, print and electronic media

NURHI 2 used an integrated communication strategy comprising social mobilization, media campaigns and entertainment education. In order to adapt SBC for youth's unique needs, young people participated at every step of the process. They reviewed materials, creating new messages that were used in SBC materials such as leaflets, pens, t-shirts, note pads, face caps, wrist bands, badges/pins, information cards, bags, book markers, hijabs, and danglers. They also actively involved in reviewing the radio drama series and spots scripts and in pretesting, adding the youth flavor.



Youth specific social and behavioral change materials developed

b. Social Mobilization

NURHI 2 intentionally integrated young persons into the existing sustainable state social mobilization programs structures within the communities in Kaduna, Lagos and Oyo States. All social mobilizers were trained on youth focused messaging and activities using the Social Mobilization curriculum for LPAY (Neighborhood campaigns, community dialogue and key life events) to trigger life planning conversations both at the household and community levels. This helped to create awareness, basic knowledge about LPAY and address ideational factors among youths. Where the social mobilizers team did not have enough representation of young people, additional young persons were included.

c. Use of Social Media Platforms

To reach young people, the power of social media can never be overemphasized. During a qualitative study using Net-mapping², NURHI 2 found that young people in intervention States preferred to learn about sexual and reproductive health and rights from their parents. However, cultural and religious norms inhibit free discussion or communication between them; leaving young people to learn from friends and through social media.

NURHI 2 and DevComs (media collaborating agency) recruited and trained over one hundred and twenty 120 young bloggers and social media influencers (ages 18 to 30) to create conversations during the #FPFRiday live chat on Twitter. During each conversation, they are asked to like, retweet, reply, and ask questions to engage with other Twitter users and create a multiplier effect. In order to ensure the

influencers were providing the best information, NURHI 2 gave them a short course in life and family planning and continues to share information with them via a WhatsApp group.

A discussion twitter platform where experts come together to answer family planning questions that are then shared tagged #FPFriday was established. The strategy brought immediate results. The first #FPFriday reached 69,357 Twitter users and made an impression on 495,960 people. Four weeks later, they reached 689,582 accounts and made an impression on nearly 6.3 million people. Twenty million people have been reached since the program began.

Tweet 1: @Ezeikeki (May 4, 2019) - 608.4k impressions. Text: "Get questions about pregnancy prevention or need advice about family planning? Monye&Banana connect is here for you! Call 55559 from Monday to Friday, 8am to 8pm for FREE and Get Quick, Detailed Medical Advice and Answers to your questions from medical Experts. #Call55559"

Tweet 2: @Ezeikeki (May 5, 2019) - 332k impressions. Text: "Do you have any question about family planning or need pregnancy prevention tips? Call 55559 for FREE and get satisfying answers from medical experts. The phone line opens from Monday to Friday 8am-8pm. It's available to only Airtel, MTN and Inmobile subscribers. #Call55559"

Tweet 3: @Ho_keyy (May 4, 2019) - 123.1k impressions. Text: "Life is GOOD @Ho_keyy #Ezeikeki Get questions about pregnancy prevention or need advice about family planning? Monye&Banana connect is here for you! Call 55..."

Tweet 4: @lalejames49 (May 17, 2019) - 107.7k impressions. Text: "It does not matter how old you are, you have a right to ask questions about your sexual and reproduction health family planning. Reach out to us at @GetItTogetherNG @DevComs and we will have your questions answered. Remember it's better to be safe than to be sorry. #FPFriday"

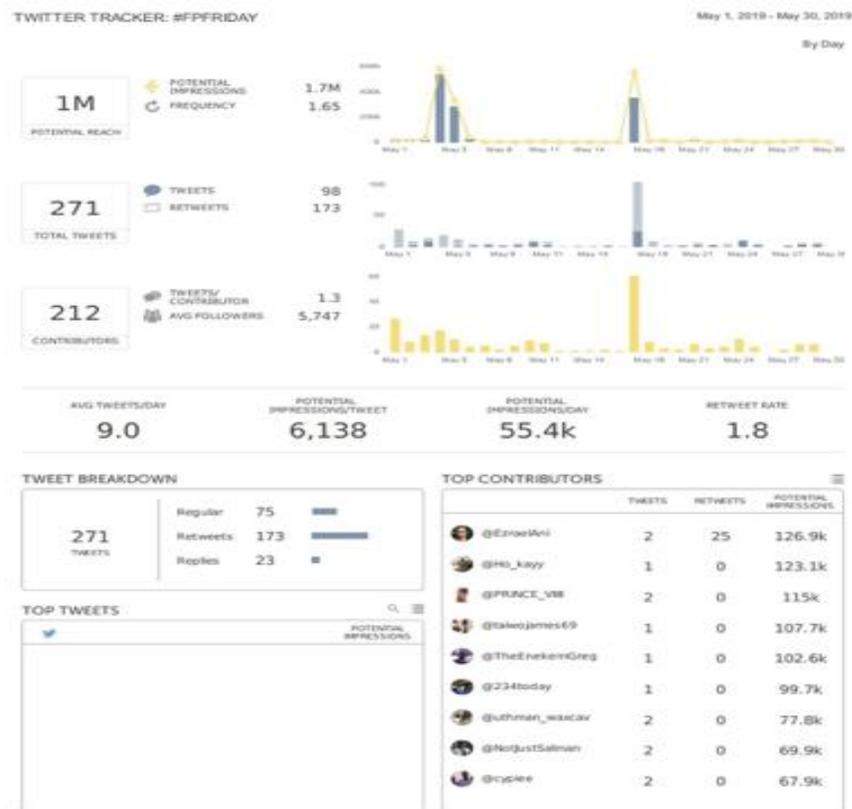
Analytics:

TOP HASHTAGS

HASHTAG	TWEETS	CONTRIBUTORS	POTENTIAL IMPRESSIONS
#Call55559	27	19	940.5k
#FPFriday	113	66	567.4k
#askawayhealth	19	19	39.1k
#influencers	3	3	20.1k
#bloggers	3	3	20.1k

TOP URLS

URL	TWEETS	CONTRIBUTORS	POTENTIAL IMPRESSIONS
twitter.com/web...	17	17	608.4k
twitter.com/web...	10	10	332k
twitter.com/web...	1	1	107.7k
twitter.com/web...	1	1	99.7k
twitter.com/web...	1	1	61.3k



#FPFriday trends and increased discussion on life planning for adolescents and youth

4. Provide young people with meaningful roles

Aim: Serve as an interface between the State government structures and young people to ensure that the priorities of their peers are reflected in state programs through relevant state structures (State Technical Working Group on Adolescent Health and Development, Advocacy Working Groups, SBCC Committees, Quality Improvement Teams, etc.)

Youth roles vary depending on the plan, involvement and interest. However, it is essential that young people are valued, empowered, and afforded an opportunity to contribute in meaningful ways. Where young people are involved in advocacy efforts it empowers them by letting them choose topics, design campaigns, conduct outreach activities, and plan events. NURHI 2 ensure that young people have space to freely express themselves and that decision makers within the organization will utilize their input. Creating a feedback and learning loop will allow continuous program modification based on youth input.

a. Sustainable State-based Platforms

Young people who champion youth focused activities especially about women and children were co-opted into the State Technical Working Group on Adolescent Health and Development, Advocacy Core Groups and Interfaith Forums as well as the state's FP/CS Technical Working Group to help drive and sustain the life planning agenda in their respective states. For example, In the development the of the Lagos state Family Planning Costed Implementation Plan 2019-2023, more youth specific/focused interventions in all of the thematic areas were included compared to 2016 to 2018 CIP. One key change was a shift in focus from Youth Friendly Health Service Centers to Youth friendly health services at the PHC level. Importantly, young people were not just co-opted into the Advocacy Core Groups as members only but are also assuming leadership positions to drive advocacy with relevant stakeholders on AYSRH issues in the states.

b. Social Networking

The project promoted social networks for an all-inclusive programming, LPAY partnered with social networks which presented a great opportunity or platform to inform and engage in- and out-of-school young people. They have friends within this network who influence them directly or indirectly and the leadership of these networks are committed to ensuring that members receive new update that can help members see them as functional and highly interested in their welfare. Working with different social networks – both within schools and with formal and informal vocational training outfits, including associations that both in- and out-of-school youths belong to – to provide information to young people on reproductive health and also use this platform to provide information on locations that provide youth-friendly RH services. Religious institutions are not left of these social networks as church youth meetings and Islamic youth gatherings are utilized to discuss life planning needs of young people and access to services.

5. Life Planning skills and mentorship programs

Aim: Strengthening the capacity of young people to take up roles of integrating AYSRH/LPAY into various platforms. NURHI 2 Life Planning Ambassadors are trained by experts, equipped with appropriate skills to take up such roles.

a. Empowering and Strengthening Youth Confidence: While empowerment and freedom of expression is an important factor of any youth engagement effort, it is important that these young people are provided with and supported with the necessary skills and platforms they need to succeed. These support systems may include training, mentorship, facilitation, coordination, and even protection. However, there must be a fine line between empowerment and support: too much support stifles and too little can set young people up to fail.

o Building Life Planning for Adolescents and Youth (LPAY) Ambassadors: NURHI 2 LPAY supported intervention States to engage young people as life planning ambassadors. Life planning ambassadors are young people (male and female) between the ages of 15 to 30 years residing in all the NURHI 2 and TCI Intervention States who are able to speak to the priorities of young people in the State they represent. 30 Life Planning Ambassadors were selected per state to serve as interface between the State and young

people to ensure that the priorities of their peers are reflected in State thereby increasing visibility and voice on LPAY.

o WhatsApp Mentorship Group:

NURHI 2 identified and created WhatsApp platforms to step down knowledge and skills on LPAY to peers and others. Every Thursday, there are WhatsApp sessions are geared towards building the capacity of young persons across the country with increased knowledge and skills on health and development; provide a mutually beneficial platform to engage, learn and share experiences; raise new generation of family/life planning leaders through knowledge transfer.

Currently, there are about 171 participants (LPAY Ambassadors, Youth led/focused organizations representatives, Adolescents Health Desk officers and the LPAY team) cutting across states including the Federal Capital Territory, Abuja on the WhatsApp Platform and who actively participate. Various topics ranging from knowledge management, health, social behavior change, advocacy and other life building skills are identified and distributed among experts in the field including CCP staff. These presenters are assigned topics and a date that they will take the group. The sessions usually run for an hour with 30 minutes dedicated for the learning while the other 30 minutes for questions and answers.

The platform provides one-on-one virtual mentorship opportunity for young people to discuss the challenges they face in their professional lives with mentors. It also equips young people with real-world knowledge, skills, and resources to lead and live healthy reproductive lives as well as to grow and thrive in their careers and provides intergenerational capacity transfer, LPAY team providing TA to older staff members on technology. While adults take a strong facilitation and coordination role, young people conduct some of the training themselves and help shape the sessions.



LPAY Ambassadors in Oyo State during a Youth Forum



Life Planning Ambassadors in Kaduna State



Life Planning Ambassadors in Lagos State at capacity building workshop

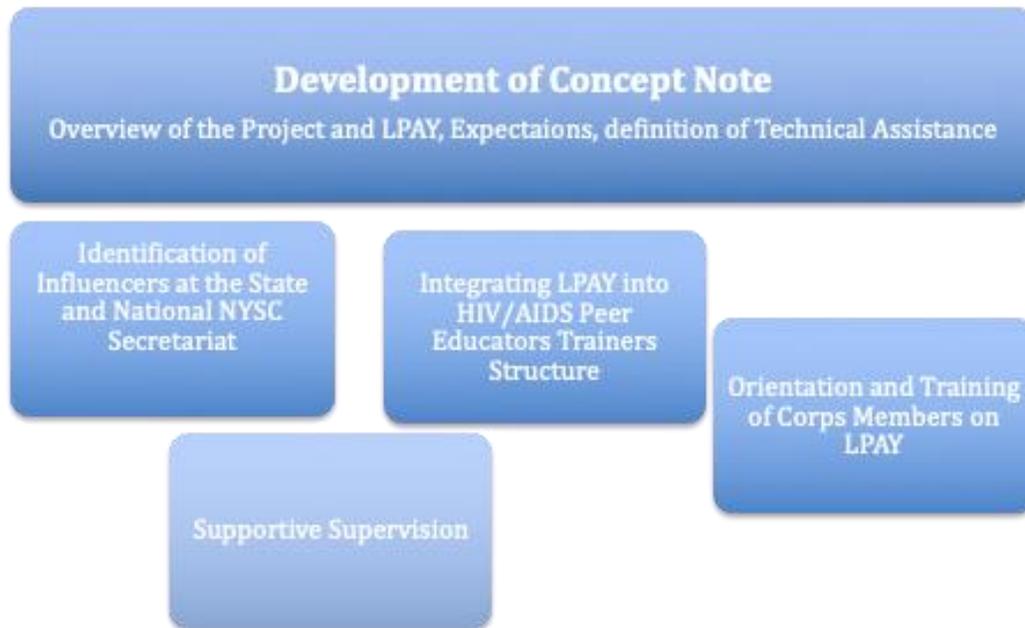


LPAY Ambassador discussing FP with fellow young people on FP

b. Engagement with National Youth Service Corps (NYSC)

NURHI 2 Strategic Partnership with NYSC: The National Youth Service Corps (NYSC) is a scheme set up by the Nigerian government to involve Nigerian graduates in a one-year mandatory service to promote nation building, development, foster unity among Nigerians, and service to the nation.

The LPAY team is collaborating with NYSC to integrate LPAY into existing HIV/AIDS Core Peer Educators Trainers (C-PET) structure in the three (3) intervention States.



Currently, NURHI 2 has trained 754 volunteers as peer educators on LPAY with 19,317 corps members sensitized about reproductive health and life building skills, trained NYS corps members to conduct community sensitization as well as adopt secondary schools where they train at least 40 secondary school students and trained Master Trainers' on LPAY integration into NYSC C-PET curriculum.

To promote sustainability, NURHI 2 is increasing its advocacy efforts to the relevant government structures in charge of the National Youth Service to ensure LPAY is Integration into NYSC Orientation program and C-PET training at national level

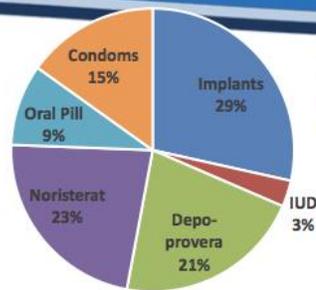


NURHI 2 engagement with NYSC in Oyo State, Nigeria

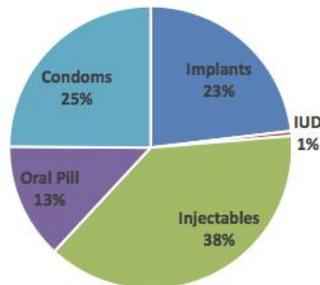
Results

With meaningful youth engagement at the center of NURHI 2's interventions, young people (LPAY ambassadors) have been successfully trained and co-opted into sustained structures such as Advocacy Core Group, Interfaith Forum, Budget Tracking Team, Media Forum, and Quality Improvement Team in the three intervention States to drive and lead AYSRH information and service prioritization and implementation in these structures. In addition to creating visibility to the unique SRH needs of young people, this has contributed to family planning knowledge and service uptake among young people in the intervention states. Below shows the method mix among young people between October 2018 and March 2019 in our three intervention states, obtained from the state managed, Health Management Information System (HMIS) platform.

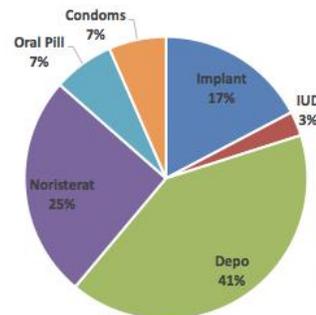
- **Over 10, 000 AYs** received FP methods in 197 NURHI2 sites in 6 months
- Lagos has the highest uptake of condom (1 in 4) among AYs
- At least 1 in 5 AYs are using Implant or IUD across the project states



Kaduna Method mix (Oct 2018 – March 2019)



Lagos Method mix (Oct 2018 – March 2019)



Oyo Method mix (Oct 2018 – March 2019)

Conclusion

Youth are one of the greatest assets that any nation can have. Not only are they legitimately regarded as the future leaders, they are, potentially and actually the greatest investment for a country's development (Federal Republic of Nigeria, 1999). They serve as a good measure of the extent to which a country can reproduce as well as sustain itself. The extent of their vitality, responsible conduct, engagement, and roles in society is positively correlated with the development of their country.

Therefore, it is important to strategically create opportunities to meaningfully engage young people in positive health behaviours and sustainable development by providing opportunities for young people's management and direction for their engagement with national, regional and global programmes.

There is a dire need for government at all levels to design health and FP solutions with young people rather than for them. Additionally, the older generation needs to adjust to trusting young people to make, influence, and contribute to decisions affecting their health even as they hold their hands.

In planning for programs involving youth, it is important that young people and adults create an environment where power is shared, and youth perspectives are valued. Building this type of youth-friendly space in which young people are deeply involved in various organizational programs and processes will guard against minimum and help ensure a meaningful experience that benefits all involved.

[1] <https://www.unfpa.org/data/adolescent-youth/NG>