

A Review of Adolescent Gender and Sexual and Reproductive Health Projects: Findings and Recommendations



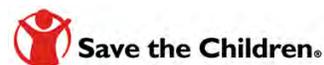
A report for:

GREAT: Gender Roles, Equality
and Transformations Project

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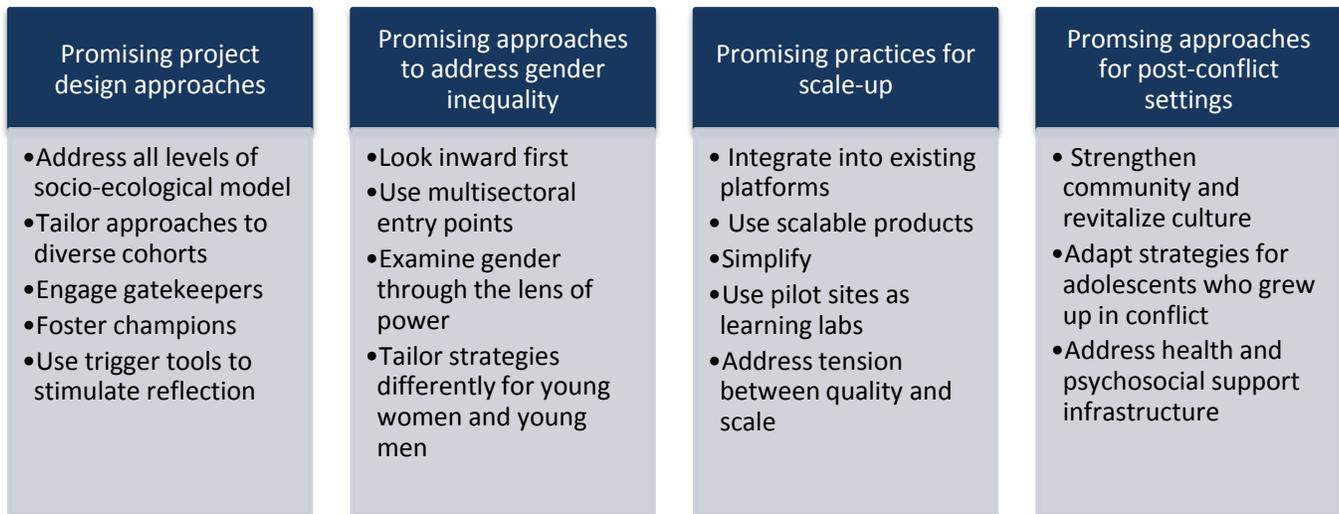
Website: www.irh.org

Executive Summary

The *Gender Roles, Equality, and Transformations (GREAT)* project, led by the Institute of Reproductive Health at Georgetown University in collaboration with Pathfinder International and Save the Children, aims to foster more equitable gender norms and improve sexual and reproductive health (SRH) among adolescents 10-19. During the first phase of *GREAT* (2010–2011), the project partners conducted formative research that will inform the development of an innovative, contextually relevant, and effective set of interventions to improve gender equality and SRH among adolescents. As part of the formative research phase, *GREAT* conducted a review of relevant projects to identify promising strategies to transform gender norms and improve health outcomes with potential for adaptation and scale-up in Northern Uganda. This report summarizes the project review process and the findings and recommendations for the *GREAT* project and other projects interested in addressing these topics among adolescents.

The review of projects used an iterative process to identify relevant projects, learn more through key informant interviews and program documents, assess the projects, and synthesize the findings. The findings presented in this report can be summarized in four categories as depicted in Figure 1.

Figure 1: Summary of Key Project Review Findings



The project review brought to light important considerations for the design and implementation of Phase II of *GREAT* and highlighted gaps in knowledge and project learning. More operations research is needed to understand the most effective approaches to engaging adolescents, including very young adolescents aged 10–14 (VYAs), in forming and transforming gender norms and how to take those approaches to scale.

1. Introduction

The *GREAT* project, which aims to form and transform gender norms among adolescents (10–19), is implemented in two phases over a five-year period in Northern Uganda. Phase I (2010–2011) aimed to identify opportunities to promote the formation of gender equitable norms and attitudes among adolescents and the significant adults in their lives. To this end, the project partners conducted in-depth ethnographic research and a review of relevant projects. The project review, summarized in this document, explored projects that included adolescents as a key target population and addressed SRH and gender inequality, including gender-based violence (GBV), with a particular emphasis on post-conflict settings. The project review sought to identify innovative and effective interventions, lessons learned, and scalable approaches that could be incorporated into the design of the *GREAT* pilot intervention and scaled up during Phase II of the project.

2. Project Review Methodology

The *GREAT* project review included three iterative phases: initial project identification; in-depth exploration of projects; and analysis, validation, and synthesis of key findings.

2.1 Initial project identification

The project review team used multiple channels to identify relevant projects, including web searches, existing literature reviews,¹ recommendations from the *GREAT* project's Northern Uganda-based Technical Advisory Group (TAG), and 27 key informant interviews. As projects were identified, the team added them to a matrix that organized project information according to implementing organization, location, target population, main outcomes, key strategies, and lessons learned. By the end of the identification process, 61 projects had been identified and assessed (Appendix 1).

2.2 Project exploration and analysis

The team relied on project documents and key informant interviews with people well acquainted with the identified projects to gather implementation details and lessons learned from project implementation. The *GREAT* team interviewed 27 implementers and experts in the areas of gender and adolescent sexual and reproductive health (ASRH) based in Uganda (14) and internationally (13) (Appendix 2). The key informants were identified through a participatory process with project partners and *GREAT*'s TAG. A structured interview guide was used to elicit information on projects with which the informant was involved and to identify additional projects for the review.

Box 1: A Note on Terminology

Program or project?

“Program” refers to a long-term effort with multiple components, whereas “project” refers to time-bound efforts to carry out a specific set of activities to achieve a specific change or impact. Due to the time-bound nature of most efforts identified in the review, this report uses the term “project,” except when referring to long-term (longer than five years), multi-component efforts.

Adolescents, youth, or young people?

The World Health Organizations defines adolescents as 10–19 years old, youth as 15–24, and young people as 10–24. The *GREAT* project targets 10–19 year olds so the term “adolescents” is used throughout this report.

In addition, for each identified project, the team conducted online searches for published documents, including journal articles, project briefs, and evaluation reports. Using information gathered in these publications and the key informant interviews, all the identified projects were assessed on the effectiveness of effort, the potential for scale-up, and the relevance to *GREAT*. The process for assessing the projects on these three aspects is described in Box 2.

Box 2: Description of Project Assessment on Effectiveness, Scalability, and Relevance

Effectiveness: For projects with a published evaluation in either peer reviewed or grey literature, the team assessed overall effectiveness of the project. Projects judged more effective—those which had more rigorous evaluation designs and also sought to effect behavior and/or attitude change—were used to identify better project practices. See Appendix 3 for criteria and additional explanation.

Potential to scale: The potential for scaling-up projects or specific project components was assessed using a set of key considerations developed by the *GREAT* project partners based on the ExpandNet Scale-up Framework, including: the resources and time required to implement the project; the level of complexity of the project; and whether the project developed tools, curricula, or other resources that could be used at scale. Projects identified as potentially scalable or projects that had gone to scale were examined with an eye to extracting lessons and recommendations to enhance scalability.

Relevance to *GREAT*: In order to look more closely at the subset of projects that are most relevant to *GREAT*, the team placed each project into one of four categories:

- **Highly relevant to *GREAT*:** Projects that are implemented in Northern Uganda or other post-conflict settings; explicitly address SRH or gender inequality, including GBV; and have project components with the potential to be scaled up.
- **Relevant to *GREAT*:** Projects that explicitly address SRH or gender inequality, including GBV; are implemented in any context; and have project components with the potential to go to scale.
- **Relevant, but questions around scalability:** Projects that address SRH or gender inequality, including GBV, but the team has questions about whether project components could be scaled up.
- **Less relevant to *GREAT*:** Projects that do not explicitly address SRH or gender inequality.

In the course of identifying projects, the team also came across several relevant tools, curricula, and guides that were related to the projects identified or that key informants recommended. When a tool was recommended by a project evaluation or a key informant, the project review team added it to a list with a brief description for possible later use by *GREAT* (Appendix 4).

2.3 Validation and synthesis

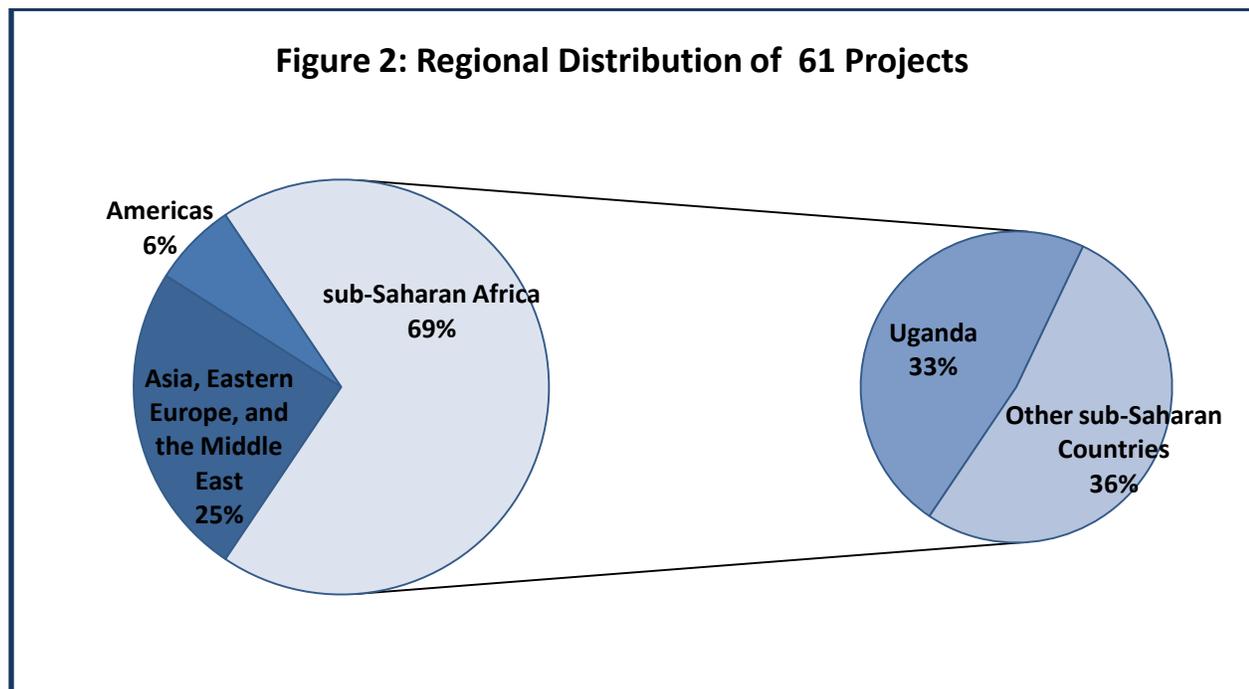
The team reviewed each project in the matrix, asked key questions for further exploration, identified particularly effective or innovative strategies, and systematically noted lessons learned that emerged across projects. The team also reviewed the detailed notes from each key informant interview, drawing out recommendations from informant experiences, noting where recommendations were repeated across interviews, and triangulating responses with the findings from the project review.

2.4 Limitations of the project review

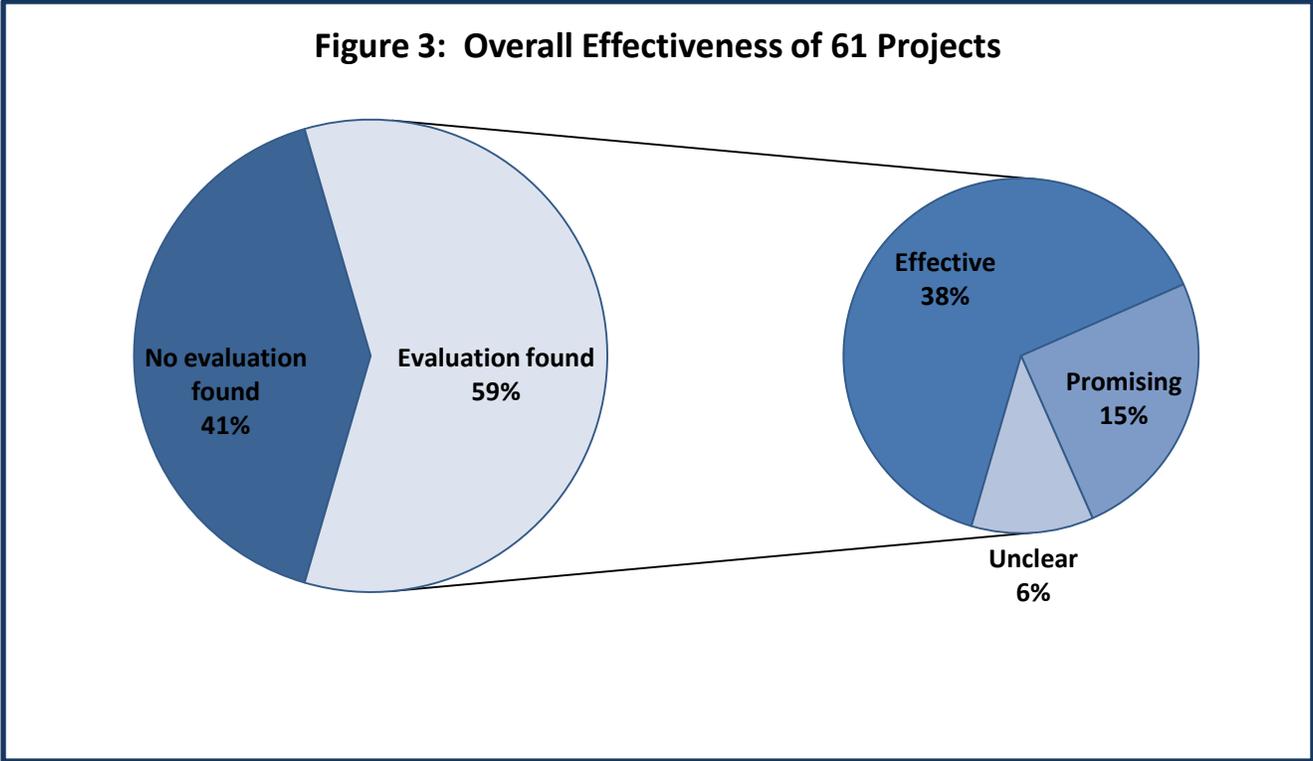
The project review is intended to inform the design of a scalable project that addresses ASRH and gender inequality in Northern Uganda. The methodology was selected with this purpose in mind. The project review is not a comprehensive or systematic review of all adolescent SRH and gender projects. The projects identified in the review are likely to be better resourced, larger, and more well known than other projects addressing similar issues. The sample is, by design, biased toward projects that address both SRH and gender inequality among adolescents (rather than one or the other) and projects implemented in contexts that may be relevant to Northern Uganda. In addition, the assessment of project effectiveness, scalability, and relevance to *GREAT* relied on subjective determination by individual members of the project review team using the set of criteria described in Box 2. This assessment is based on the information available to the team, which, in many cases, is quite limited and may not represent the entirety of the project or its accomplishments.

3. Overview of Projects Identified

The *GREAT* project review identified 61 relevant projects. Of the 61 projects, 42 (69%) were implemented in sub-Saharan Africa, including 20 (33%) in Uganda; 15 (25%) in Asia, Eastern Europe, and the Middle East; and 4 (6%) in the Americas (see Figure 2).



The project review team found published evaluations (in either peer reviewed or grey literature) for 36 (59%) of the projects. Of these, 23 (38%) are classified by the project team as effective, 9 (15%) as promising, and 4 (6%) as unclear because the methodology of the evaluation is either not clearly described or weak (Figure 3).



Using the classification scheme for relevance to *GREAT* described in Box 2, the project review team determined that nine of the 61 projects are highly relevant to *GREAT*; 29 are relevant; 18 are relevant, but with questions around scalability; and 5 are less relevant (Box 3).

While nearly all the projects reviewed employ several complementary strategies, the project review team used program documents and key informant interviews to identify each project’s primary strategy (Figure 4). The most common project strategy is facilitated small group education, dialogue, and reflection using a curriculum or guide. This strategy emerged as the primary strategy in 26 of the 61 projects and as a secondary strategy in at least 13 additional projects. The small group education, reflection, and dialogue approaches vary by project. For example, most projects use same-sex small groups of adolescents and some projects also divide small groups by age or life stage (e.g., separate small groups for VYAs, older adolescents, and young mothers).

Box 3: Relevance to GREAT

Highly relevant: 9

Relevant: 29

Relevant, but with questions around scalability: 18

Less relevant: 5

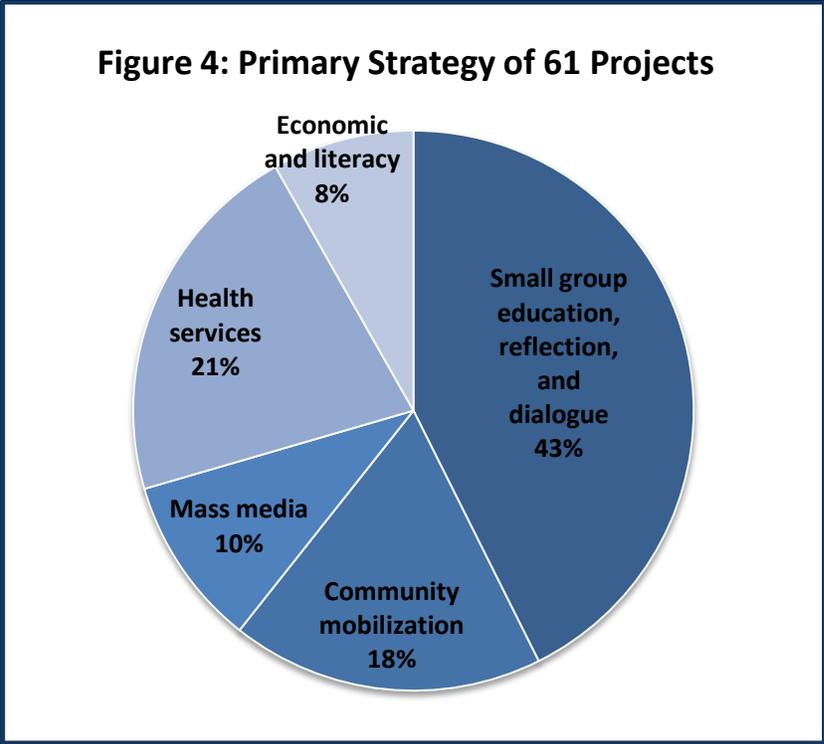
The length of time and frequency of small group meetings also vary substantially, ranging from 225 sessions over the course of a year in the *Delaying Age at Marriage in Rural Maharashtra* project to about 16 sessions over the course of four months in the *DEAL* project. Most of the group education curricula include key life skills, self-esteem, communication, and basic SRH information. Some include a strong emphasis on gender and relationships, with reflection and dialogue as key components (e.g., *Program H*), while others focus more on SRH knowledge and skills (e.g., *Women and Girls Empowerment Project*).

Improving access to and quality of SRH and GBV services is the second most common primary project strategy. Thirteen of the 61 projects focused on interventions such as youth-friendly services (YFS), community-based service provision, and peer education to improve service utilization among adolescents (e.g., *African Youth Alliance* in Botswana, Ghana, Tanzania, and Uganda, *Promoting Safer Choices for Adolescents* in Uganda, and the *Adolescent Reproductive Health* project in Kenya).

Among the 61 projects, 11 used community mobilization as their primary strategy. Community mobilization includes efforts to engage religious or community leaders, participatory or street theater, training of community champions and role models, and community meetings or dialogues.

Mass media emerged as the primary strategy in six of the projects reviewed. This category includes television and radio dramas or public service announcements as well as print media, such as comic books, informational brochures, and newspapers. Projects with a strong mass media component often include additional interpersonal communication interventions, such as peer education and small group reflection and dialogue, to complement and support the mass media.

Finally, five projects used economic empowerment or literacy training as their primary strategy. These projects make use of interventions such as savings and loans groups or vocational training as platforms to address SRH and gender inequality.



4. Findings from the Project Review

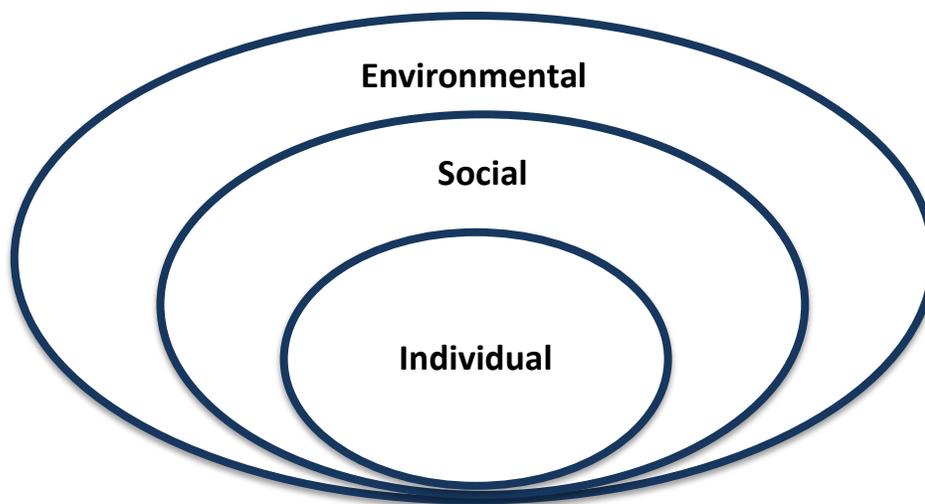
Using all 61 projects and 27 key informant interviews as the basis for analysis, the project review team synthesized the findings across three categories: promising project design approaches, promising approaches to address gender inequality in adolescent projects, and promising practices for scale-up. In addition to this analysis, the project review used the nine highly relevant projects as the basis for a more in-depth analysis to identify promising approaches for post-conflict settings, which is the fourth category of findings described below.

4.1 Promising Project Design Approaches

Design projects with interventions to address all levels of the socio-ecological model

A key design feature of the effective projects in the review is that they use synergistic interventions to explicitly target the determinants of poor health, gender inequality, or violence at the individual, social, and environmental levels (Figure 5). These projects apply complementary, yet distinct interventions in a manner that ensures interconnectedness and synergies. For example, South Africa's successful *Soul City* program uses television serial dramas to foster improved attitudes and behaviors at the social level while relying on peer education, listening clubs, and print media to foster changes at the individual level. *Soul City's* interventions also provoke advocacy efforts and support changes in public policy and service infrastructure at the environmental level. Other projects, such as the *Western Balkan Gender-Based Violence Prevention Initiative*, combine small group and peer-to-peer dialogue with community engagement to reach key stakeholders (e.g., parents, community leaders) and advocacy for changes in policies. By addressing all levels of the socio-ecological model, projects catalyze normative change and ensure that the supportive policies and mechanisms are in place to sustain that change after the life of the project.

Figure 5: Socio-ecological model



Tailor project approaches to different cohorts of young people

Young people are not a homogenous group; rather, they differ by age, sex, life stage, education, and culture among a number of other characteristics. Effective projects have a nuanced understanding of the young people they aim to work with and tailor the intervention approaches accordingly. Key informants further recommend that projects either select one cohort, such as VYAs (e.g., Choices), or develop tailored approaches to simultaneously address several distinct cohorts. The *DEAL* program, for example, tailors small group education and dialogue to VYAs, older adolescents, young mothers, and the parents of adolescents. The *PRACHAR* program also tailors the SRH and life skills curriculum to younger and older adolescents as well as adding a home visit component to reach young married women who have limited mobility in northern India. It is also critical to involve adolescents and youth from projects' target populations in project design, implementation, and monitoring to ensure that interventions are tailored appropriately.

Meaningfully engage multiple stakeholders and gatekeepers

Adolescents, perhaps more than any other cohort, are rarely able to make and act on decisions about their lives without support and consent from parents, partners, teachers, religious or community leaders, and others. In addition, to shift norms around gender and sexuality, change must go beyond the individual to the community and society level. Accordingly, many projects identified in the review include components that aim to meaningfully engage gatekeepers and stakeholders to foster changes in community norms and practices. The projects adopted different approaches. Some, like the *DEAL* project, engage the parents of adolescents through small group education with a tailored curriculum. Others, such as the *First Time Parents* project in India, implement specific community outreach activities that engage mothers-in-law, community elders, and other key decision makers in the lives of young couples. The *Be a Man Campaign* implemented by Young Empowered and Healthy (YEAH) Uganda, also engaged key opinion leaders such as religious officials as spokespeople to complement the mass media campaign and support normative change. Other projects, such as *Wayo*, which was implemented in Northern Uganda, capitalized on the traditional role of the trusted paternal aunt (the *wayo*) as a provider of advice on puberty, sexuality, and relationships to adolescent girls. *Wayos* were supported to become positive mentors to young women and offer accurate information and counseling as well as encourage reflection on the factors contributing to HIV-related vulnerability among young women. The project built community support by working through traditional cultural structures and by engaging the appropriate gatekeepers.

Foster role models and capitalize on champions

Key informants highlighted the essential function that role models and champions play in improving project outcomes and sustaining change after a project ends.

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Valorisant (DV) approach, which was applied in Burundi, identifies men who have demonstrated gender equitable and non-violent behaviors and supports these men to become public champions against GBV. The

men speak in public gatherings and tell their stories of change. In Malawi, the *Male Motivator* project engaged men that are married to adolescents and have a strong rapport within the community to champion family planning and healthy sexual and reproductive practices. These male motivators received training around SRH and reflected on gender norms and then led community and small group discussions on these topics. In addition, the motivators are encouraged to adopt more gender equitable behaviors and to be role models to others in their communities.

Use triggers to stimulate dialogue and reflection

Program reviews and published evaluations of programs that address gender inequality have demonstrated that fostering reflection and dialogue on prevailing norms and the possibilities for change can catalyze shifts in individual attitudes and behaviors.² Acting on this evidence base, many of the projects identified in the review rely on facilitator-led activities or radio/television dramas to stimulate dialogue and reflection. Other projects, such as *Entre Nos* in Brazil, use radio and television programming complemented by print media, comics, short stories, or other creative triggers to encourage dialogue. Two of the projects—*African Transformation* and *Through our Eyes*—use contextually relevant short films as triggers. *African Transformation* developed toolkits with facilitator’s guides to support analytical thought and deep reflection around the trigger videos. *Through our Eyes*, which was implemented in Northern Uganda, supported community members to produce their own short films about SRH and gender issues they found relevant. The films were screened in small community groups and discussion was facilitated by the community members who had been involved in producing the films. Key informants contend that using film or other creative triggers can reduce reliance on highly skilled facilitators and increase scalability.

4.2 Promising Approaches to Addressing Gender Inequality with Adolescents

The project review revealed that many projects addressing ASRH do not include a significant focus on gender in the intervention design or in the expected results. By looking closely at the projects that do include outcomes related to gender equality or that have clearly articulated strategies to address unequal gender norms among adolescents, the project review team gleaned several important lessons and recommendations.

Look inward first

Gender experts interviewed for the project review stressed the importance of providing project staff with the opportunity to reflect on their own beliefs, norms, and behaviors as they relate to ASRH and gender, including GBV. Though project staff are skilled and knowledgeable about ASRH and gender, they—like all people—are shaped by the normative environment in which they live and work, and their personal beliefs and values invariably impact their work with communities. Project staff may have the same biases, misconceptions, or unequal norms

Provide project staff with the opportunity to reflect on their own beliefs, norms, and behaviors related to ASRH and gender, including GBV.

that the project is aiming to address. Therefore, it is critical that projects lay a foundation for success by ensuring that project staff not only understand the key themes, but that they can be role models and act in a more gender equitable way in their daily lives as members of the communities in which the project is operating. Projects such as CARE’s *Inner Spaces Outer Faces* project prioritized staff reflection and dialogue

on gender norms and SRH using a series of activities developed for that purpose. These internal staff reflection exercises led to shifts in the attitudes and behaviors of staff members and to a more cohesive team that is invested in the success of the project.

Multisectoral entry points

At least five of the projects that address gender inequality and the gendered determinants of SRH use non-health entry points to galvanize interest in the project and improve conditions for young women. A number of key informants drew attention to the multiple competing needs of people living in low-resource settings (e.g., economic and food security, water and sanitation, curative health services, etc). In such settings, people may not see the importance of gender equality or SRH to their daily lives and may be more interested in participating in projects that address their immediate felt needs such as economic or food security. Several projects in the review use savings and loans groups, literacy courses, or vocational training as key interventions to foster economic empowerment and social capital among young women. The projects use these interventions as platforms through which they address gender inequality and SRH. *Roco Kwo Women's Empowerment Program* in Northern Uganda and *Ishaka* in Burundi developed village saving and loans solidarity groups among young women, which served as a venue for exploration and reflection on gender inequality and SRH. The *Shaping the Health of Adolescents in Zimbabwe (SHAZ!)* project integrated microcredit opportunities and ASRH interventions.

Examine gender through the lens of power

Typical project approaches to address gender inequality can lack grounding in the day-to-day realities that adolescents face. That is why several projects and key informants argued for the importance of examining gender through the lens of power. Power—who has it and how it is used—can be discussed in the context of adolescents' daily lives (e.g., parents or teachers have power over adolescents; adolescents might have power over younger brothers and sisters). By looking at gender from the perspective of power, including why men and boys have power over women, positive and negative uses of power, and ways to shift power dynamics, projects can emphasize how men, boys, girls, and women can positively use power to transform the communities in which they live. The SASA! approach, developed in Uganda, pioneered using the language of power to generate reflection, dialogue, and positive community transformation around gender inequality, GBV, and HIV.

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Tailor project strategies to engage both young women and young men

Projects in the review used a variety of different approaches to working with adolescent boys and girls. Some effective projects primarily target only girls (e.g., *Ishraq* in Egypt and *Berhane Hewan* in Ethiopia) or only boys (e.g., the *Men Can Stop Rape Strength Campaign* in the United States and *Tuelimishane* in Tanzania). Other projects, which also emerged as effective, intentionally and thoughtfully engage girls and

boys separately (i.e., distinct small groups with same sex facilitators), but plan interventions to bring the two sexes together in a constructive and positive environment to foster gender equitable interaction and dialogue (e.g., *Stepping Stones* in South Africa and the *PRACHAR* program and *First Time Parents* project in India).

Key informants and project experiences suggest that men and boys can and should be engaged through existing community groups and activities to take advantage of their interests and commitments. In addition, projects that recognize the importance of public image for men and boys have also shown promise. For example, *YEAH* Uganda's *Be a Man Campaign* capitalizes on the high premium placed on men and boys' image in order to promote more gender equitable relationships and preventive behaviors. In addition, *YEAH*'s campaign demonstrates what many key informants suggested—that projects addressing gender inequality with young men should focus on their potential for making *positive* contributions to reducing violence and improving gender norms, rather than blaming or punishing men. By examining gender through a lens of power, as described above, men and boys can understand the power they have and how to use that power positively.

Many of the projects and key informants suggested that projects aiming to engage women and girls should conduct a careful analysis of the barriers and facilitators young women may face to participate in project activities. Young women (particularly young mothers), face great demands on their time and the opportunity cost of participating in a project can be high. Projects should be structured to work with young women in a way that accommodates their challenges. For example, projects may seek to engage women through existing groups (e.g., religious activities or savings groups) or build small groups that foster networks and social capital among adolescents. As demonstrated by the *Safe Spaces* approach in Ethiopia, Guatemala, Egypt, and several other countries, all-girl small groups can provide the opportunity for adolescent girls to form friendships; develop self-worth and self-efficacy; and discuss sexuality, reproductive health, gender dynamics, and GBV.

4.3 Promising Practices for Scale-up

Scaling up has been a consistent challenge for adolescent and gender projects because most approaches to address gender inequality rely on highly skilled facilitators and time intensive interventions. Though real challenges to scale-up exist, the project review revealed several important factors that should be considered when developing a scalable intervention model.

Build on existing platforms

Key informants emphasized the importance of building project interventions on existing platforms such as public sector services, community groups with regional or national networks, and mass media (Box 4). Projects that were able to go to scale or had strong potential for scalability (e.g., the *Good Schools Program* in Uganda, the *Geração Biz Program* in Mozambique, and the *Gender Equity Movement in Schools* project in India) integrated program interventions into existing public sector services through close collaboration with the government and civil society. *Straight Talk*, which has scaled up in Uganda, used mass media as the main platform for scale-up and built on existing platforms such as schools and youth centers to foster group learning and reflection. The *Soul City* program in South Africa did the same. In addition, projects can improve scalability by integrating interventions into common cultural platforms or rituals. For example,

the *Climbing into Manhood* project capitalized on the ritual of male circumcision seclusion in Kenya to discuss healthy sexual behavior and more equitable gender norms with young men.

Box 4: Potential Platforms for SRH and Gender Programming for Adolescents

Schools	Health services	Youth clubs
Girls Guides/Girls Scouts	Cultural traditions	Farmers groups
Religious groups	Radio programs	Sports teams

Use scalable products

Projects that developed tools, videos, or radio programs that can be easily used by others in new settings have a greater potential for scale-up. For example, the *African Transformation* project developed a toolkit that includes video, audio, and written narratives, a facilitator’s guide, and other tools to facilitate discussion and reflection on gender norms and SRH. The toolkit allowed the project’s approaches to be replicated and adapted in at least five different African countries. A number of other projects identified in the review took this approach, including *Good School*, *DEAL*, *Gender Equity Movement in Schools*, *PRACHAR*, *Program H*, *SASA!*, *Soul City*, *Stepping Stones*, and *Through our Eyes*, among others.

Simplify

Often projects addressing complex and nuanced subjects like SRH and gender are intricate and multifaceted. However, during the key informant interviews, experts stressed the importance of developing a simple project in order to increase its scalability. Projects that are clearly designed with a discrete set of complementary interventions which are well-tailored to reach the target population are more likely to be implemented at scale with quality and fidelity.

Use pilot sites as learning labs

Projects that successfully went to scale noted the importance of using pilot sites in two ways after the initial pilot phase. First, pilot sites can serve as experiential learning sites for organizations and decision makers working in new project areas to visit. At the sites, stakeholders learn how the intervention can be implemented and are motivated by seeing a successful model. Secondly, pilot sites can serve as test sites for new intervention components and as sites for operations research to learn more about particular elements of the intervention. *Geração Biz*, which was scaled up to cover all the provinces in Mozambique, used pilot sites throughout the program. For example, the program tested out the feasibility and acceptability of integrating antiretroviral therapy into youth-friendly SRH service sites that began as pilot sites.

Understand and address tension between scale and quality

Scale-up literature clearly describes the tension between scale and quality.³ As project interventions are replicated across geographic areas, project designers have less control over fidelity to the original project approaches. While it is difficult to avoid challenges related to quality, it is important to recognize the challenges and make a plan to mitigate them. In developing scale-up strategies, projects can develop tools

to facilitate implementation, guidelines to support fidelity, and plan for routine monitoring and quality improvement.

4.4 Promising Approaches for Post-Conflict Settings

The conflict in Northern Uganda has shaped nearly every aspect of life, including norms, attitudes, and practices related to ASRH and gender. The importance of the post-conflict setting to the *GREAT* project required that the project review intentionally seek out and learn from projects implemented in Northern Uganda and other post-conflict settings. In addition, key informants with experience in post-conflict settings were asked for recommendations and lessons learned related to this context in particular. The considerations described below emerged from a close review of the interviews with these key informants and the nine highly relevant projects identified during the project assessments.

Rebuild communities and revitalize culture

In post-conflict settings, community members are just beginning to rebuild the communities and cultural traditions that were destroyed during the conflict. Key informants noted that this is at once a challenge and an opportunity to strengthen positive cultural traditions and shape more gender equitable norms as communities and cultural traditions are reestablished.

Understand and respond to the unique experiences of adolescents growing up in conflict

In post-conflict settings, in particular, it is critical to understand young people's experience during the conflict before designing and implementing project activities. For example, young women may have experienced sexual violence while young men may have served as child soldiers. Projects should not assume that all young people experienced the conflict in a similar way and should ensure that activities do not overlook traumatic past experiences (e.g., a young women who experienced sexual violence may not feel comfortable participating in group activities with an ex-combatant). In addition, an expert on gender in post-conflict settings noted that young women are often neglected in the resettlement process and that efforts to address gender inequality in this context should support young women to build social networks and social capital and to find their voices in the new post-conflict community setting.

Efforts to address gender inequality should support young women to build social capital and to find their voices in the new post-conflict community setting.

Address health services and psychosocial support infrastructure

Violent conflict disrupts social services and after conflicts health services are frequently slow to rebuild. This is particularly true for youth-friendly services that adolescents need to ensure their SRH needs are comprehensively and appropriately addressed. In addition, psychosocial support services – critical for adolescents and adults alike – are seldom provided in a post-conflict setting. Key informants suggested that interventions to improve health and psychosocial services are essential and address the immediate and tangible needs of people. These types of project interventions can serve as entry points to address more complex issues like gender inequality. Several projects, including the *Positive Prevention Project* and *Northern Uganda Malaria, AIDS, and Tuberculosis project (NUMAT)*, are working to rebuild the health service infrastructure in Northern Uganda and tailor those services to adolescents.

5. Conclusion

The findings of the project review represent the combined experiences of 61 projects and 27 experts and implementers in the areas of ASRH and gender. While the project review resulted in important recommendations and considerations, gaps in evidence and programming experience also emerged. For example, very few projects were scaled up and those that were focused more on ASRH and less on gender inequality. Only about half the projects had evaluations of any kind and very few were published in peer reviewed literature. The documentation of the projects left many unanswered questions and failed to analyze the challenges and opportunities associated with each project in a way that encouraged project learning and transferable lessons. As the *GREAT* project enters Phase II, it will seize the opportunity to contribute to filling these gaps by rigorously testing a pilot intervention model that will be developed based on the findings of this project review and ethnographic research and will document the results, challenges, successes, and lessons learned.

¹ Literature reviews used include:

World Health Organization. 2007. Engaging men and boys in changing gender-based inequity in health: evidence from programme interventions. Geneva.

Rottach, E., Schuler, S., Hardee, K. 2009. Gender perspectives improve reproductive health outcomes: new evidence. Washington, DC: Interagency Gender Working Group.

Institute of Reproductive Health. 2010. Advancing promising program and research/evaluation practices for evidence-based programs reaching very young adolescents. Washington, DC.

² Rottach, E., Schuler, S., Hardee, K. 2009. Gender perspectives improve reproductive health outcomes.

³ World Health Organization/ExpandNet. 2009. Practical guidance for scaling up health service innovations. Geneva.

Appendix 1: Projects Reviewed

The projects below are grouped by the primary strategy as determined by the project review team based on available project information. Nearly every project in the review used multiple, complementary strategies. The categorization below represents the project review team’s understanding of each project’s primary strategy.

Project name Implementing partner Location (date)	Key strategies	Effectiveness (see explanation Appendix 4)	Relevance to GREAT (see explanation Box 2)
Small group education, reflection, and dialogue			
Abriendo Oportunidades Population Council Guatemala (2002- present)	Small group education, reflection, and dialogue Livelihoods and literacy training Peer education	Overall effectiveness: Promising	Relevant, but questions around scalability
African Transformation Program Johns Hopkins University Center for Communication Program (JHU/CCP), Communication for Development Foundation Uganda (CDFU) (in Uganda) Uganda, Nigeria, Zambia, Côte d’Ivoire, and Malawi (2007-ongoing approach)	Small group education, reflection, and dialogue	Overall effectiveness: Effective	Relevant
Allies of Change: Creating Safer Environment for Girls, Women and Boys Save the Children, Safer Society (youth-led organization) Nepal (2008-2009)	Small group education, reflection, and dialogue (involve men and boys) Peer education	No evaluation found	Relevant, but questions around scalability
Berhane Hewan Ministry of Youth and Sports, UNFPA, technical support from Population Council Ethiopia (2004-2006)	Small group education, reflection, and dialogue Community mobilization Conditional transfer incentives	Overall effectiveness: Effective	Relevant, but questions around scalability

Biruh Tesfa Population Council Ethiopia (2006-2008)	Small group education, reflection, and dialogue Vocational and literacy training Community mobilization Health services	Overall effectiveness: Effective	Relevant with questions around scale
CHOICES Save the Children with evaluation by Institute for Reproductive Health Nepal (2009-present)	Small group education, reflection, and dialogue	Overall effectiveness: Effective	Relevant, but questions around scalability
Climbing into Manhood Program Chogoria Hospital Kenya (article published 2004)	Small group education, reflection, and dialogue (during traditional circumcision seclusion)	Overall effectiveness: Unclear	Relevant
Conscientizing Male Adolescents Calabar International Institute for Research, Information, and Development Nigeria (1995-Present)	Small group education, reflection, and dialogue Peer education	No evaluation found	Relevant, but questions around scalability
DEAL War Child Holland and UNFPA Northern Uganda (2009-present) and other post-conflict settings	Small group education, reflection, and dialogue (age and life-stage segmented small groups and tailored curriculum) Community mobilization	No evaluation found	Highly relevant
Delaying Age at Marriage in Rural Maharashtra International Center for Research on Women, Institute of Health Management, Pachod India (2001-2006)	Small group education, reflection, and dialogue Community mobilization	Overall effectiveness: Effective	Relevant, but questions around scalability
First-Time Parents Population Council India (2003-2004)	Small group education, reflection, and dialogue Peer education Home visits to young couples Community mobilization	Overall effectiveness: Effective	Relevant

Gender Equity Movement in Schools International Center for Research on Women, the Committee of Resource Organizations for Literacy, Tata Institute for Social Sciences India (2008-2011)	Small group education, dialogue, and reflection (school-based) Community mobilization	Overall effectiveness: Effective	Relevant
Girl Power Girl Power Initiative Nigeria (1994-Present)	Small group education, reflection, and dialogue (including school-based sexuality education) Community mobilization	Overall effectiveness: Promising	Relevant
Good Schools Program Raising Voices Uganda (2009- present)	Small group education, reflection, and dialogue (in schools with teachers, administrators, students) Community mobilization (school-based community)	No evaluation found	Relevant
Malawi Male Motivator Save the Children with evaluation by FHI Malawi (2007-2008)	Small group education, reflection, and dialogue Peer education Community mobilization	Overall effectiveness: Promising	Relevant
New Visions Program CEDPA and 216 local organizations Egypt (2002-2004)	Small group education, reflection, and dialogue	Overall effectiveness: Promising	Relevant, but questions around scalability
PRACHAR (Phases I, II, III) Pathfinder International India (2001- 2012)	Small group education, reflection, and dialogue tailored to age and life stage Home visits to young married couples by community change agents Community mobilization	Overall effectiveness: Effective	Relevant
Program H Instituto Promundo Brazil (2002-2004)	Small group education, reflection, and dialogue Mass media (a “lifestyle” social marketing campaign)	Overall effectiveness: Effective	Relevant
Safer Environment for Girls Save the Children Nepal (1999-2007)	Small group education, reflection, and dialogue (single-sex groups) Community mobilization	Overall effectiveness: Unclear	Relevant, but questions around scalability

Stepping Stones Medical Research Council South Africa (2003-2005), Uganda, 40 other countries	Small group education, reflection, and dialogue (single-sex groups) Community mobilization	Overall effectiveness: Effective	Relevant
Strength Campaign Men Can Stop Rape USA (1997-Present), South Africa	Small group education, reflection, and dialogue (school-based) Mass media (PSAs, posters, etc)	Overall effectiveness: Promising	Relevant
Through Our Eyes The American Refugee Committee, Communication for Change Liberia , Northern Uganda, Southern Sudan, Rwanda, Philippines (2006-present)	Small group education, reflection, and dialogue (uses trigger films developed by communities)	Overall effectiveness: Promising	Highly relevant
Tostan Community Empowerment Program Tostan Senegal (1996-2004) and many other countries, including Ghana, Burkina Faso, and Somalia	Small group education, reflection, and dialogue Community mobilization	Overall effectiveness: Effective	Relevant, but questions around scalability
Western Balkan Gender-based Violence Prevention Initiative CARE, International Center for Research on Women, Instituto Promundo Bosnia, Herzegovina, Croatia, Montenegro, Serbia (2008-2010)	Small group education, reflection, and dialogue (school-based) Peer education Mass media, including films produced by program participants and a “lifestyle” social marketing campaign Advocacy	No evaluation found	Highly relevant
Women and Girls Empowerment Program Pathfinder International Ethiopia (2006-2012)	Small group education, reflection, and dialogue Peer education Community mobilization Health services	Overall effectiveness: Effective	Relevant

Yaari Dosti Horizons/ Population Council, Committee of Resource Organizations, MAMTA, Instituto Promundo, India (2003-2007)	Small group education, reflection, and dialogue Mass media (a “lifestyle” social marketing campaign)	Overall effectiveness: Effective	Relevant
Health services			
Adolescent Reproductive Health Project Population Council, PATH, Ministry of Education, Science and Technology, Ministry of Health, Ministry of Gender, Sports, Culture and Social Services Kenya (2007-2008)	Health services Peer education School-based sexuality education	Overall effectiveness: Effective	Relevant
African Youth Alliance Pathfinder, PATH, UNFPA Uganda, Ghana, Tanzania, Botswana (2000-2005)	Health services Peer education Mass media Advocacy	Overall effectiveness: Effective	Relevant
Breaking Barriers Save the Children the Inter-Religious Council of Uganda, Plan International Uganda (2006-2010)	Health services (OVC support and counseling)	No evaluation found	Less relevant
Geração Biz Government of Mozambique, technical assistance from Pathfinder International and UNFPA Mozambique (1999-present)	Health services Peer education (school-based and community-based) School-based sexuality education Community mobilization	Overall effectiveness: Effective	Relevant
Naguru Teenage Information and Health Center Uganda (1995-present)	Health services Peer education Mass media (radio)	No evaluation found	Relevant, but questions around scalability

Northern Uganda Malaria AIDS Tuberculosis Program John Snow, Inc., AIDS Information Centre (AIC), World Vision Uganda (2006-2012)	Health services Community mobilization	No evaluation found	Relevant
Positive Prevention Project Save the Children, PSA, Health Alert Uganda (2009- present)	Health services Community mobilization Vocational training	No evaluation found	Less relevant
Program for Enhancing Adolescent Reproductive Health Life Ministry of Gender and Community Development Uganda (1995-2000)	Health services Community mobilization with youth and key stakeholders Mass media (electronic, print) Peer education Vocational skills building	No evaluation found	Relevant
Promoting HIV Prevention Care and Support for In and Out of School Children in Gulu and Amuru Straight Talk Foundation, Ministry of Education, Save the Children, Health Alert Uganda Uganda (2010-2011)	Health services Peer education Mass media (radio) Small group education, reflection, and dialogue	No evaluation found	Highly relevant
Promoting Safer Choices for Adolescents CARE, YouthNet (FHI) Uganda (2004-2007)	Health services Advocacy Mass media (booklets, pamphlets, posters, etc) Community mobilization	Overall effectiveness: Unclear	Relevant
UNFPA, Marie Stopes project in Northern Uganda UNFPA, Marie Stopes Uganda (2009-2010)	Health services Peer education Community mobilization	No evaluation found	Relevant, but questions around scalability

Women Empowerment Program International Rescue Committee Uganda (2009-present)	Health services (GBV)	No evaluation found	Relevant, but questions around scalability
Youth Post Test Club AIDS Information Center Uganda (2005-present)	Health services Peer education	No evaluation found	Less relevant
Community mobilization			
Addressing Child Marriage in Nepal through Behavior Change Communication and Social Mobilization: Chunauti CARE Nepal (2008-2011)	Community mobilization Peer education Small group education, reflection, and dialogue Mass media	No evaluation found	Relevant
Conflict Prevention in Kosovo CARE Kosovo (2009-2011)	Community mobilization (capacity building of youth-led movement)	No evaluation found	Less relevant
Dialogue Valorisant CARE Burundi (2005-present)	Community mobilization (using role models)	No evaluation found	Relevant, but questions around scalability
Gezaho Project (Phase II) CARE Burundi (2006-2007)	Community mobilization Small group education, reflection, and dialogue	Overall effectiveness: Promising	Relevant
Girijambo CARE Burundi (2010- 2013)	Community mobilization Small group education and dialogue, including village savings and loans groups Mass media (posters, radio) Health services	No evaluation found	Highly relevant
Great Lakes Advocacy Group CARE Burundi, Rwanda, Northern Uganda (2009- 2010)	Community mobilization Advocacy Health services (GBV)	No evaluation found	Relevant

Guria Adolescent Health Project CARE, Guria Youth Resource Center, Child is the Future Georgia (2004-2007)	Community mobilization Health services Small group education, reflection, and dialogue	Overall effectiveness: Effective	Relevant
Safe Age of Marriage Project Extending Service Delivery (led by Pathfinder International) with Yemeni Women's Union Yemen (2008-present)	Community mobilization Role models	Overall effectiveness: Promising	Relevant
SASA! Raising Voices, CEDOVIP, Makerere University, PATH Uganda, Tanzania (2009-Present)	Community mobilization Advocacy Small group reflection and dialogue	No evaluation found	Highly relevant
Tuelimishane Tuelimishane Project, Horizons/Population Council Tanzania (2003-2007)	Community mobilization Peer education	Overall effectiveness: Effective	Relevant, but questions around scalability
Wayo Canadian Physicians for AID and Relief, Makerere University Medical School, University of British Columbia Uganda (2002-2006)	Community mobilization (through traditional Aunty role)	Overall effectiveness: Unclear	Relevant, but questions around scalability
Mass media			
Be a Man Campaign Young Empowered and Healthy (YEAH) Uganda (2006)	Mass media (commercials, posters, billboards) Small group education Peer education	Overall effectiveness: Promising	Highly relevant
BRIDGE and BRIDGE II JHU/CCP in partnership with Save the Children, Population Service International, MANSO Malawi (2003-2009; 2009-2013)	Mass media (radio, print, and films) Community mobilization Peer education Small group reflection and dialogue	Overall effectiveness: Effective	Relevant

Entre Nós Instituto Promundo Brazil (2007-present)	Mass media (radio, comic books, music) Peer education Small group education, reflection, and dialogue	No evaluation found	Relevant
Soul City South African Soul City Institute for Health and Development Communication, National Network on Violence Against Women South Africa, Namibia, Lesotho, Swaziland, Mozambique, Zambia, Zimbabwe, Malawi, and Tanzania (1999-present)	Mass media (television, radio, print) Small group reflection and dialogue Advocacy	Overall effectiveness: Effective	Relevant
Straight Talk Straight Talk Foundation Uganda (2004- present)	Mass media (print, radio) Health services Peer education	Overall effectiveness: Effective	Highly relevant
Young Empowered and Healthy (YEAH) John Hopkins, Uganda AIDS Commission, Communication for Development Foundation Uganda (CDFU), Straight Talk Uganda (2004-Present)	Mass media (radio shows, comic books, print) Community mobilization Peer education	No evaluation found	Relevant
Economic empowerment, literacy, or vocational skills			
Expanding Social Protection Project Ministry of Gender, Labor, and Social Development Uganda (2009-2015)	Economic intervention (cash transfers, government social protection pilot)	No evaluation found	Less relevant
Ishaka CARE Burundi (2008-present)	Economic intervention (village savings and loan groups; vocational and financial literacy skills) Small group education Peer education	No evaluation found	Relevant, but questions around scalability

Ishraq Save the Children, Population Council, CARITAS, CEDPA Egypt (2001-2003)	Small group literacy education, livelihood skills training Community mobilization	Overall effectiveness: Effective	Relevant, but questions around scalability
Roco Kwo CARE Uganda (2009- present)	Economic intervention (village savings and loan groups, agricultural production support, vocational skills) Community mobilization Advocacy Health services (GBV)	No evaluation found	Highly relevant
Shaping the Health of Adolescents in Zimbabwe (SHAZ!) RTI, Pangaea Global AIDS Foundation, Zimbabwe AIDS Prevention Program Zimbabwe (2002-2005)	Microcredit and vocational skills Sexuality education Health services	Overall effectiveness: Effective	Less relevant

Appendix 2: Key Informants Interviewed

Key informants interviewed by the project review team were identified by the GREAT project Technical Advisory Group, GREAT project partners, and by referral from other key informants.

	Name	Organization, Country
1	Angela Acosta	American Refugee Committee, Uganda
2	Rose Amulen	CARE Gulu, Uganda
3	Carol Angir	Mama Cash, Netherlands
4	Michal Avni	USAID, USA
5	Amy Babchek	Nike Foundation, USA
6	Wendy Baldwin	Population Council, USA
7	Gary Barker	Instituto Promundo, USA
8	Doris Bartel	CARE, USA
9	Kibwola Denis and Falal Faith	Straight Talk, Uganda
10	Mollie Fair and Grace Latigi	UNFPA, Uganda
11	Anne Gamurorwa and Eluk Dennis	CDFU, Uganda
12	Margaret Greene	Independent consultant, USA
13	Ans de Jager	War Child Holland, Uganda
14	Mihira Karra	USAID, USA
15	Patrick Kagurusi	Makerere University School of Public Health, Uganda
16	Gillian Kiplagat	War Child Holland, Uganda
17	Cate Lane	USAID, USA
18	Lori Michau	Raising Voices, Uganda
19	Kevin McNulty	International Rescue Committee, Uganda
20	Jody Myrum	Nike Foundation, USA

21	Bram Naidoo	SIDA, Mozambique
22	Pamela Nangok	AIDS Information Center, Lira Regional Office, Uganda
23	Strøm Nina	formerly NORAD, currently Embassy of Norway, Mozambique
24	Francis Obutu	Health Alert, Uganda
25	Sam Odong	War Child Canada, Uganda
26	Alex Opio Chono	International Rescue Committee, Uganda
27	Geoffrey Oyat	Save the Children, Liberia

Appendix 3: Criteria Used for Assessing Overall Effectiveness

Two sets of criteria—evaluation design and level of impact—were combined into an overall effectiveness ranking of *effective, promising, or unclear* practices/approaches based on the methodology used in the publication *Engaging Men and Boys in Changing Gender-Based Inequity in Health: Evidence from programme interventions*, published by the World Health Organization in 2007.

Criterion 1: Evaluation Design

Rigorous

- Quantitative data with:
 - Pre- and post-testing
 - control group or regression (or time-series data)
 - analysis of statistical significance
 - adequate sample size

and/or

- systematic qualitative data with clear analytical discussion and indications of validity

Moderate

- Weaker evaluation design, which may be more descriptive than analytical
- Quantitative data lacking one of the elements listed above
- May include unsystematic qualitative data

Limited

- Limited quantitative data lacking more than one of the elements listed above

and/or

- Qualitative data with description only or process evaluation data only

Ongoing

Criterion 2: Level of Impact

High

- Self-reported behavior change (with or without knowledge and attitude change) with some confirmation, triangulation, or corroboration by multiple actors or stakeholders consulted (including community leaders, health professionals, and women and partners)

Medium

- Self-reported change in attitude (with or without knowledge change) among men (but no behavior change).
- May include some consultation with stakeholders or multiple actors.

Low

- Change in knowledge only or unclear or confusing results regarding change in attitudes and behavior

Ongoing

Overall Effectiveness

Effective

- Rigorous design and high or medium impact
- Moderate design and high impact

Promising

- Moderate design and medium or low impact
- Rigorous design and low impact

Unclear

- Limited design regardless of impact

Appendix 4: Tools and Resources Identified through Key Informants and Program Documents

This is a list of potentially useful resources that the *GREAT* team could draw on during Phase II implementation. It is not comprehensive and does not necessarily represent an endorsement of all the tools.

Tool name	Organization and link to the tool(s)	Target	Description/use of tool
Coaching Boys into Men; A Violence Prevention Guide for Football Coaches	UNICEF http://www.unicef.org/southafrica/resources_8161.html	Young people (10-24)	Developed based on the principle that coaches are often viewed as influential people in the lives of boys, this manual is designed to teach coaches how to take advantage of soccer situations to encourage dialogue and reflection among young men around gender inequality and violence.
Collective Leadership Works: Preparing Youth and Adults for Community Change	Innovation Center for Community and Youth Development, Kellogg Leadership for Community Change http://www.servicelearning.org/filemanager/download/8537_FinalCollectiveLeadershipToolkit.pdf	Youth and adult community leaders	A guide to promoting youth and adult partnerships for collective leadership and action around community development, community building, or social justice efforts. It includes several sections that focus on creating positive youth–adult partnerships.
Engaging Men and Boys in Gender Equality and Health: A Toolkit for Action	UNFPA http://www.unfpa.org/public/home/publications/pid/6815	Men and boys	A toolkit for program planners, health providers, peer educators, advocates and others who work on issues related to gender equality, SRH, HIV and AIDS, and GBV prevention. The toolkit has examples of programs that have engaged men and boys, suggestions for effective strategies, and tools for needs assessments and monitoring and evaluation.
DEAL curriculum and guides	War Child Holland http://www.warchildlearning.org/ideal	Very young adolescents; older adolescents; families; communities; and young mothers (also modified for sex workers)	The DEAL package is a life skills intervention that builds the resilience of children and young people in conflict affected areas. The I DEAL curriculum targets very young adolescents and consists of 6 thematic modules for children and young people. Additional DEAL curricula have been developed to address the specific challenges faced by young people, girls, parents and teachers. These are called BIG DEAL, SHE DEALS, PARENTS DEAL and TEACHERS DEAL.

<p>Gender Equity Movement in Schools (GEMS)</p> <p>GEMS Diary GEMS Facilitator Guide GEMS Campaign Guide</p>	<p>International Center for Research on Women (ICRW), CORO, and TISS</p> <p>http://www.icrw.org/where-we-work/gender-equity-movement-schools-gems</p>	<p>Adolescents, especially very young adolescents (10-14)</p>	<p>GEMS curriculum and tools were used in schools to encourage equal relationships between girls and boys, help examine the social norms that define men’s and women’s roles, and address different forms of violence and how to intervene.</p> <p>The GEMS diary is a puberty workbook for very young adolescents.</p> <p>The GEMS Facilitator Guide is meant for adult group leaders.</p>
<p>Girl-Centered Program Design: A Toolkit to Develop, Strengthen, and Expand Adolescent Girls Programs</p>	<p>Population Council</p> <p>http://www.popcouncil.org/publications/books/2010AdolGirlsToolkit.asp</p>	<p>Girls and young women (10-24)</p>	<p>This toolkit is a comprehensive guide to programming for adolescent girls. It includes sections on program design, program content, and monitoring and evaluation.</p>
<p>Growth and Changes Puberty Book</p>	<p>Marni Sommer, Columbia University, Tanzania</p> <p>http://www.biomechanism.com/wp-content/uploads/2011/06/Puberty-Book-Growth-and-Changes.pdf</p>	<p>Very young adolescents (10-14)</p>	<p>A workbook that helps very young adolescents explore and understand puberty.</p>
<p>Good School Toolkit</p>	<p>Raising Voices</p> <p>http://www.raisingvoices.org/children/good_school_toolkit.php</p>	<p>Educators and school administrators</p>	<p>The Good School Toolkit, developed and implemented in Uganda, contains a set of ideas and tools that help schools explore what a good school is and guide schools through a process to create a “Good School” that supports gender equality and non-violent behaviors.</p>
<p>Husbands Curriculum</p>	<p>Population Council</p>	<p>Men married to young women</p>	<p>Curriculum used to address gender equality, sexuality, roles in the household, and partner communication. The curriculum has been developed and implemented in Ethiopia.</p>
<p>Inner Spaces Outer Faces Initiative (ISOFI) Toolkit</p>	<p>IRCW and CARE</p> <p>http://www.care.org/cares-work/whatwedo/health/downloads/isofi_toolkit.pdf</p>	<p>Project staff, community leaders, and community members</p>	<p>A toolkit including training, reflection, and monitoring activities that can help identify, explore, and challenge the social constructions of gender and sexuality in the lives of project staff, the lives of project beneficiaries, program interventions, and the community as a whole.</p>

It's All One Curriculum: Guideline and Activities for a Unified Approach to Sexuality, Gender, HIV, and Human Rights Education	CREA, Girls Power Initiative, IPPF, International Women's Health Coalition, Mexfam, Population Council, International Sexuality and HIV Curriculum Working Group http://www.popcouncil.org/publications/books/2010_ItsAllOne.asp	Youth (15-24)	It's All One Curriculum is a resource kit for developing a unified curriculum on sexuality, gender, HIV, and human rights. The curriculum is evidence-based, comprehensive, rights-based, and gender sensitive. The resources include many activities and guidelines that could inform any tools or products adapted by the <i>GREAT</i> project.
Mobilizing Communities to Prevent Domestic Violence	Raising Voices http://www.raisingvoices.org/publications.php	NGOs and community-based organizations	Community mobilization tool that provides instruction on community assessments, community awareness raising, building networks, and taking action on GBV.
My Changing Body	Institute of Reproductive Health http://www.irh.org/?q=fertility_awareness_resources	Very young adolescents (10-14)	Fertility awareness and body literacy curriculum for very young adolescents.
Pathways to Change	Pathfinder International http://www.pathfind.org/site/PageServer?pagename=Pubs_Behavior_Change	Community groups (could also be used with young people)	Participatory game to elicit barriers and facilitators to changing behaviors and norms. Information generated by the participants (i.e., the barriers and facilitators of certain behaviors) can be used to develop scripts for videos or radio shows that can then be used for dialogue and reflection at scale.
SASA! An Activist Kit to Prevent Violence Against Women and HIV SASA! Film	Raising Voices http://www.raisingvoices.org/sasa/kit_download.php	Communities (evaluation focuses on 15-49)	SASA! is a comprehensive, user-friendly program tool for organizations interested in mobilizing communities to prevent violence against women and HIV infection. SASA! includes practical resources, activities, and monitoring and assessment tools for local activism, media and advocacy, communication materials, and training that organizations working on violence or HIV and AIDS can use to incorporate these cross-cutting issues into their work. SASA! was developed and implemented in Uganda and later replicated in other settings.
Social Analysis and Action Tools (SAA)	CARE http://www.care.org/cares/work/whatwedo/health/downloads/social_analysis_manual.pdf	Broad community	The SAA toolkit includes participatory activities on key themes of gender, power, and SRH. Activities require a facilitator and can be used with staff, partners, and communities to inspire reflection and action.
The Cool Parent's Guide	Save the Children, Malawi	Parents of 7-11 year olds	Guide to help parents discuss sexuality and SRH issues (HIV in particular) with their children.

Through Our Eyes tools	American Refugee Committee http://www.arcrelief.org/site/PageServer?pagename=successtories_ThroughOurEyes%20	Community	Tools include a summary of the different videos produced (11 different videos dealing with sexuality, gender, and violence in Northern Uganda) and a participatory video guidance note.
Youth-Friendly Services (YFS) training manual, YFS assessment tool, and YFS certification tool	Pathfinder International http://www.pathfind.org/site/PageServer?pagename=Pubs_Training_Curriculum http://www.pathfind.org/site/PageServer?pagename=Pubs_Job_Aids	Health providers, program managers, and district health officials	A health provider training curriculum on ASRH and YFS, YFS facility assessment tools for program managers and health officials, and a YFS certification tool based on the assessment tool.